

mini-CEX (Clinical Evaluation Exercise)

ASSESSOR WRITTEN TRAINING



Thank you for agreeing to complete this assessment for this trainee.

What is the mini-CEX?

mini-CEX is designed to provide feedback on skills essential to the provision of good clinical care by observing an actual clinical encounter. The mini-CEX is a “snapshot” of a doctor/patient interaction. Not all elements need be assessed on each occasion. In keeping with the Foundation programme quality improvement assessment model, strengths, areas for development and agreed action points should be identified following each mini-CEX encounter. This form samples a range of areas within the Foundation curriculum and can be mapped to *Good Medical Practice* but was designed originally by the American Board of Internal Medicine.

Should I have been asked to be an assessor?

You need not have prior knowledge of this trainee.

You should be an experienced SpR, SASG, consultant or GP.

mini-CEX is suitable for use in a community-based, out-patient, in-patient or acute care setting.

How should it work?

Please ensure that the patient is aware that the mini-CEX is being carried out. The process is trainee led. They have chosen you to assess them and they have chosen the clinical encounter. The encounter should however be representative of their workload. The observed process should take no longer than 15-20 minutes. Immediate feedback should take no longer than 5 minutes. Further guidance is available online at www.mmc.nhs.uk/pages/assessment

mini-CEX: Competencies Assessed and Descriptors

Question area:	Descriptor for a satisfactory trainee:
History taking	Facilitates patient’s telling of story, effectively uses appropriate questions to obtain accurate, adequate information, responds appropriately to verbal and non-verbal cues
Physical examination	Follows efficient, logical sequence; examination appropriate to clinical problem, explains to patient; sensitive to patient’s comfort, modesty.
Professionalism	Shows respect, compassion, empathy, establishes trust; Attends to patient’s needs of comfort, respect, confidentiality. Behaves in an ethical manner, awareness of relevant legal frameworks. Aware of limitations
Clinical judgement	Makes appropriate diagnosis and formulates a suitable management plan. Selectively orders/performs appropriate diagnostic studies, considers risks, benefits.
Communication skills	Explores patients perspective, jargon free, open and honest, empathic, agrees management plan/therapy with patient,
Organisation/efficiency	Prioritises; is timely, succinct. Summarises
Overall clinical care	Demonstrates satisfactory clinical judgement, synthesis, caring, effectiveness, Efficiency, appropriate use of resources, balances risks and benefits, awareness of own limitations

Completing the form:

Specific points:

Assessor Training: is helpful in any assessment process so please read the entire form, trainee guidance and this written training. You can indicate that you have done this on the form by crossing “Have Read Guidelines”.

Number of previous mini-CEX observed? This question is to explore the impact of familiarity/experience on rater performance using mini-CEX as part of the quality assurance process. Please score how many mini-CEXs you have ever observed with any trainee at any level.

Focus of clinical encounter: Diagnosis should include an assessment of the trainees’ examination skills and their abilities to reach a provisional diagnosis.

Complexity of case: Please score the difficulty of the clinical case for the level of a trainee completing the Foundation programme.

Satisfaction with mini-CEX: Please grade your satisfaction with mini-CEX as an assessment process.

Using the scale:

Please use the full range of the rating scale. Comparison should be made with a doctor who is ready to complete either Foundation Year 1 (previously PRHO) or 2 (previously SHO Year 1) – please see form for which year. It is expected that ratings below ‘meets expectations for F1 or F2 completion’ will be in keeping with the trainee’s level of experience early in each year.

Feedback:

In order to maximise the educational impact of using mini-CEX, you and the trainee need to identify agreed strengths, areas for development and an action plan. This should be done sensitively and in a suitable environment. Collated feedback for the whole year will be provided for each trainee once 6 mini-CEX encounters have been submitted. Please return the pad back to the trainee but keep the yellow copy for your own confidential records. Thank you very much for completing this form and feeding back to the trainee.