

YEAR 4 MBChB

CLINICAL ASSESSMENT FORMS

2020-2021



CLINICAL BLOCK ASSESSMENTS

Workplace Based Assessments

The Mini-CEX (Clinical Evaluation Exercise)

This tool is used to assess your clinical interactions by observing an actual clinical encounter; for you to receive feedback on particular clinical skill/s to help you to continue to develop your clinical skills. It is suitable for use in a community-based, out-patient, in-patient or acute care setting. Strengths, areas for development and agreed action points should be identified following each mini-CEX encounter. You need to take the marking form along with you

The encounter could be a focused history or a relevant examination. You may then be asked about areas of diagnosis and management. The exact format will vary with the ward/outpatient setting. The mini-CEX is designed to provide feedback and therefore you should be assessed undertaking the actual clinical encounters normally expected of you e.g. clerking in a new patient.

Multiple mini-CEX assessments are known to be as valid as other forms of assessment when repeated over time.

The Case Based Discussion (CbD)

This is a structured discussion of a case and is normally a planned activity. You may be able to choose a case you have recently been involved with or you may be assigned a suitable patient. You briefly present the case to your assessor and may be asked about the interpretation of your history taking, decision making, and clinical reasoning. The CbD is designed to provide feedback to help you develop your clinical skills.

For both the mini-CEX and CbD, you should agree an action plan to continue to develop your clinical skills with your assessor.

Clinical Procedural Skills Logbook

You will be supplied with a Clinical Procedural Skills Logbook. This is used across 4th and 5th year to enable students to document their progress in achieving competencies in set procedural skills. This should be used alongside your assessment booklet.

Directly Observed Procedural Skills (DOPS)

This tool helps show your development in clinical skills and abilities. You should link DOPS directly to procedures in the curriculum for your stage of training. These should be used alongside your Clinical Procedural Skill Logbook.

DOPS are suitable for any practical skill performed in a community-based, out-patient, in-patient or acute care setting. It is designed to provide feedback that should be of help to you. Therefore, you should be assessed undertaking any procedure relevant to your block for example, venesection. DOPS can be supervised by any member of staff competent to perform the procedure themselves. This can include FY trainees and other healthcare professionals.

It is your responsibility, as a Senior Medical Student, to ensure these forms are completed and submitted on time where applicable to your ePortfolio

ASSESSOR INFORMATION

Thank you for completing this assessment for this student. *We would also encourage you to contact Dr Laura Gates, Year 4 Lead l.gates@abdn.ac.uk and/or Morag Simpson, Years 4&5 Administrator morag.simpson@abdn.ac.uk should you have any specific concerns about a student.*

Mini-CEX (Clinical Evaluation Exercise): Year 4

The mini-CEX is designed to provide feedback on skills essential to the provision of good clinical care, by observing an actual clinical encounter. It is a “snapshot” of a doctor or student/patient interaction. The mini-CEX is suitable for use in a community-based, out-patient, in-patient or acute care setting. Not all elements need be assessed on each occasion. The form samples a range of areas within the curriculum.

These can be completed by any senior member of staff e.g. ST3 or above, SASG or GP colleague.

You need not have prior knowledge of the student. This should not be delegated to a junior member of staff. Having selected a willing and appropriate patient, you should then direct the student to perform a relevant history and examination, which may also cover investigation and diagnosis. The observed process should take no longer than 15-20 minutes. Immediate feedback should take no longer than 5 minutes.

Specific points:

- *Focus of clinical encounter:* Diagnosis should include an assessment of the student’s examination skills and their abilities to reach a provisional diagnosis.
- *Complexity of case:* Please score the difficulty of the clinical case for the level of a Year 4 student at this stage of the course.
- *Feedback:* In order to maximise the educational impact of using mini-CEX, you and the student need to identify agreed strengths, areas for development and an action plan.

Case Based Discussion (CbD): Year 4

This should normally be a planned activity. The student will usually select a case or staff may select/suggest a case. A period of 10-15 minutes should be set aside for the CbD.

The student should present a brief summary of the case and the issues it raises. The clinician should focus on one or two aspects of the case, such as information gathering and interpretation, diagnostic approach, management planning, communication, and should initiate an exploratory discussion. Questions should be open e.g. what diagnoses did you consider? rather than closed questions, you are trying to explore the student’s clinical reasoning and insight.

Give constructive, feedback. What went well and which areas need development? Agree specific actions with the student to help them achieve their developmental goals.

It is the student’s responsibility to upload the completed forms to their electronic portfolio.

Thank you very much for completing these forms and feeding back to the student.

Year 4 Assessment: Mini- Clinical Evaluation Exercise (CEX)

Please complete questions or circle appropriate response.

Student ID No.	Student name		
Assessor	Assessor Grade	Consultant	SAS
		GP	>ST3

(This must not be completed by a foundation or core training doctor)

Year 4 Block	Acute Medicine & Critical Care	Mental Health	Surgery & Critical Care
	GP	Long -term conditions & Integrated Care	Reproduction & Child Health

Clinical setting	GP	Inpatient	Outpatient	ED
Main Clinical problem(s)				

Complexity of case			Focus of clinical examination			
Low	Average	High	History	Diagnosis	Management	Explanation

Please grade the following areas using the scale below:	Unsatisfactory	Pass	Good	Very Good	Excellent	
1. History taking	1	2	3	4	5	n/a
2. Physical examination	1	2	3	4	5	n/a
3. Mental state examination	1	2	3	4	5	n/a
4. Communication skills	1	2	3	4	5	n/a
5. Clinical judgement	1	2	3	4	5	n/a
6. Professionalism	1	2	3	4	5	n/a
7. Organisation/Efficiency	1	2	3	4	5	n/a
8. Overall clinical care	1	2	3	4	5	n/a

*U/C: Please mark this if you have not observed the behaviour and therefore feel unable to comment.

Anything especially good?	Suggestions for development

Agreed action:

Signed

AssessorTrainee.....

Year 4 Assessment: Case based Discussion (CbD)
Please complete questions or circle appropriate response.

Student ID No.	Student name		
Assessor	Assessor Grade	Consultant	SAS
		GP	>ST3

(This must not be completed by a foundation or core training doctor)

Year 4 Block	Acute Medicine & Critical Care	Mental Health	Surgery & Critical Care
	GP	Long -term conditions & Integrated Care	Reproduction & Child Health
Who chose case?	Clinician selected	Learner selected	Random

Provide a brief summary of the case discussed:

Complexity of case	Straightforward	Some complex features	Complex
Main focus of discussion (circle as many as relevant)		History / clinical findings	Differential diagnosis
Investigations	Management plan	Communication	Ethics

Comment on what was done well and the areas for improvement.

Note- constructive feedback is required if the assessment is to be useful.

What was done well?

What could have been done better? (if none, please state 'none')

Suggestions for development: (should be specific, realistic actions)

Signed

AssessorTrainee.....

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**Direct Observation of Procedural Skills (DOPS)
For medical undergraduate assessment of core procedural skills**

Assessor Name.....**Student Name:**

Procedure being observed (CAPITALS).....

Indication for procedure/diagnosis (CAPITALS).....

Please mark one of the boxes for each component of the exercise on a scale of 1 (extremely poor) to 5 (extremely good). A score of 1 is considered unsatisfactory, 2 borderline, 3 or 4 indicates successful performance and 5 indicates outstanding performance. Please note that your scoring should reflect the performance of the students against that which you would reasonably expect at their stage of training and level of experience.

You must justify each score of 1-2 with at least one explanation/example in the comments box. Please feel free to add any other constructive and relevant comments about the student’s strengths and weaknesses.

	Unsatisfactory	Pass	Good	Very good	Excellent
Demonstrates understanding of indications					
Obtains informed consent					
Demonstrates appropriate knowledge of procedure and anatomy					
Technical ability					
Demonstrates appropriate & safe handling of equipment					
Demonstrates asepsis before, during & after procedure if appropriate					
Completes required communications (written & verbal) appropriately (content, clarity, professional to required personnel including patient and carers)					
Deals with any unexpected events appropriately (e.g. failure to cannulate vein)					
Overall professionalism & patient consideration					
Assessor’s comments on student performance					

Assessor signature**Date**.....

Student signature**Date**.....

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