

2 Does your current role include direct consultations with patients?

Yes, frequently Yes, infrequently or occasionally No

If 'yes', please move on to Questions 3a to 3g. If 'no', please move on to Question 4.

3 Please rate how good you feel you are at each of the following by ticking one box along each line.

	Poor	Less than satisfactory	Satisfactory	Good	Very good	Does not apply
a Being polite to patients	<input type="checkbox"/>					
b Making patients feel at ease	<input type="checkbox"/>					
c Listening to patients	<input type="checkbox"/>					
d Assessing patients' medical condition	<input type="checkbox"/>					
e Explaining patients' condition and treatment	<input type="checkbox"/>					
f Involving patients in decisions about their treatment	<input type="checkbox"/>					
g Providing or arranging treatment for patients	<input type="checkbox"/>					

4 Please decide how far you agree with the following statements by ticking one box along each line.

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Does not apply
a I respect patient confidentiality	<input type="checkbox"/>					
b I am honest and trustworthy	<input type="checkbox"/>					
c My performance is not impaired by ill health	<input type="checkbox"/>					

5 I am fit to practise medicine Yes No Don't know

6 Please add any other comments you want to make about your own performance.