Two-Week Rotation Assessment Form Process

Purpose

- Provide a summative perspective on a clerk's clinical and professional proficiencies within the context of the two- week rotation
- Identify areas where a clerk could benefit from further support or independent learning, as well as the resources to assist them

Notes on Implementation

- Use of the Two-Week Rotation Assessment form is mandatory for Two-Week Rotations
- Two-Week rotations should address those competencies that most closely align with their contexts (and that can be **explicitly** addressed within the two-week timeframe)
 - \circ \quad At least two different competencies need to be addressed
 - Decisions around which competencies to choose can be aided by reviewing the objectives for the Two-Week
 rotation to understand which competencies are most frequently addressed (all course and rotation objectives
 are mapped back to the UME competencies The UME office can assist with this effort)
- Students should be made aware of which competencies will be address by the first day of the Two-Week Rotation
- While individual Two-Week rotations do not have to address all seven competencies, the rotation as a whole needs to ensure that all of the competencies are addressed during the rotation's timeframe
- The Two-Week Rotation Feedback form's information will be factored into the clerk's Summative Clinical Clerk Assessment form as part of the summation of the assessment process
- Students need to be educated and reminded about the processes involved, the role of feedback (to correct deficiencies and understand consequences), and its contribution to their personal learning
- Student education about assessment practices begins during the orientation for Clerkship, but it is beneficial to students to reinforce the value of feedback and how it will benefit them during clerkship

Method

Who

- Assessors responsible for completing the form should be designated, in advance, by the Rotation Director or rotation-specific coordinator
- The 2nd & 3rd pages of this document are meant only to assist assessors with <u>completing the final page</u> of this form
- Assessors should be identified to the students at the start of each rotation
- Assessors should review the form with the student on the first day, noting which areas will be assessed during the 2 weeks

What

- The standard Two-Week Rotation Assessment form should be used for all selective rotations
- Supervisors should note that the Two-Week Rotation Assessment form is for summative purposes, but can also have a formative component
 - Summative component:
 - Provides the students with a statement of their overall achievement during the rotation
 - Formative component:
 - In order to provide the clerk with an opportunity for improving their proficiency in the core competencies, directive, helpful statements need to be recorded to guide the clerk in identifying where they need to adjust their learning strategies as well as where they can seek support

When

• Feedback should be provided at the end of the two-week selective rotation, as scheduled by the Rotation Director

Overview of Expectations

1. Medical Expert *	Does Not Meet Expectations	Meets Expectations
* Clinical Reasoning and the Application of Basic Knowledge (1.4, 1.8, 1.9, 1.11)	 does not consistently demonstrate discipline-specific knowledge appropriate to an undifferentiated physician often unable to solve clinical problems difficulty interpreting and integrating available data frequently unable to manage routine clinical situations effectively neglects to incorporate patient input in management planning unable to consistently develop an appropriate differential diagnosis 	 demonstrates discipline-specific knowledge appropriate to an undifferentiated physician offers most possible solutions and explanations for clinical problems interprets and integrates available data begins to address situations by taking into account best evidence and practices (patient safety, costs, patient values, and resources) able to develop an appropriate differential diagnosis develops an effective patient-centred management plan
 * Patient Assessment – History Taking (1.6) Observed Inferred Not able to assess 	 □ is more random than purposeful □ lacks completeness □ inconsistent response to patient concerns and/or contexts 	 negotiates an agenda with the patient consistently identifies and addresses issues by exploring diagnosis, causes, severity, and impact elicits patient's concerns explores social issues is thorough, accurate and systematic
* Patient Assessment – Physical / Mental Status Examination (1.7) Observed Inferred Not able to assess	 disorganized sequence often misses or ignores significant normal and abnormal findings insensitive or unresponsive to patient 	 uses the exam to confirm diagnosis, underlying causes, and severity efficient and complete focused, relevant, and accurate consistently able to elicit significant normal and abnormal findings sensitive to patient comfort and needs
2. Communicator	Does Not Meet Expectations	Meets Expectations
Relationships (2.1, 2.2, 2.3, 2.4, 2.5, 2.7,.28, 2.9, 2.10)	 unable to demonstrate the relationship between effective communication and improved patient outcomes does not demonstrate rapport, respect, sympathy, or empathy for patients, families, or colleagues 	 establishes a positive relationship (understanding, trust, respect, honesty, empathy) with patients and their families maintains patient confidentiality / privacy elicits and synthesize relevant information from multiple sources communicates effectively with patients, family, and colleagues respects diversity (gender, religion, culture) engages patients, families, and colleagues in shared decision making
Conveying Information (Verbal and/or Written) (2.11, 2.12)	 disorganized incomplete inaccurate or illegible rambling problem list not attempted or complete unable to consistently develop an appropriate differential diagnosis 	 accurate and complete oral/written presentation of information comprehensible attempts to adapt information to clinical contexts well organized problem list
3. Collaborator	Does Not Meet Expectations	Meets Expectations
Interprofessional Healthcare Team (3.3, 3.4, 3.5, 3.6)	 exhibits difficulty working with other members of the team often uncooperative, disruptive or unprofessional thoughtless or arrogant fails to recognize or respect the opinions and roles of others 	 recognizes and respects the diversity of roles, responsibilities and competencies of other professionals works within the team to assess, plan, provide and integrate patient care engages other team members in patient care situations participates in a collegial process to maximize effective team functioning
Conflict Prevention and Resolution (3.2, 3.5)	 unable to recognize and/or deal with interpersonal conflict causes conflict fails to respect and/or understand the skills, knowledge, experience, or opinions of other professionals 	 recognizes interpersonal differences, misunderstandings and limitations works with other team members to prevent, negotiate, and resolve interprofessional conflict
4. Manager	Does Not Meet Expectations	Meets Expectations
Healthcare System (4.1, 4.2, 4.3, 4.4)	 often unaware of resource availability and/or limitations when making clinical decisions 	 aware of access to appropriate resources for learning and patient care allocates resources in an ethical and cost-effective manner

5. Health Advocate	Does Not Meet Expectations	Meets Expectations
Patients, Communities, Populations (5.2, 5.3, 5.4, 5.5)	 does not recognize the importance of the determinants of health does not consistently inquire about lifestyle/risk factors often omits patient involvement or understanding of their health and health care does not always apply accepted legal, moral and ethical principles when dealing with patients and/or colleagues 	 identifies adverse lifestyle issues during patient care and promotes disease prevention & healthy living engages in anticipatory guidance of patients demonstrates accepted legal, moral and ethical principles of physicians in relation to the community and to patients attempts to incorporate the determinants of health in decision making
6. Scholar	Does Not Meet Expectations	Meets Expectations
Life-long Learning (6.1, 6.2, 6.3, 6.4, 6.5, 6.6)	 does not always recognize personal limitations (knowledge and/or skills) does not assume responsibility for learning 	 seeks out the appropriate resources to track, evaluate, and achieve self-growth when areas for knowledge and/or skill development are identified applies newly gained knowledge or skills in the care of patients demonstrates ability to share newly gained knowledge/skills with colleagues
Evaluation and Application (6.7, 6.8, 6.10)	 poor critical appraisal skills does not recognize degrees of complexity rarely demonstrates curiousity in the face of the unknown does not appear to know how and where to find appropriate answers 	 asks effective clinical questions and attempts to answer with appropriate resources applies critical appraisal skills when considering appropriate resources recognizes own uncertainty and seeks clarification seeks guidance from senior members of the team
7. Professional *	Does Not Meet Expectations	Meets Expectations
* Ethical and Social Behaviour (7.1, 7.2, 7.3, 7.5, 7.6)	 has demonstrated limited knowledge of and/or respect for professional boundaries does not recognize or respond appropriately to common ethical issues often fails to demonstrate integrity, or responsibility, or respect does not always demonstrate respect for patient confidentiality and privacy 	 abides by the professional, legal and ethical codes of practice maintains appropriate professional boundaries recognizes and responds appropriately to common ethical issues honest and trustworthy identifies personal conflicts of interest that may affect care completes clinical assignments efficiently and effectively responds appropriately to the diverse needs of patients and families in routine circumstances
* Reflective Practice (7.11, 7.12, 7.13)	 does not demonstrate the ability to learn from experience does not recognize own limits and/or seek help difficulty accepting and/or incorporating personal and/or professional feedback 	 demonstrates ability to learn from experience in common & critical events seeks feedback about personal performance from senior members of the team recognizes how personal biases, attitudes and feelings may impact self-learning and patient care recognizes personal limits and seeks help appropriately tries to incorporate feedback on personal and professional performance



MEDS 2018

Western University



Schulich School of Medicine & Dentistry

Two-Week Rotation Assessment

Academic Year 2016 - 2017

Student:	Selective:	Evaluator:	Date:

The clerk's level of achievement is based on feedback from supervisors, health care team members, and any assessments completed by the end of the two-week selective. It is understood that it is not possible to adequately assess all seven UME competencies. The form below denotes the competencies explicitly addressed by the 2-week rotation.

Note: The Summative Clinical Clerkship Assessment form denotes specific expectations for each competency. Students who receive "Does Not Meet Expectations" on any one of the subcomponents within any category/competency (see Summative Clinical Clerkship Assessment Form) should receive "Does Not Meet Expectations" for the entire competency.

Note: Failure to "Meet Expectations" for any subcomponent in the Medical Expert or Professional competencies results in failure of the selective rotation. Failure in two or more of the other categories results in failure of the selective rotation.

Assessment process used to complete report: (Check as many as apply)

Oral exam □ Case presentation(s) □ On-call performance Vritten exam □ Written record review

□ Resident assessment

□ Observed patient interaction(s) □ Healthcare team member assessment

Со	mpetency – check which competencies the selective explicitly addressed	Does Not Meet Expectations	Borderline	Meets Expectations	Exceptional
	Medical Expert				
	Communicator				
	Collaborator				
	Manager				
	Health Advocate				
	Scholar				
	Professional				

Overall Two-Week Rotation Assessment:				
Does Not Meet Expectations	Borderline	Meets Expectations	Exceptional	

If the student Does Not Meet Expectations, the student has failed the Selective. Details must accompany this form.

Formative Feedback:

Use this space to:

ii) provide a summary of the clerk's overall performance including strengths, especially if deemed to be Exceptional; and i) identify 1 - 2 specific areas where the student should focus their learning to further develop based on the competencies above. Provide concrete steps or guidelines the student can take.