

**UNIVERSITY OF WASHINGTON PSYCHIATRY RESIDENCY
PGY-1 SUPERVISION LEVEL ASSESSMENT FORM**

PGY-1 Name: _____ **Date:** _____

The ACGME has defined these initial levels of supervision for residents:

1. Direct Supervision: – the supervising physician (attending, fellow, or senior resident) is physically present with the resident and patient.
2. Indirect Supervision with direct supervision immediately available – the supervising physician is physically within the hospital or other site of patient care, and is immediately available to provide direct supervision.

At the beginning of Psychiatry residency, each PGY-1 must have direct (in-person) supervision. A PGY-1 in our program may progress from direct supervision to indirect supervision with direct supervision immediately available after demonstrating the three competencies below on three different occasions.

Based on your direct observation of this PGY-1 resident, please indicate below whether or not he/she has demonstrated the following competencies:

Competencies	Number of Pts Assessed:	Yes	Not Yet	No	Unable to Assess
Ability and willingness to ask for help when indicated					
Gathering a history appropriate for the clinical situation					
Presenting patient findings and data accurately					
Evaluator Name:		Evaluator Status: Faculty Fellow Resident			
Evaluator Signature:		Clinical Setting: Day Night Wkend			

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Evaluator Signature:		Clinical Setting: Day Night Wkend			

Comments and Suggestions for Improvement:

Resident Signature and Date

The resident should submit this signed form to the Residency Office at Box 356560 or FAX: 206-685-8952. Thank you!