

MULTI-SOURCE FEEDBACK (MSF) SELF-ASSESSMENT FORM

Draft Proposal for Enhanced Clinical Radiology Training Program

Form is intended to be distributed and collated by the Training e-Portfolio. Instructions will be amended to suit.

Trainee RANZCR ID: _____

Instructions <i>Please rate yourself on all items.</i> <i>At the end you may include some comments on what you do well or what you feel you could improve upon.</i>	Unable to Answer	Never	Some of The Time	Most of The Time	All The Time
COMMUNICATOR					
Effective communication with patients					
Manages emotions of patients and family members					
COLLABORATOR					
Effective, accurate communication with other professionals					
Works well in a team, respecting contributions of all members					
Shares responsibility effectively with others to ensure optimal patient care					
Approachable and available when needed					
LEADER					
Contributes to improving patient care pathways and processes					
Engages with and supports others to achieve shared goals					
Manages stress and maintains personal health and wellbeing					
HEALTH ADVOCATE					
Focuses on patient's individual needs and circumstances					
Demonstrates cultural competency and respect for diversity					
PROFESSIONAL					
Demonstrates honesty, integrity and reliability					
Acknowledges professional limitations and requests help when needed					
Supports and responds to colleagues in need					
Demonstrates effective time management, is punctual					
SCHOLAR					
Listens to others' suggestions to improve					

Contributes to the education of others

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Please add any specific comments or examples to support any of your responses

Trainee Signature: _____

Date: _____

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