**Primary-Secondary Care Work Shadowing Feedback Form**

**To be completed and returned to \*\*\*\*\*\* within two weeks of work shadowing**

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| **Name:** |  |
| **Job title:** |  |
| **Email:** |  |
| **Date of Shadowing:** |  |

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| --- | --- | --- | --- | --- | --- |
| **How valuable as a form of learning was this in terms of:** | **Extremely valuable** | **Very valuable** | **Quite valuable** | **Not very valuable** | **Not valuable at all** |
| **Improving understanding of roles** |  |  |  |  |  |
| **Improving professional relationships** |  |  |  |  |  |
| **Improving clinical skills and/or knowledge** |  |  |  |  |  |

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| **What were the main learning points for you *(can be copied from SOAR template)*?** |
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| **Has this exercise helped you identify potential changes to practice?** | **Yes  No** |
| **Please explain:** | |

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| **What improvements to improve primary-secondary care interface working would you recommend following your work shadowing experience?** |
|  |

CPD credits can be claimed under ‘working with colleagues’ as both a visiting and a receiving clinician. The SOAR Reflective Template for recording work shadowing credits can be found under [‘working with colleagues (work shadowing)’](http://www.appraisal.nes.scot.nhs.uk/help-me-with/soar/appraisees/reflective-templates.aspx)