

## 2.8 End of placement final review

### Final review – to take place at least two weeks before end of placement

<b>Name of trainee:</b>		<b>GMC number:</b>	
<b>Training period</b> <i>from:</i>		<i>to:</i>	
<b>Trust:</b>		<b>Department:</b>	

1. Please check that you have completed the following (circle yes or no as appropriate):

- |   |            |
|---|------------|
| ▪ Trainee's portfolio has been reviewed   | Yes        |
| ▪ Induction meeting took place  | Yes        |
| ▪ <i>Date:</i>  | Yes        |
| ▪ Induction meeting was recorded  | Yes        |
| ▪ Midpoint assessment took place  | Yes        |
| ▪ <i>Date:</i>  | Yes        |
| ▪ Midpoint assessment was recorded  | <b>Yes</b> |
| ▪ Attendance records are available for Foundation education programmes in the Trust and the department? | <b>Yes</b> |

### Assessment of competences

2. Has the trainee completed competence assessments in line with the *Curriculum* guidelines?

- |                         |     |
|-------------------------|-----|
| ▪ mini-CEX              | Yes |
| ▪ CbD                   | Yes |
| ▪ DOPS                  | Yes |
| ▪ Multi-source feedback | Yes |

3. Has any assessment or aspect of performance highlighted areas of concern during the placement and how have these been addressed?

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4. If these have not been addressed, please detail the specific action(s) to be taken in the next placement.

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5. Are additional assessments required to substantiate improvement? If so, please specify.

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**Trainee**

**Educational/clinical supervisor**

Signature:	Signature:
Name (print):	Name (print)
Date:	Date: