

Audit Assessment Tool

Date of Assessment (DD/MM/YY) / / Trainee's Surname

/ / Trainee's Forename

Trainee's Year Trainee's GMC Number

Assessor's Registration Number (e.g.GMC, NMC, GDC)

Assessor's Name

Assessor's Email

Assessor's Position:

Consultant SAS SpR StR

Basis for assessment:

Presentation Report

Title or brief description of audit:

Please score the trainee on the scale shown. Please note that your scoring should reflect the performance of the trainee against that which you would reasonably expect at their stage/year of training and level of experience. Please mark 'Unable to Comment' if you feel you have not observed the behaviour.

<i>Well below expectation for stage of training</i>	<i>Below expectation for stage of training</i>	<i>Borderline for stage of training</i>	<i>Meets expectation for stage of training</i>	<i>Above Expectation for stage of training</i>	<i>Well above expectation for stage of training</i>	<i>Unable to Comment</i>
1. Audit Topic						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Targets for Performance						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Audit Methods						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Results and Interpretation						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Changing Performance: Conclusions and Implementation Plan						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Plan for Evaluation						
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Based on this observation please rate the level of overall quality of clinical audit shown:

Overall Quality of Audit		
Rating	Description	
Below expected standard of clinical audit	Significant guidance required throughout the audit process. Inappropriate audit topic or poor methodology resulting in inappropriate conclusions or conclusions of limited practical use. Inadequate consideration of future direction of audit	<input type="checkbox"/>
Expected standard of clinical audit	Limited guidance required throughout audit process. Sound audit methodology in a relevant topic, resulting in conclusions with practical clinical importance. Plans for future direction of audit highlighted	<input type="checkbox"/>
Exemplary standard of clinical audit	Audit topic related to an important clinical problem, detailed and exhaustive methodology applied, resulting in conclusions with significant clinical importance. Plans for future direction of audit highlighted. An exemplary clinical audit	<input type="checkbox"/>

Which aspects of the audit were done well?

Any suggested areas for improvement for future audit projects

Trainee's Signature.....

Assessor's Signature.....