

Definitions

Workplace-based assessment (WPBA)

INTRODUCTION

Workplace-based assessment (WPBA) has become an essential and significant element of specialist medical training. The Royal College of Pathologists supports and is fully committed to the development and implementation of workplace-based assessment as standard practice. Workplace-based assessment is the assessment of a trainee's professional skills and attitude and should provide evidence of appropriate everyday clinical competences. It has the advantage of high content validity through assessing actual performance in the workplace. Workplace-based assessments are promoted as an integral part of curriculum design and educational planning, in which teaching, learning, assessment and feedback are closely integrated. WPBAs are also an excellent potential source of information for educational supervision and feedback, geared towards providing evidence of satisfactory progress and achievement as well as identifying areas needing further development and discussing and agreeing means of addressing them. Trainees are generally judged against the standard that they are expected to have reached by the end of their current stage of training.

Workplace-based assessment tools include:

- case-based discussion (CbD)
- directly observed practical skills (DOPS)
- mini clinical evaluation exercise (Mini-CEX)
- evaluation of clinical events (ECE)
- multi-source feedback (MSF)

DEFINITION OF WORKPLACE-BASED ASSESSMENT TOOLS

Case-based discussion (CbD)

Case-based discussion (CbD) is a way for trainees to present and discuss their cases with more experienced colleagues throughout their training, and obtain systematic and structured feedback from the assessor. It is designed to assess decision-making and the application or use of medical knowledge in relation to the care of patients where the trainee has been involved either clinically or through their laboratory involvement. It also enables the discussion of the ethical and legal framework of practice and, in all instances, it allows trainees to discuss why they acted as they did. The trainee selects two cases with which they have recently been involved. One of these will be chosen by the assessor for the case-based discussion which will be centred on the trainee's documented involvement either in the medical notes or laboratory records and reports. The trainee chooses the timing, the cases and the assessor.

The trainee selects two case records from patients with which they have recently been involved and in whose notes they have made an entry or for whom they have reported results. The assessor will select one of these for the case-based discussion session. The discussion will start from and be centred on the trainee's record in the notes or reports and is designed to assess clinical decision-making and the application or use of medical knowledge in the care of patients. The trainee chooses the timing, the cases and the assessor.



Direct observation of practical skills (DOPS)

DOPS is a method that has been designed specifically for trainees to be assessed for competence in the day-to-day practical procedures that they undertake as part of their training. DOPS was originally developed and evaluated by The Royal College of Physicians. Strengths and areas for development are expected to be identified after each DOPS encounter.

DOPS is trainee-led. The procedure may involve a patient or laboratory technique. When necessary, the patient's consent is sought for DOPS to be undertaken – this only applies to assessments where actual live patients are present. The trainee chooses the procedure and the observer to conduct the assessment. The assessor is expected to give their open and honest opinion of the trainee's performance and should provide immediate feedback by high-lighting strengths and identifying areas for development. Documentation uses a standard proforma. The expected standard of performance is what would be expected of the trainee at the end of the current stage of their training.

Mini clinical evaluation exercise (Mini-CEX)

Mini-CEX is a snapshot of a doctor/patient interaction. It is designed for an assessor to provide trainees with feedback on skills essential to the provision of good clinical care by observing an actual clinical encounter. The setting for this is usually a clinic or ward, and the assessment is usually only concerned with one aspect of the clinical encounter, such as taking a history or one part of the clinical examination. The assessment is recorded on a standard proforma and the standard expected is that of a trainee at the end of the appropriate stage of training.

Mini-CEX is trainee-led. Patients should be made aware that such an exercise is being conducted. Strengths, areas for development and agreed action points should be identified following each mini-CEX encounter.

Evaluation of clinical events (ECE)

ECE is a new tool. It provides a method of assessing the trainee in the performance of their duties in complex tasks, often involving teamwork or interacting with other professional staff. Examples include clinicopathological evaluation and reporting of diagnostic material, presentation of a case at a multidisciplinary team meeting, or contributing to quality assurance and audit processes in both clinical and laboratory settings.

Multi-source feedback (MSF)

MSF is a method of obtaining feedback in a structured form from staff associated with the trainee who has the opportunity to observe their practice. Such staff may be their supervisors but also staff they work alongside and may include those that the trainee themselves supervise. The respondents are asked to rate the trainee by filling in a standard form listing a number of qualities or behavioural characteristics with a rating scale. The trainee also provides their own assessment of how they think they are doing. It provides reasonable feedback on the trainee's behaviour and competence in clinical situations which may not be directly observed by the supervisor. A variation is to modify the questionnaire for patient feedback. The College is using ePATH SPRAT, a variant of the SPRAT tool which was developed for paediatric trainees.

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