### SAIL(OH)1 (Sheffield Assessment Instrument for Letters (OH))

### First referral from a manager

**INSTRUCTIONS**

This assessment form relates to a **trainee's first letter to a manager in response to a management referral.** Please see notes for guidance below. Use the back of this leaflet to make any other comments about the letter.

* Please ensure that it is obvious which response is marked, using black pen. (e.g. check [x] or colour in or tick ✓the appropriate boxes).
* Mark any changes to your choice as clearly as possible.
* **Case complexity** - Please give your own subjective opinion of the complexity of the case. (Different judges tend to rate complexity similarly on this scale.)
* **Items 1, 2 and 5, next page:** Need to be scored after reading the manager’s original referral note.
* **Item 8, next page:** Does this letter comply with Good Medical Practice for occupational Physicians?

**BASIC DATA**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Assessor's GMC No.** |  | **Trainee's GMC No.** |  | **Year of training** |  | **Date of assessment** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  4 |  |  |  | / |  |  | / |  |  |

|  |
| --- |
|  |

**Nature of problem**

|  |  |  |  |
| --- | --- | --- | --- |
| **Case Complexity:** | [ ]  Low | [ ]  Moderate | [ ]  High |

Clinical supervisor [ ]

Peer [ ]

Self [ ]

Consultant (other) [ ]

Other [ ]

**Checklist**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Problems | Unsatisfactory | Satisfactory | Above expectations | Don't know/not applicable |
| 1. Are the manager’s identified concerns acknowledged?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Are all obvious and significant aspects of the case covered?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Does the narrative clearly outline the occupational health issues, voiced in the context of the client’s work?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| Response |  |  |  |  |
| 1. Is there either a clear OH action plan (e.g. further investigation/ referral) or a specific set of recommendations put to the business?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Are the manager’s questions addressed directly, or in terms of the proposed plan?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Are the OH review arrangements clear (including, where appropriate, the conscious decision not to offer follow-up)?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| **Professional issues** |  |  |  |  |
| 1. Where appropriate, are any legal and/or ethical issues of the case highlighted (e.g. DDA, consent)?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Adherence to contractual, ethical and legal boundaries?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| **Clarity** |  |  |  |  |
| 1. Discharge duty of care to management and/or client?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Is unnecessary information kept to a minimum?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Does the structure of the letter flow logically?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| 1. Are all sentences clear and understandable to the intended readership?
 | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  |
| **Overall assessment** |  |  |  |  |  |
| This letter clearly conveys the information I would like to have if I were the primary addressee *(mark one number)*. |
| 1[ ]  | 2[ ]  | 3[ ]  | 4[ ]  | 5[ ]  | 6[ ]  | 7[ ]  | 8[ ]  | 9[ ]  | 10[ ]  |

***Not at all*** ***Completely***

|  |  |  |
| --- | --- | --- |
| ***Good points*** |  | ***Points that could be improved*** |
| *(Expand boxes to add more text if necessary)*Trainee's signature |  | Assessor's signature |  |
|  |  |  |  |
| Date:  |  |  | Date:  |  |  |