Index/Submit 1 of 8

To quickly return to questions in the assessment or directly submit the report, use the Index/Submit button.

Organization 2 of 8

The form is organized by Domains of Care. There are sentinel habits assessed within each Domain. Click on the next page to go to the next Domain of Care.

More information 3 of 8

Click on the ❶ more details about the question.

Selection 4 of 8

Selection of the rankings should be based on comparison with the CFPC Assessment Objectives and with the general standards of a competent family physician.

Comments 5 of 8

When completing the interim CFAR, include clear, specific comments and examples to justify your scoring, especially for ethical or professionalism concerns. This feedback is essential for guiding candidates and clarifying your rationale to the Exams and Evaluations Committee.

Questions | Index/Submit

Interim Clinical Field Assessment Report

In this Interim report, you are to rate the extent to which your candidate demonstrates the Sentinel Habits in each of the domains of care.

The comments section at the end of each page is so you can elaborate on your candidate's performance for each domain.

Domain of Care: Behavioral Medicine and Mental Health

Incorporates the patient's experience and context into problem identification and management. ❶

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not yet assessed

Generates relevant hypotheses resulting in a safe and prioritized differential diagnosis. ❶

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not yet assessed

Manages patients using available best practices. ❶

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not yet assessed

Demonstrates respect and/or responsibility. ❶

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not yet assessed

Selects and attends to the appropriate focus and priority in a situation. ❶

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not yet assessed

Verbal and written communication is clear and timely. ❶

- ☐ Never
- ☐ Sometimes
- ☐ Usually
- ☐ Always
- ☐ Not yet assessed

Comments: Please give overall review of your opinion of candidate performance and enter examples of comments from chart review, Mini-CEX, MSF, procedure skills field notes, and field notes to provide narrative overall picture of candidate performance.

Assessor declaration 6 of 8

This last page of the report is where assessors can identify significant areas of concern and assessment gaps. Take this as an opportunity to guide future assessments and provide formative feedback to the candidate.

Assessment of Spoken and Written Language Skills assessment form 7 of 8

Refer to this page for more details on completing the Assessment of Spoken and Written Language Skills form.

Final check 8 of 8

Prior to submitting, ensure that you have submitted enough properly completed field notes, Mini-CEX, and other assessment tools that support your CFAR decision. Also note: Once submitted candidates will have access to review, acknowledge and provide comments, if desired.

Questions | Index/Submit

Interim Clinical Field Assessment Report

Assessor's Declarations and Sign-Off

This Interim Report includes documentation of the Candidate's competence to deliver patient care in person and via telemedicine:

- ☐ Yes
- ☐ No

Do you have any concerns about the candidate's competence to deliver safe and effective telemedicine care in accordance with the College of Physicians and Surgeons of British Columbia Practice Standard, Telemedicine (revised April 1, 2020)?

- ☐ Yes
- ☐ No
- ☐ Not yet assessed

If yes, please document:

Have **frequent, consistent, and significant** Candidate communication problems that may impact patient safety been identified, including communication with colleagues, administrative staff and patients (either in-person or via telemedicine)?

If yes, please complete an *Assessment of Spoken and Written Language Skills* assessment form and submit it with this Interim Report. If no, no further action is required at this time.

- ☐ Yes
- ☐ No

Has the candidate demonstrated immoral or unethical behaviour?

- ☐ Yes
- ☐ No

If yes, please document below:

How many ER shifts has the candidate completed to date?

Do you have any *preliminary* concerns about the candidate's ability to provide care in an ER setting?

- ☐ Yes
- ☐ No
- ☐ Not yet assessed

If yes, please document below:

Do you have any concerns about the candidate's PRA experience to date?
(for example, concerns about gaps in the candidate's performance or whether the candidate will be adequately assessed across all domains of care and sentinel habits prior to the end of the PRA)

- ☐ Yes
- ☐ No

If yes, please document below:

Do you have any comments about the candidate's PRA experience to date?

- ☐ Yes
- ☐ No

If yes, please document below:

Acknowledgement:

- ☐ I acknowledge that this assessment is true and accurate.