

“Knowing is not enough; we must apply.
Willing is not enough; we must do.”

(Goethe)



Clinical Competencies Assessment

D Novice

Seeks rules and recipes
to guide Action

C Advanced Beginner

Seeks strategic & contextual knowledge.
Begins to know the rules breaking

B Competent

Able to monitor own
performance. Conscious
choice

A Proficient

Increased use of
Intuition & tacit
knowledge.

Proficiency leading to **Expert**

Fluency

Automatic

Adaptability

Controlled situation

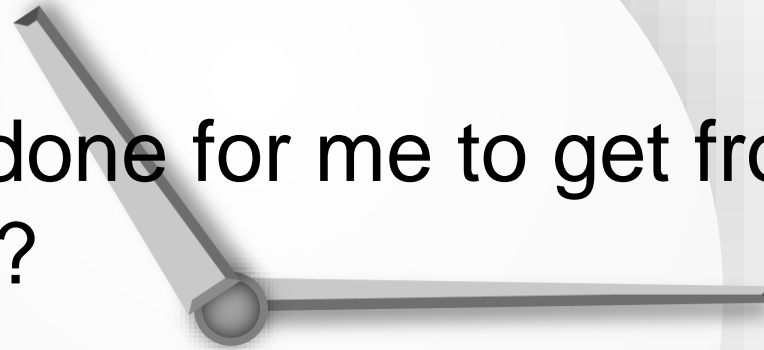


Outline

- Explain the role of the NMC CBME competencies, milestones, and EPAs in evaluation in the education of future physicians
- Describe shared-mental models and how to define levels of performance
- Describe the value of comments and specificity

Assessments are to find out:

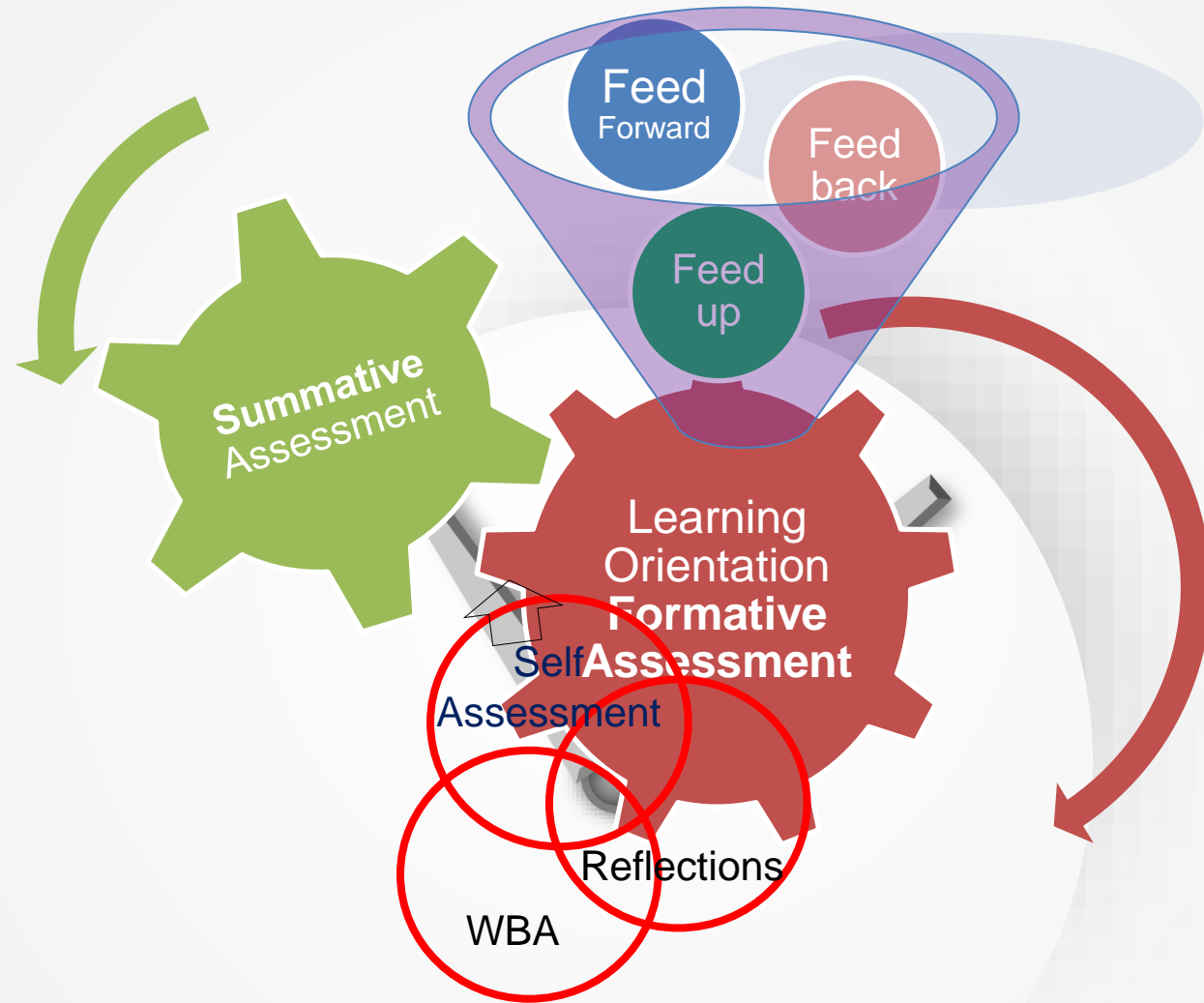
- Where am I now?
- Where am I going?
- What needs to be done for me to get from here to where I need to be?



NMC CBME: Surgery

Certiifiable Procedural Competencies

Clinical Skills	Decision making	Professionalism
Basic suturing	Ability to diagnose, choose, apply and practice appropriate diagnostic tools, management modalities in surgical problems	Quality & Patient safety in surgical practice
Basic Wound care		
Basic Bandaging		
Incision & Drainage of superficial abscess		
Early management of Trauma		Informed consent administration & counseling prior to surgery
Basic Life Support		



Paradigm of Medical Student Assessment

Assessment Methods: Clinics



(OMP) One Minute Preceptor

A five-step micro skills to enhance problem solving and provide learners feedback



SNAPPS

Case based (long and short) learning & assessment



MINI-CEX

A 10- to 20-minute direct observation assessment or “snapshot” of a trainee-patient interaction

OMP) One Minute Preceptor

1. Get the Student to take a stand

2. Probe for supporting evidence

3. Teach General rules

4. Provide Positive feedback

5. Correct errors

Assessment Methods: OMP



Assessment Methods: Group Discussions



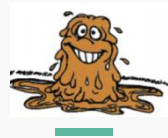
CLICKERS

Classroom Response Systems. Raising hands; opting choices



ONE MINUTE PAPERS

Students jot down on paper anonymous responses to a teaching session



MUDDIEST POINT

students write down the most difficult or confusing part of a lesson, lecture, or reading.



SNAPPS.

01 Summarize history and findings

02 Narrow The Differential

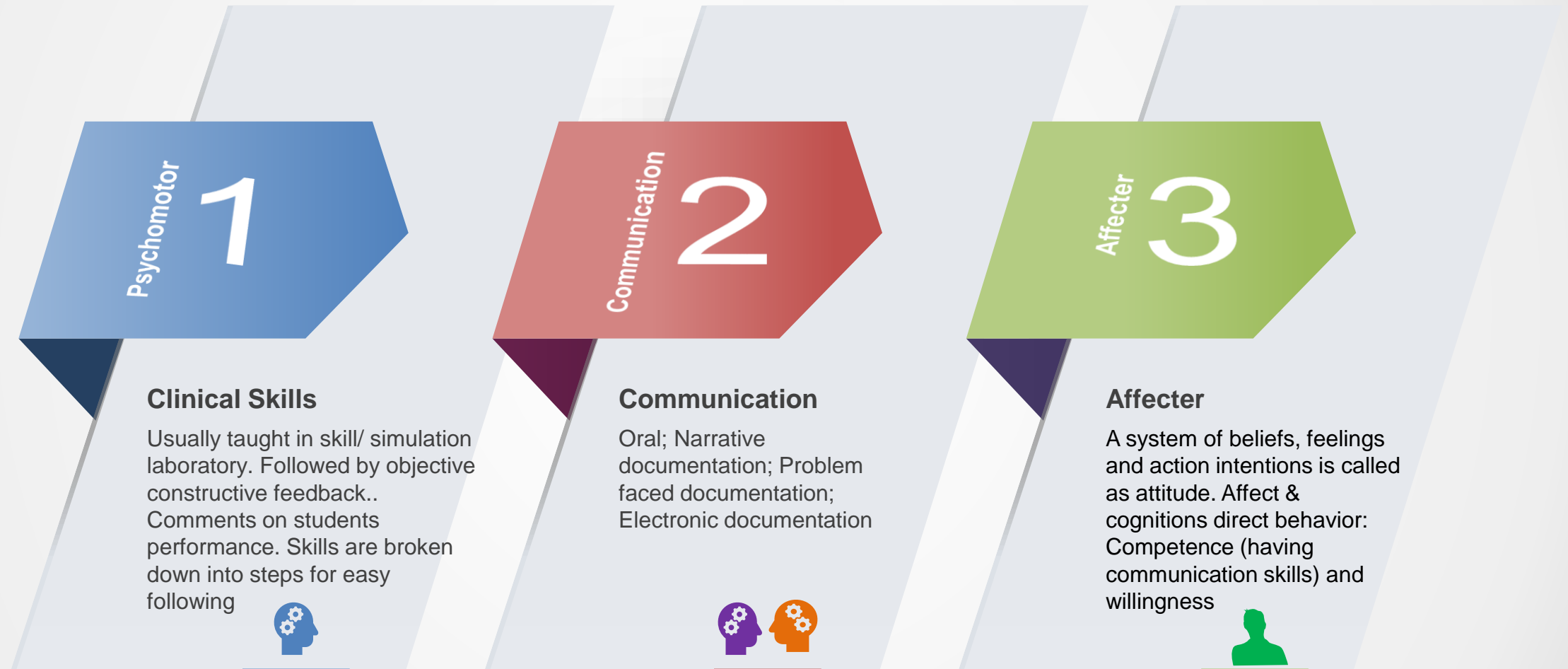
03 Analyze the Differential

04 Probe preceptor about uncertainties

05 Plan management

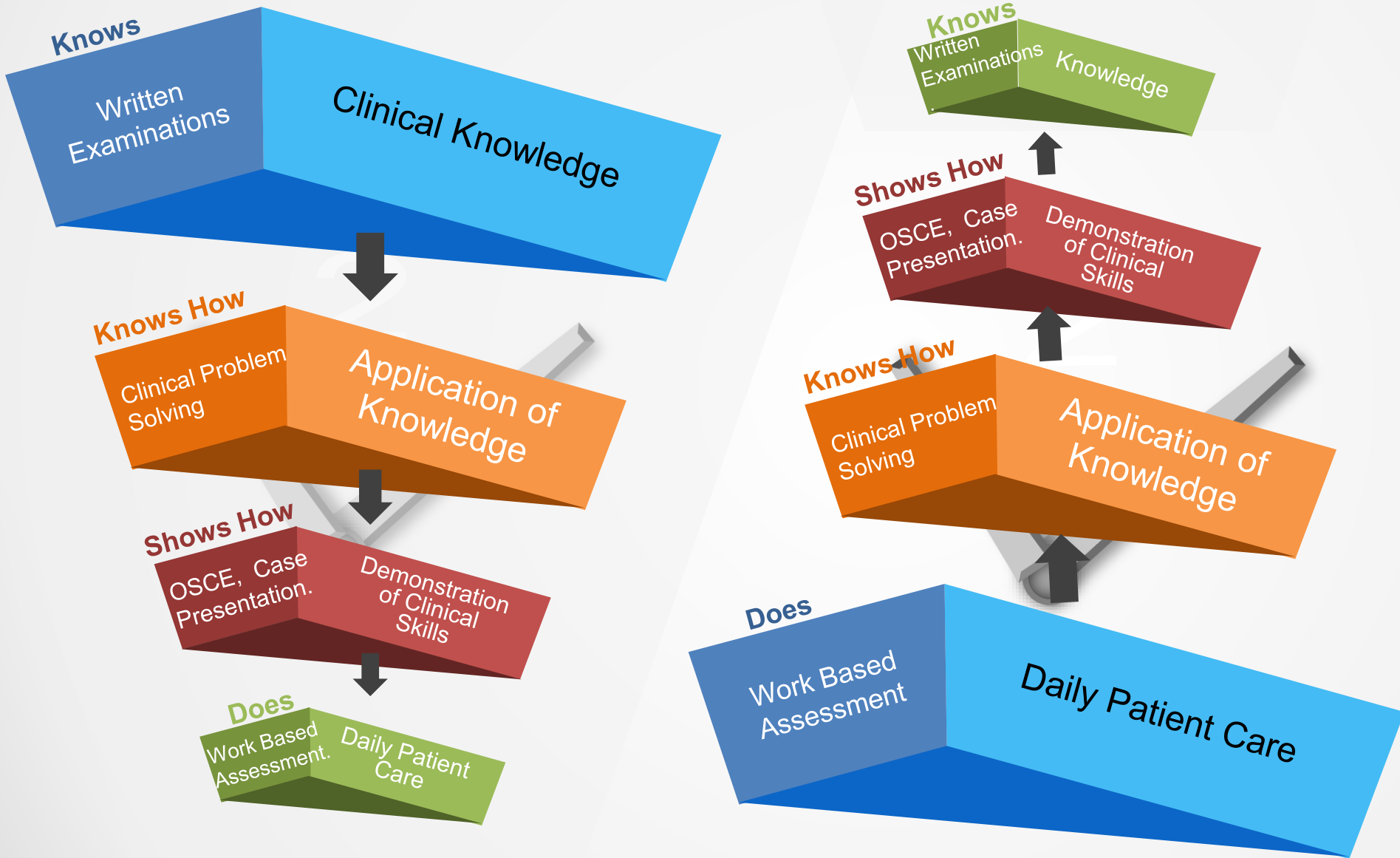
06 Select case-related issues for self-study

Three Areas of Neglected Assessment



Ownership of teaching-learning and assessment

Assessment methods as per levels of competency



Assessment toolbox

Objective Structured Clinical Examination (OSCE)

Objective Structured Practical Examination (OSPE)

Directly Observed Procedural Skills (DOPS)

Mini Clinical Evaluation Exercise (mini-CEX)

Records maintenance and attitudinal assessment

Stages/ Milestones to achieve competency

Unconscious Incompetence

You don't know that you don't know to do something

Unconscious Incompetence

You know that you don't know how to do something and it bothers you

Conscious Competence

You know that you know to do something and it takes effort

Unconscious Competence

You know how to do something and it is second nature; you rock at it

Conceptual Framework

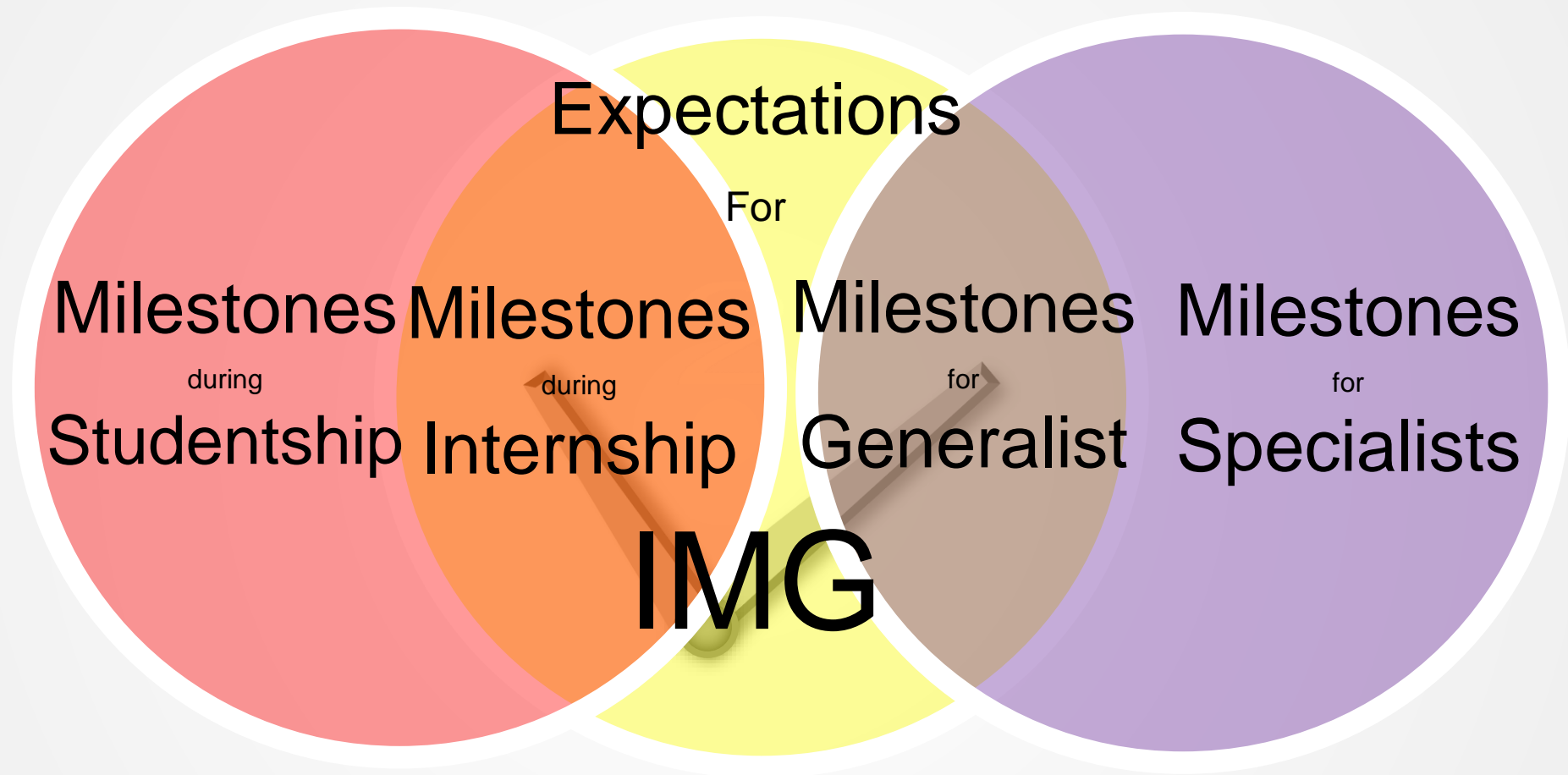


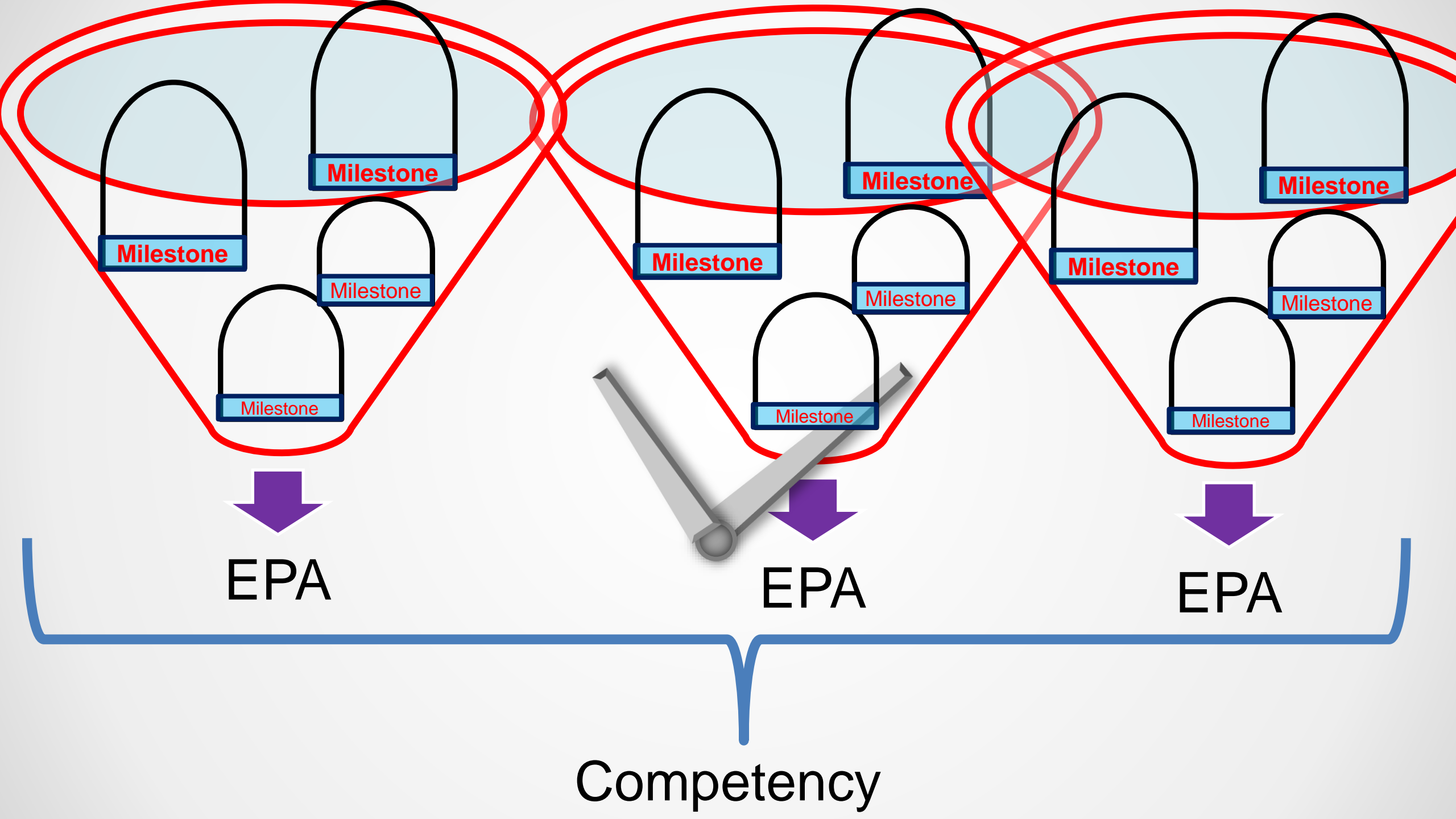
- 1 Competency**
An observable ability integrating knowledge, skills, values, and attitudes.
- 2 Entrustable Professional Activity**
Units of professional practice (tasks are entrusted to perform unsupervised once they have attained specific competence)
- 3 Milestone**
A behavioral descriptor that marks a level of performance for a given competency

Image-centred learning is an important aspect of
competency-based education

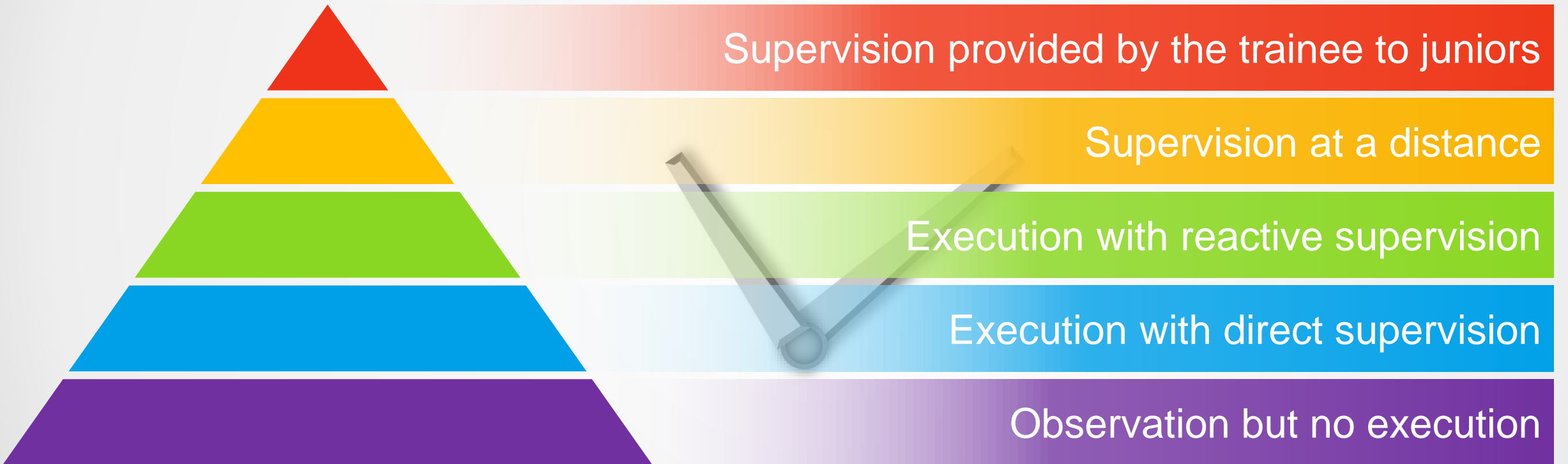


You are residents, but you are also educators





5 Levels of Milestones achievement



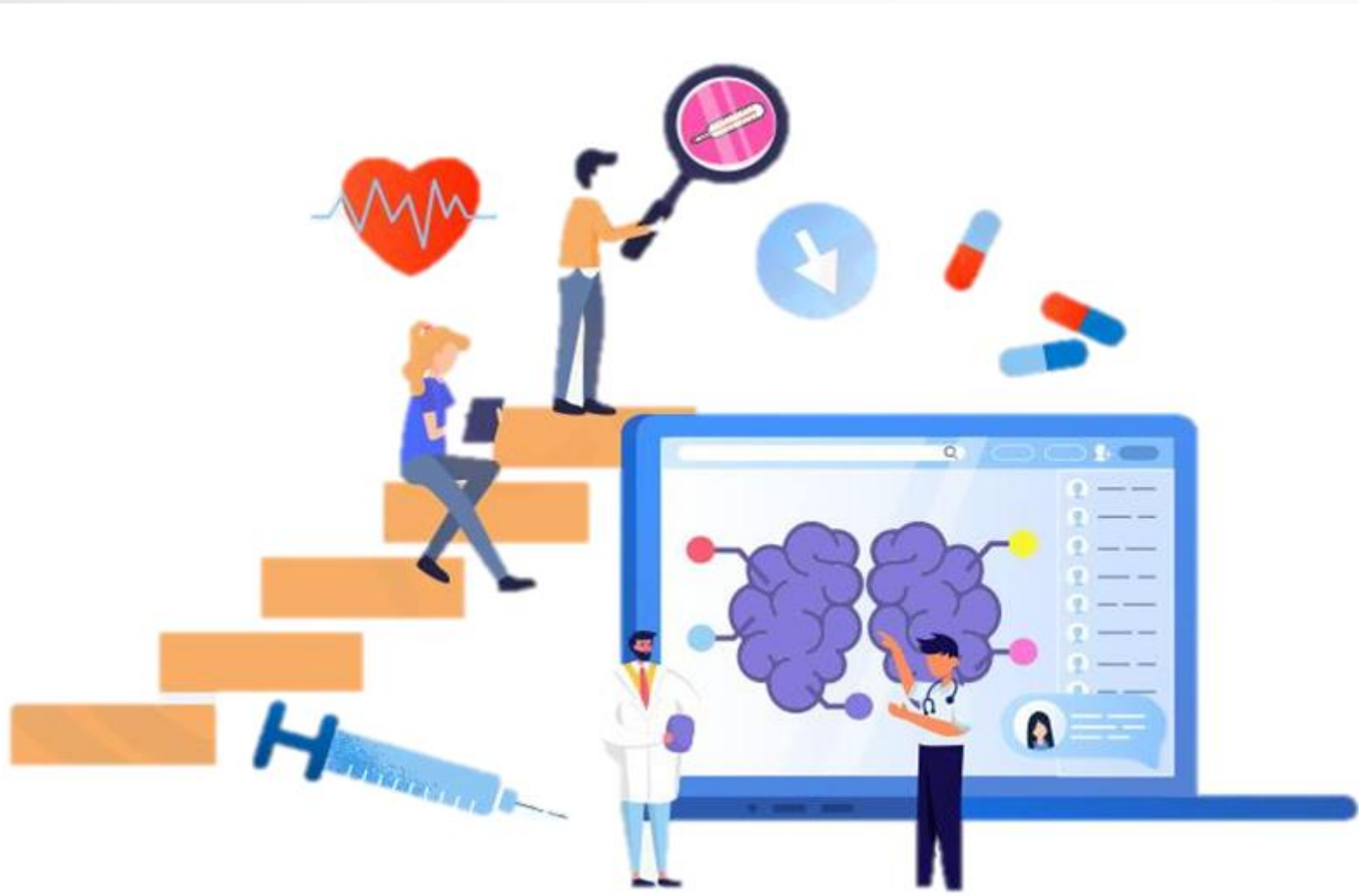
Competencies, Milestones and EPA s



Characteristics	Competencies	EPA
Application	Theoretical	Clinical Practice
Description	Describe physicians	Describes work
Nature	Individual	Integrative competencies
Practicality	Low	High
Conceptual	High	Low to moderate

EPAs Assessment Methods

- Essays
- Patient management problems
- Modified essay questions
- Objective Structured Clinical Examinations (OSCE)
- Projects
- Objective tests
- Critical reading papers
- Rating scales
- Tutor reports
- Portfolios
- Short case assessments
- Long case assessments



EPAs Characteristics

$$\textit{Trustworthiness} = \frac{\textit{Credibility} + \textit{Reliability} + \textit{Intimacy}}{\textit{Self Orientation}}$$


Self Awareness of Limitation

3 Levels of Clinical Skills Assessment



Qualities of Assessment Method



Assessment toolbox

Record Review	
Checklist	
Standardized Patients	
Objective Structured Clinical Examination (OSCE)	
Simulations & Models	
360° Global Rating	
Portfolios	
Exam MCQ	
Exam Oral	
Procedure or Case Logs	

Assessment toolbox

Competency	Required Skills	Method of Assessment	
Patient Care	Caring and respectful behaviors	SP	360 ⁰
	Interviewing	OSCE, Checklist	SP
	Informed decision-making	Checklist	OSCE
	Develop & carry out patient Management plans	Checklist	Simulation
	Counsel & educate patients & families	SP OSCE	360 ⁰
	Performance of procedures a) Routine physical exam b) Medical procedures	SP Checklist	OSCE Simulation
	Preventive health services	SP, Record	OSCE
	Patient Care Work within a team	360 ⁰	Checklist

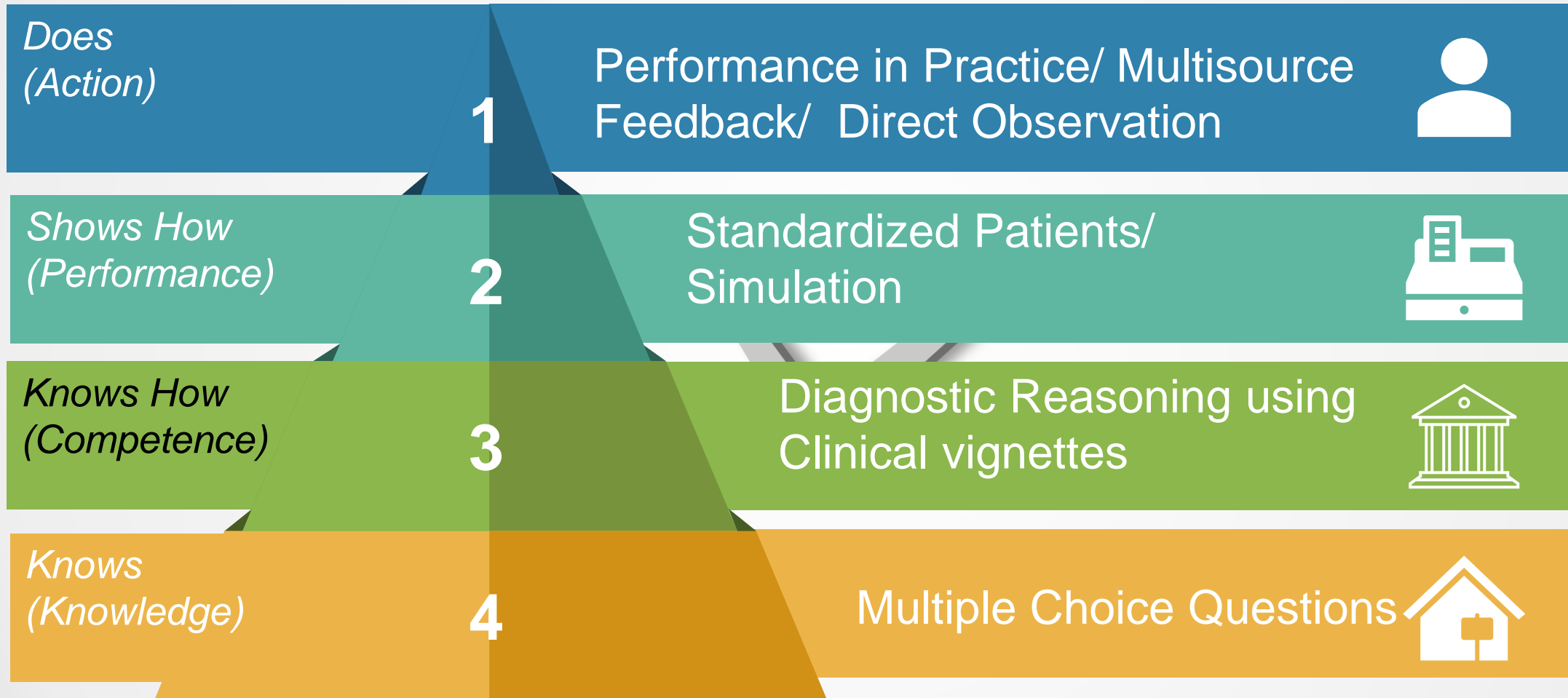
Assessment toolbox

Competency	Required Skills	Method of Assessment	
Medical Knowledge	Investigatory & analytic thinking	Exam MCQ	Exam Oral
	Knowledge & application of basic sciences	Exam MCQ	Exam Oral
Communication Skills	Creation of therapeutic relationship with patients	SP	OSCE
	Listening skills	SP	OSCE
Professionalism	Respectful, altruistic	OSCE	360 ⁰
	Ethically sound practice	360 ⁰	Simulation
	Sensitive to cultural, age, gender, disability issues	OSCE	360 ⁰

CBME competencies

Competency	Domain	Assessment Method
Perform basic surgical skills such as first aid, including suturing and minor surgical procedures in simulated environment	Skill Perform	Model

Assessing the desired Outcome



WBA is through **Observations & Questions** to faculty, team members, Peers & Others

Assessing Communication Skill

Level I	Level II	Level III	Level IV	Level V
Demonstrates adequate listening skills	Checks for Patient & relatives understanding of illness & Treatment	Communicates effectively in stressful, emergent & complex situations	Delivers bad news to families	Capable of effective communication in most challenging situations & invites participation from all stakeholders
Communicates effectively in routine clinical situations	Allows opportunities for questions	Capable of delivering bad news/ poor prognosis	Capable of informing patients & relatives about medical error that caused harm	
		Communicates effectively with patients from different socio-economic	Role models effective communication to juniors	

1 IGNITION
Turn the ignition key all the way clockwise and release when you hear engine fire up

2 CLUTCH
Using your left foot, depress the clutch all the way to the floor

3 GEARS
From neutral, push the gear lever to the left and push up to select 1st gear

4 ACCELERATOR
Slightly & gently press the accelerator using your right foot until the rev counter settles to roughly 1500 revs

5 CLUTCH
Slowly raise the clutch and stop when you feel the car vibrate and the engine tone changes. This is the bite point

6 HANDBRAKE
Slightly pull up the handbrake, press in the button and lower the lever until it stops

7 MOVE OFF
Gently and slightly press the accelerator whilst simultaneously and very slowly releasing the clutch

No	Procedure/ Steps	Performed Correctly Yes/No
1	Ask Patient about drinking caffeine, smoking	
2	Correct Position of Patient	
3	Locate Brachial Artery	
4	Recheck Blood Pressure Wait for 1-2 minutes before recheck Wait for 15 seconds after deflation	
5	Position of arm on hard surface	
6	Obtain systolic(Phase I) and diastolic (Phase IV)	
7	Inflate cuff 10 mmHg increments until patient pulse disappears	

Blood Pressure Measurement Skill



MEDICAL COUNCIL OF INDIA

COMPETENCY BASED UNDERGRADUATE CURRICULUM FOR THE INDIAN MEDICAL GRADUATE

Knows Knows how Shows Shows how Performs

Observe

Demonstrate

Enumerate

Assist

Counsel

Describe

Prescribe

Analyse

Integrate

Guide

Communicate

Correlate

Interpret



Module 3 Assessment

Critique

Collaborate

Clinician Communicator Team Leader Professional Lifelong Learner

Knowledge

Skills

Attitude

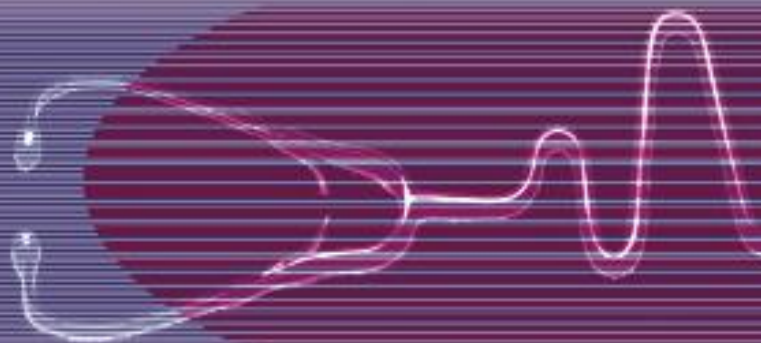
Values

Responsiveness

Communication

Curriculum Implementation Support Program

Recommendations for Clinical Skills Curricula for Undergraduate Medical Education



MAKING SENSE of

Clinical Teaching

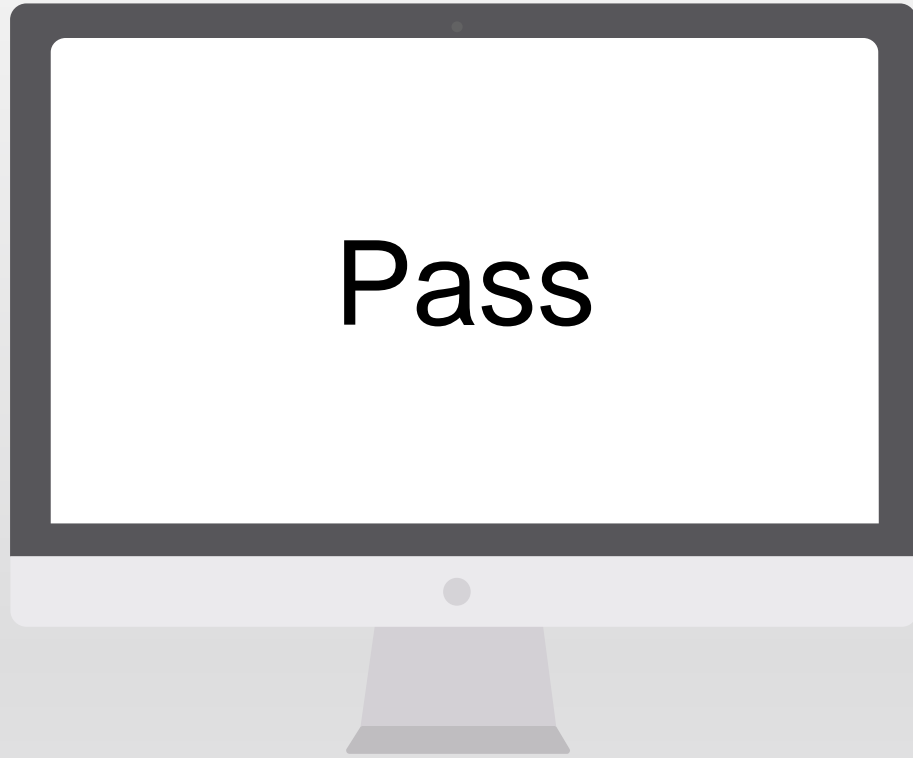
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Internship Starts

