

**Please note that references from relatives and employees are not regarded as acceptable**

Applicant's name

How long have you known the applicant and in what capacity?

Position held during employment:

Length of Employment (From --- To ---)

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Please assess the following areas and make a tick (or cross) in one box in each section. If 'poor' or 'some areas of concern' boxes are ticked, please provide more details as to the reasons for this. Please state evidence for your assessment.

**A) Clinical competence**

(this includes clinical knowledge and skills required to provide primary care medical services as a doctor)

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

**B) General communication Skills and command of English (the doctor needs to have sufficient command of English to provide primary medical services as a GP)**

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

C) Communication skills with patients

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

D) Communication skills with colleagues (including clinical and non-clinical colleagues)

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

E) Clinical Recording Skills (legible, clear, accurate, contemporaneous records which summarise the key details of every patient contact)

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

F) Engagement with continuous professional development

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

G) Professionalism (including knowledge and adherence to the GMC's guide to Good Medical Practice)

Poor	
Some areas of concern	
Satisfactory	
Good	
Excellent	
Further comments	

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Please select as appropriate by entering a \*

	Yes	No
Would you consider employing this doctor?		
Have there been concerns about this doctor's fitness to practice?		
Are you aware of any health issues that may affect this applicant's ability to practice safely as a doctor?		

Further comments:

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Please do not breach the applicant's confidentiality by giving specific details without their consent

Your name

Date

Your GMC number

Your role or job title within the practice

Practice/employer's address and contact number

*Individuals have a right under the General Data Protection Regulation to see copies of references received about them and we cannot therefore guarantee the complete confidentiality of any reference received. Lantum may also show a copy of this reference to employing organisations.*