Team assessment of behaviour (TAB)

Guidance for educational supervisors

What is the purpose of team assessment of behaviour (TAB)?
TAB is a screening tool which allows the recognition of foundation doctors who may behave less than professionally in their day to day work, so you can take steps to prevent this becoming a chronic problem. In the great majority of cases, TAB confirms good professional behaviour and the detailed comment allow you to reinforce and consolidate their good practice.

Published experience of TAB shows that a very small number of doctors receive “major concern” assessments, and few receive “some concern” assessments. Almost all receive written compliments which, when fed back at appraisal meetings, can help them considerably.

How does it work?
- You should ensure that your supervisee(s) know when they are required to participate in TAB. It is important to discuss this when you meet with them so they know the time scale.
- Foundation doctors are responsible for selecting their assessors. They should select 15 assessors and ensure that at least 10 reports are returned by the time of the agreed feedback meeting with you. They enter the email addresses of their assessors onto their e-portfolio, and an email requesting the assessment is sent to each assessor, with reminders if necessary. They cannot select assessors until they have completed the self-assessment. Additional guidance is available on the e-portfolio.
- The assessors must include at least 2 doctors, including the clinical supervisor, but none may be other foundation doctors. The assessors must also include at least 2 nurses (band 5 or senior), 2 or more allied health professionals (physiotherapists, OTs, etc), and at least 2 others (e.g. ward clerks, postgraduate programme administrators, secretaries, auxiliary staff). At least 10 completed TAB forms are needed for a valid assessment.
- You will be able to see each assessment as it comes onto your supervisee’s e-portfolio. This includes detail of who gave each rating and their comments.
- The foundation doctor must also complete a “self TAB” form before meeting with you. This allows you to check on their own view of their professionalism at this point in their career.
- A “summary” form is generated automatically, giving all the ratings and verbatim comment, but not identifying any assessor by name. This is seen by the foundation doctor, but they will not be told who said what.

Preparing to give feedback
- You should check the reports on the e-portfolio and confirm that the assessors are of the right profile of professional groups. If they are not then the assessment is not valid and a further TAB assessment is needed.
- If, as is usual, all of the assessors report “no concern” then all is well.
- You should compare the foundation doctors’ self assessment to the summary report and in particular looking for areas of divergence.
- If any “major concern” is given then you must contact the assessor to obtain more detail and decide how serious it is. If more than one “some concern” is given you will also need to talk to the assessors for details of the behaviour they witnessed.
If only one “some concern” is given, then you should make a judgement based on the comment and decide if further discussion with the assessor is needed. Comments are always written if a concern is raised. If you are unsure about how to proceed you should discuss this with the foundation training programme director/tutor (FTPD/T).

- If, following discussion with assessors (and the FTPD/T if necessary), you cannot dismiss a “some concern” rating as trivial then a further TAB assessment will be needed after a few months, and this time you may select some of the assessors yourself, with input from the FTPD/T. “Major concern” ratings always demand a follow up TAB.
- If concerns are recorded on the repeat TAB then you should discuss with the FTPD/T and follow the deanery’s “doctors in difficulty” process.
- **Remember that this process screens for serious problems. If in doubt then the TAB is repeated in 3-4 months.**

**At the feedback meeting**

- If there are concerns and especially if the foundation doctor reported “no concern” on “self TAB”, then they may need careful support.
- Many educational supervisors find the ECO (Emotion, Content, Outcome) structure helpful when giving feedback from TAB. First address any emotional reaction with sensitivity. Move on to clarify any details by exploring the comments in the TAB with the foundation doctor. Finally agree how future performance might be modified to take the feedback on board.
- Foundation doctors are usually surprised, and grateful, to learn if they were causing concern, having been unaware of it, and will act at once to correct the behaviour described.
- You should congratulate the foundation doctor on the positive comments to help consolidate their professionalism.
- If the foundation doctor asks who criticised them you should explain that the identity of assessors is not usually divulged but that you will ask the assessors if they are happy to discuss their assessment at a meeting which you will arrange. In practice assessors are usually happy to do this at a meeting attended by their educational supervisor or FTPD/T.
- The foundation doctor will be shown the summary form on-line and this should be signed electronically. The summary form can be printed and may be useful evidence at interviews.

**How is the form accessed?**

TAB forms are available within the e-portfolio. Each TAB requires an individual assessment form to be complete. If the assessor is a supervisor with access to the foundation doctor’s e-portfolio, they can access the form themselves. However, if this is not the case, the foundation doctor could either send an electronic ticket or log in and complete the form with the assessor. If the form is completed using the foundation doctor’s login, an automatic email will be sent to the assessor and the assessment will be flagged as self-entered.

**Whom should I contact if I have questions about the TAB process?**

You should speak to the FTPD/T.