

Direct Observation Objectives

Recognize opportunities to identify, correct and modify clinical skills and behaviors of learners while assessing, managing and treating patients.

Utilize evidence based assessment measures to *assess* learners in a workplace based patient encounter.

Recognize challenges to observation in the clinical setting and *develop* skills to maximize student learning.

Related Resident Evaluation Items

- Was organized and prepared.
- Was easily accessible and allocated sufficient time for explanation and consultation.
- Provided prompt constructive feedback.
- Provided sufficient number of learning experiences.
- Treated me with fairness and respect.

Types of Direct Observation

- Formative – Monitoring student performance to provide ongoing feedback to learners with the goal of improving performance
- Summative – Evaluating student performance against a standard with the goal of grading/assessing the learner's performance
- Focused – Observation of a specific task, skill or competency
- General – Observation of overall competence related to the care of patients in your discipline
- Longitudinal – Observation over an extended period of time with the expectation that the student progresses in their skill level
- Isolated – Ad hoc observation. Multiple isolated observations can be aggregated to provide a complete picture of the student's skill level.

Tools for Conducting Direct Observations

Kalamazoo Communication Tool

Utilizing a consensus method among physician-patient communication experts, the authors identified 7 key elements of communication in clinical encounters. A good patient-physician interaction requires that the physician:

- Build the relationship
- Open the discussion
- Gather information
- Understand the patient's perspective
- Share information
- Reach agreement
- Provide closure

Mini-CEX

Measures seven components of competence:

- Interviewing skills
- Physical examination
- Professionalism
- Clinical judgement
- Counseling
- Organization and efficiency
- Overall competence

Acute Care Assessment Tool (ACAT)

Measures competence in:

- Clinical assessment
- Medical record keeping
- Investigations and referrals
- Management of critically ill patient
- Time management
- Management of take/team working
- Clinical leadership
- Handover
- Overall clinical judgement

RIME (Reporter-Interpreter-Manager-Educator)

- Synthetic vocabulary of student's clinical progress
- Augments quantitative measures discussed

Tips for Conducting Direct Observations

- Consider where your student is at on the RIME framework
- Provide feedback as close as possible to the observation noting particular strengths and suggestions for development
- Agree to and record an educational plan of action
- Consider keeping information about the encounter – noting the type and complexity of the case and the learner's ability/performance to accurately evaluate and provide opportunities designed to help your learner progress to the next level.
- You don't need to watch the student conduct a whole history and physical. You may go in the room for a few minutes and assess different aspects of the student's performance.
- Observe your student on several occasions to get a better sense of their overall competence.

Video Observation

After reviewing the two videos provided in the module, reflect on where the students fall on the RIME continuum.

Which behaviors support your observations?

References

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