**MEDICAL AND DENTAL PRACTITIONERS COUNCIL OF**

**ZIMBABWE**



**SENIOR REGISTRAR LOGBOOK**

**FOR**

**PSYCHIATRY**

Promoting the health of the population of Zimbabwe through guiding the medical and dental professions

**GENERIC FORMAT FOR PRE-REGISTRATION SENIOR REGISTRAR IN PSYCHIATRY**

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| **Personal Attributes** | **Strengths** | **Areas Of Improvement** | **Score** |
| 1. **Presentation**   **Personal/physical appearance** |  |  |  |
| 1. **Communication**   Patient, relatives and any other interested parties.  Effective verbal skills. Present ideas and information concisely. Inspires confidence in colleagues. Keeps others well informed etc  • Interpersonal relations  Work colleagues and superiors |  |  |  |
| 1. **Management**   Planning and Organization  Sets goals and priorities. Plans ahead and utilizes resources effectively. Ability to meet deadlines and monitor tasks. |  |  |  |
| 1. **Judgement**   Considers pros and cons before making decisions. Considers risks. Considers impact of decisions and seeks advice. |  |  |  |
| 1. **Leadership**   Effectively manages situations and implements changes when required. Motivates, coordinates, guides and develops subordinates through actions and attitudes. |  |  |  |
| 1. **Ethics**   Observance of both the patient’s and the doctor’s rights. Considers the ethical impact of decisions. Demonstrates actions and attitudes of integrity. |  |  |  |
| 1. **Reliability**   Can achieve goals without supervision. Dependable and trustworthy. |  |  |  |
| 1. **Quality of Work**   Achieves high quality of work that meets requirements of the job**.** |  |  |  |
| 1. **Quantity of Work**   Achieves or exceeds the standard amount of work expected on the job. |  |  |  |
| 1. **Initiative**   **A self starter. Provides solutions to problems.** |  |  |  |
| 1. **Cooperation**   Willingness to work with others as a team member |  |  |  |
| 1. **Assessment by other disciplines**   Professional conduct, reliability and quality of work. |  |  |  |
| 1. **Participation in clinical audit, clinical governance and Continuous Professional Development** |  |  |  |
| 1. **Teaching**   Junior medical and dental staff. Nurses and other health professionals. |  |  |  |
| 1. **Research**   **Participation in ongoing research.** |  |  |  |
| 1. **Others** |  |  |  |

Score 1 – 5 : 1 is the worst score and 5 is the best score. Meet candidate quarterly and discuss strengths and areas of improvement. Consolidate with rating from other departments for overall

1. **Child Psychiatry Case Follow-Up And Presentation In Clinical Seminar :** At least 4

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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1. **Psychotherapy (Long Case) Under Supervision Of A Clinical Psychologist And**

**Presentation In A Clinical Seminar:**  at least 1

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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1. **Psychotherapy (Short Case) Under Supervision Of A Clinical Psychologist And**

**Presentation In A Clinical Seminar:**  at least 2

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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1. **Forensic Follow-Up And Write-Up Of Forensic Report**

**4.1 Victim :**  At least 6

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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* 1. **Perpetrator :**  At least 6

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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1. **Conduct Advanced Clinical Seminar :**  At least 3

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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1. **Conduct Electro-Convulsive Therapy:**  at least 4

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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1. **Attend And Read Electroencephalogram:** at least 10

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| **Date** | **Name of Patient** | **Hospital Number** | **Supervisor’s Signature** |
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**Overall assessment by Chairperson Department of Psychiatry**

Registrable …………………………………………………………………………………………………………………..

Non Registrable……………………………………………………………………………………………………………

**Recommendation by Zimbabwe College of Psychiatry**

Registrable……………………………………………………………………………………………………………………

Non registrable…………………………………………………………………………………………………………….