Year 4 MBChB | Workplace Based Assessments (WPBAs):

A Guide for Assessors

Workplace based assessments (WPBAs) are tools used within the clinical environment to assess performance in applying medical knowledge, examination skills, diagnostic acumen, clinical reasoning and management planning. They include:

Case Based Discussions (CBD): A structured discussion of a clinical case, <u>already seen</u> by the student

Mini-Clinical Evaluation Exercise (Mini-CEX): A <u>direct</u> observation of a patient encounter by an assessor

Objective Long Case (OLC): A comprehensive interaction with a patient involving a full history, full physical examination (all systems), documentation, generation of differential diagnosis and formulation of management plan. In Year 4, the OLC focuses on medical complexity.

WPBAs undertaken in Year 4 are **formative** however they are **mandatory**, **students must attempt the assessments** however if the student performs at 'a level below expected' this will not affect their progression to Year 5.

The standard of WPBAs are set at the level expected of a foundation year 1 (FY1) doctor.

Workplace based assessments are imbedded in postgraduate training curricula thus students must build familiarity with their use. By design they ensure students have the necessary knowledge, skills, attitudes and behaviours to work as a foundation doctor.

By completing WBPAs students demonstrate their capability to integrate history and examination, synthesise differential diagnosis, display clinical reasoning and construct management plans.



We expect students to perform at the level of a newly qualified foundation doctor (FY1) and this is the standard we set for satisfactory performance in workbased assessments in Year 4.

This ensures that their directly observed practice is in keeping with curriculum objectives and progression through the undergradate programme.

To ensure adequate rigor, face validity and reliability in assessment processes plus maximise constructive feedback WPBAs have be assessed by experienced clinicians.

Therefore, the following **restrictions apply** to who can assess WPBAs:

- Registered Doctors practicing at the level above Foundation Year 2 (FY2)
- Fully qualified Physician Associates working in an area of practice related to the WPBA
- Advanced/Medical Nurse Practitioners, Advanced Clinical Practitioners or equivalent health professionals working in the relevant area of practice.

If assessments are completed by individuals who do not meet the criteria above, these assessments will be discounted and further attempts required to satisfy progression requirements. If you don't meet the above requirements, please politely decline to undertake the assessment with the student and sign-post them to alternative members of staff.

Case based discussion should be a **planned event** and takes approximately 20 minutes.

Aim: To assess a comprehensive complex clinical case (full history and examination) and the student's formulation of a differential diagnosis and management plan via presentation.

Method: The student should select a patient case and present their own work to the examiner, including all relevant findings from history and examination. They should then suggest a differential diagnosis and from that an investigation and management plan.

Key areas of Assessment: Please consider:

- The depth and accuracy of the clinical assessment regarding history and physical examination
- Clinical reasoning and differential diagnosis formulation from the data gathered.
- Investigation and Management planning regarding their differential diagnosis
- The quality of the medical record keeping
- Professional manner, approach to the case and the verbal case presentation

Feedback: Constructive feedback is critical to prepare the student for summative assessments and for enhancing professional practice.

Marking: The marking should be transcribed directly on to MyProgress, the student should make this available after the assessment either by smartphone app or internet browser.

Global Opinion: Please indicate if the student's performance was at the level expected (of a new FY1)

Mini-CEXs should be a planned event, please inform the student that the observed encounter will be assessed prior to undertaking the assessment and takes approximately 15 minutes.

Aim: To directly observe and assess a **focused patient encounter**, if necessary please remind the student they are **not expected to undertake a long-case**, and must tailor their approach.

Method: Directly observe a patient encounter with a student, this can include a multitude of differing consultations including a focused history and examination (i.e. a patient in A&E following a collapse) or explanation of test results to a patient. Ideally, the patient encounter should involve a patient who is not known to the candidate.

Key areas of Assessment: Please consider:

- The quality and depth of a focused history taking or information gathering
- Professional conduct and communication skills
- Quality of physical examination (if undertaken)
- Accuracy and depth of offered differential diagnosis and management plan
- Structure and fluency of the consultation

Specific Clerkships: Certain Mini-CEXs (i.e., sexual health, have specific objectives and outcomes, please refer to specific guidance available on Blackboard)

Feedback: Constructive feedback is critical to prepare the student for summative assessments and for enhancing professional practice.

Marking: The marking should be transcribed directly on to MyProgress, the student should make this available after the assessment either by smartphone app or internet browser.

Objective Long Case is a planned event, usually organised by the academy teams and takes approximately 1½ hour to 2 hours.

A training package is available by contacting medadmin-4@bristol.ac.uk, this contains detailed instructions and video demonstrations.

Aim: To assess a full patient encounter presenting with **complex medical** or **surgical** pathology and background and involves undertaking a full comprehensive history, full physical examination (cardiovascular, respiratory, abdominal, cranial and peripheral neurological)

Method:

- Suitable patients are identified and consented prior to the assessment.
 - The student should not have encountered the patient before.
 - Please consider the suitability of the patient used within the OLC. Students have previously indicated the complexity of the patient varies enormously:
 - Patients with a background of mild cognitive impairment could be acceptable but please consider if the patient is able to give consent, could be unable to give the student a workable history or tolerate a physical examination and undertake a consultation for up-to 1 hour in duration.
 - Please avoid using patients with advanced memory or cognitive impairment, awaiting investigations or going home the day of assessment.
- The examiner observes the patient encounter with minimal interaction with the student or patient. The student should complete the full assessment of the patient as they were the clerking foundation year one doctor.
- The student has **one hour** to complete the task, please allow the student 10 minutes after the patient encounter to document, formulate a diagnosis and plan. Please use this time to confirm any clinical signs and collect patient feedback.
- Allow the student to present the patient clerking as a summary in structured manner
- Interrogate the student in regard to: Diagnosis, Clinical Reasoning, Investigation and Management.

Key areas of Assessment: Please consider:

- The depth and accuracy of the clinical assessment regarding history and physical examination
- The fluency and technique of the clinical examinations
- Clinical reasoning and differential diagnosis formulation from the data gathered.
- Investigation and Management planning regarding their differential diagnosis
- The quality of the medical record keeping
- Professional manner and approach to the case
- The fluency and structure of the consultation
- Patient's feedback on the encounter

Feedback: Constructive feedback is critical to preparing the student for professional practice.

Marking: A hardcopy assessment form will be provided for completion

Global Opinion: Please indicate if the student's performance was at the level expected (of a FY1)