



## PGPPP SUPERVISORS

### PGPPP PROCESS AND SUPPORT EVALUATION

PLEASE RETURN TO SA IMET ATTENTION: VANESSA LOOSE  
 LEVEL 6, CITI CENTRE BUILDING, 11 HINDMARSH SQUARE, ADELAIDE SA 5000  
 OR FAX BACK TO: (08) 8226 6610

Please print all responses in blue or black pen

**Medical Supervisor:** \_\_\_\_\_

**Practice/Clinic:** \_\_\_\_\_

**Name of Junior Doctor:** \_\_\_\_\_

**Placement Dates:** \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_

**1. As a medical supervisor, what were your objectives for being involved in the program?**

---



---



---



---

**2. What strategies did you implement to achieve these goals?**

---



---



---



---



### Pre Vocational General Practice Program

SA IMET, Level 6, Citi Centre Building, 11 Hindmarsh Square, Adelaide SA 5000

**Enquiries:** (08) 8226 1085

**E:** [vanessa.loose@health.sa.gov.au](mailto:vanessa.loose@health.sa.gov.au)

**W:** [www.saimet.org.au](http://www.saimet.org.au)

Vanessa Loose – Senior Project Officer (Education Coordinator)

### PGPPP SUPERVISORS

#### PGPPP PROCESS AND SUPPORT EVALUATION

Please complete the following questions in point form using blue or black pen.

3. What were your objectives for your junior doctors?

---

---

---

---

---

---

4. Do you feel your objectives were achieved?

---

---

---

---

---

---

5. Do you think the PGPPP promotes general practice in an effective manner?

---

---

---

---

---

---

6. What hospital year were your participants? Please circle where applicable.

- Intern                      • PGY2                      • PGY3                      • PGY4

7. Were your participants adequately briefed about working in a general practice setting in order to make them comfortable when they arrived at your practice?

Y                      N

8. Who provided this briefing and what did it entail?

---

---

---

---

---

---

9. What could have been improved?

---

---

---

---

---

10. Overall, how were your PGPPP doctors received by the patients? Please circle where appropriate.

- Poorly                      ▪ Moderately well                      ▪ Good                      ▪ Well received

Please elaborate

---

---

---

---

---

11. When supervising, on average how many consultations per hour were your PGPPP doctors able to see?

---

---

---

---

---

12. Did supervising affect these numbers? Please outline influencing factors:

---

---

---

---

---

13. Please supply any other feedback.

---

---

---

---

---

---

---