

ADULT PALLIATIVE MEDICINE**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 practise 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
_____ Date	_____ Name of Postgraduate Dean/ Assessor for CCR	_____ Signature
_____ Date	_____ Name of Resident	_____ Signature

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 dependent on the updated FITER.

ADULT PALLIATIVE MEDICINE FITER (2016)

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

A rationale must be provided to support ratings with asterisks.	EXPECTATIONS				
	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
MEDICAL EXPERT					
a. Demonstrates a specialist's knowledge of the basic scientific and clinical knowledge required for the competent practice of adult Palliative Medicine					
b. Elicits histories and physical examinations that are complete, (including physical, psychological, social, spiritual, and functional domains), accurate, well organized and relevant to adult Palliative Medicine					
c. Establishes and maintains clinical knowledge, skills and attitudes in the following areas relevant to adult Palliative Medicine:					
• Physical symptoms and conditions					
• Pain					
• Emergencies/urgencies					
• Psycho-social, spiritual, and existential issues					
• Therapies, including medications, and alternative and complementary					
• Oncologic diseases					
• Non-oncologic diseases					
d. Applies the principles of adult Palliative Medicine to specific patient populations					
• Pediatric patients					
• Geriatric patients					
e. Demonstrates proficient and appropriate management of dying patients including those imminently dying					
f. Demonstrates proficient and an appropriate provision of community-based palliative care					

ADULT PALLIATIVE MEDICINE FITER (2016)

g. Demonstrates proficient and appropriate management of symptoms and issues relevant to patients and patients' families, including physical, psychological, social, spiritual and functional					
h. Uses all pertinent information to arrive at complete and accurate clinical decisions					
i. Demonstrates thorough knowledge of, indications for, and complications of therapeutic interventions relevant to adult Palliative Medicine					
j. Generates appropriate management plans throughout the disease trajectory that balance disease modifying treatments and symptom management with patient-centred goals of care					
k. Identifies and appropriately responds to relevant moral and ethical issues					
l. Identifies and appropriately responds to suffering					
m. Recognizes and manages urgent/emergent conditions resulting in prompt and appropriately prioritized treatment					
n. Manages the care of patients with chronic or life-threatening illness throughout the disease trajectory, in various roles and models of palliative care, and across settings of care					
o. Demonstrates appropriate use of rehabilitation services					
p. Identifies factors affecting prognosis, and tools used for prognostication and their benefits and limitations					
<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>					

ADULT PALLIATIVE MEDICINE FITER (2016)

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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
PROCEDURES AND CLINICAL SKILLS					
Demonstrates the ability to perform diagnostic and therapeutic procedures described in the Medical Expert sections 5.1 and 5.2 of the <i>Objectives of Training in Adult Palliative Medicine</i>					
a. Demonstrates proficient and appropriate skills for diagnostic and therapeutic thoracentesis					
b. Demonstrates proficient and appropriate skills for diagnostic and therapeutic paracentesis					
c. Inserts subcutaneous access					
d. Initiates and manages continuous ambulatory delivery devices (CADD pumps)					
e. Demonstrates proficient and appropriate management of the following existing therapeutic interventions:					
• Biliary drainage tubes					
• Chest tubes					
• Enteric feeding tubes					
• Epidural, intrathecal, and regional block catheters					
• Implantable cardiac defibrillators					
• Long term intravenous lines					
• Non-invasive ventilation					
• Renal and bladder drainage					
• Tracheostomy tubes					
• Venting gastrostomy tubes					
Obtains appropriate informed consent for procedures and therapies					
Minimizes risk and discomfort to patients					
Overall is proficient in clinical and procedural skills relevant to adult Palliative Medicine					

ADULT PALLIATIVE MEDICINE FITER (2016)

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.

SAMPLE

ADULT PALLIATIVE MEDICINE FITER (2016)

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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
COMMUNICATOR					
a. Demonstrates positive therapeutic relationships with patients and their families that are characterized by understanding, trust, respect, honesty, and empathy					
b. Elicits and synthesizes relevant information and the perspective of patients and families accurately, including concerns across physical, functional, psychological, social, and spiritual domains					
c. Provides clear explanations of the philosophy of palliative care and therapeutic options to patients, patients' families, and health care professionals in a humane manner that encourages discussion and facilitates shared decision making					
d. Develops a common understanding with patients, their families, and health care professionals to establish shared patient-centred plans of care					
e. Addresses challenging communication issues effectively, including but not limited to obtaining informed consent, delivering bad news, and addressing anger, confusion, and misunderstanding					
f. Discusses palliative and end-of-life issues skillfully with patients and their families , including but not limited to advance care planning, location of care, palliative sedation, prognosis, treatment choices, and withholding or withdrawal of life-sustaining treatment					
g. Communicates effectively by telephone and other electronic media with patients, their families, and health care professionals					
h. Presents clinical information orally in an accurate, complete and organized fashion					
i. Prepares accurate, organized and timely written and electronic documentation					
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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
COLLABORATOR					
a. Participates effectively and constructively in formal and informal interprofessional health care teams across settings of care to provide optimal patient care					
b. Interacts effectively with other health professionals by acknowledging their roles and expertise in the assessment and management of patients with palliative and end-of-life care needs and patients' families throughout the disease trajectory and across settings of care					
c. Consults and delegates appropriately					
d. Works effectively with other health care professionals to prevent, negotiate and resolve interprofessional conflict					
e. Practices self-reflection and promotes team reflection as tools to enhance team function and support resolution of team conflict					
f. Participates in sharing of team responsibilities and workload, including clinical care, education and administration					
g. Participates in and facilitates family meetings to discuss issues, including but not limited to goals of care and discharge planning					
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.					

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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
MANAGER					
a. Describes the models of palliative and end-of-life care delivery, their utilization, advantages and disadvantages, and effect on the health care system					
b. Sets realistic priorities and uses time effectively in order to optimize professional performance					
c. Implements processes, including but not limited to self-reflection, the use of mentors, and incorporation of accepted standards of palliative and end-of-life care, to ensure personal practice improvement					
d. Employs information technology appropriately for optimal patient care					
e. Makes cost effective use of health care resources					
f. Promotes timely advance care planning and goals of care discussions to ensure appropriate use of health care resources					
g. Participates effectively in committees or meetings, and where appropriate, assumes a leadership role					
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HEALTH ADVOCATE					
a. Identifies and responds to individual patient health needs and psychosocial, spiritual and bioethical issues as part of patient care					
b. Identifies and acts on opportunities for advocacy, health promotion, and disease prevention with individuals to whom they provide care					
c. Identifies and acts on opportunities for advocacy, health promotion, and disease prevention in the communities that they serve					
d. Recognizes the possibility of competing interests between the communities served and other populations, and identifies points of influence in the health care system					
e. Identifies the determinants of health, including barriers to access to care and resources, for individual patients with palliative and end-of-life care needs, patients' families, communities and populations					
f. Identifies vulnerable or marginalized populations within the palliative and end-of-life care population					
g. Describes an approach for implementing change to reduce barriers to access of palliative and end-of-life care and improve services					
h. Describes how public policy impacts the health of patients with palliative and end-of-life care needs					
i. Demonstrates awareness of local, regional and national advocacy groups for palliative and end-of-life care					
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	* Rarely meets	* Inconsistently meets	Generally meets	Sometimes exceeds	* Consistently exceeds
SCHOLAR					
a. Demonstrates an understanding of and commitment to the need for continuous learning					
b. Recognizes and reflects on learning issues in practice					
c. Critically appraises medical information, and integrates and applies new knowledge appropriately to patient care					
d. Participates actively in academic activities					
e. Facilitates the learning of patients, patients' families, and the public					
f. Facilitates learning of other health professionals through guidance, teaching, and constructive feedback					
g. Demonstrates effective teaching skills and approaches in a variety of educational settings					
h. Contributes to the development and dissemination of new knowledge					
Completes a scholarly research, quality assurance, or educational project relevant to adult Palliative Medicine	<input type="checkbox"/> Yes		<input type="checkbox"/> No		
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.					

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PROFESSIONAL					
a. Demonstrates integrity, honesty, compassion, commitment, and respect in patient care					
b. Demonstrates an understanding of moral and ethical principles and moral values and applies this to the care of patients with palliative and end-of-life care needs and patients' families					
c. Identifies and manages sources of conflict of interest and boundary issues associated with physician-patient relationships and interprofessional collaborative practice					
d. Demonstrates an understanding of substitute decision making and advance care planning					
e. Demonstrates advanced knowledge of regulations governing the prescribing of controlled drugs, including but not limited to cannabinoids and opioids					
f. Follows accepted professional, moral, ethical, and legal codes of practice					
g. Demonstrates an awareness of one's own limits, seeking advice when necessary					
h. Incorporates self-reflection in all aspects of practice					
i. Reflects on the personal effect of providing care for patients who are suffering and patients' families, and demonstrates self-care					
j. Accepts and integrates constructive feedback into 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>					