

### CASE

Relevant topic area: \_\_\_\_\_

Age of patient:   Gender:  Male  Female

Case details: *Short description of the presenting case.*

### ASSESSMENT

	Level 1	Level 2	Level 3
<b>Report and trust</b> <i>Exhibits professional behaviours in practice.</i>  <input type="checkbox"/> Not applicable	Interpersonal skills require further development including awareness of sociocultural differences, invitation of questions, and strategies for exploring sensitive information.	Adequate introductions, with awareness of sociocultural differences and explanation of the assessment. More questions and inquiry about sensitive information needed.	Well-developed interpersonal skills. Appropriate processes for obtaining permission for assessment, inviting questions and discussing sensitive information empathetically.
<b>History-taking</b> <i>Elicits and interprets a relevant history.</i>  <input type="checkbox"/> Not applicable	Approach needs to be more organised, with better focus and interpretation. Knowledge and skills need improvement to reduce gaps.	Systematic approach, with specific diving or hyperbaric medicine history relevant to this patient, and past medical history. Information could be more directed towards Diving and Hyperbaric Medicine (DHM).	Sophisticated and professional approach eliciting specific DHM relevant patient history with appropriate filtering of information.
<b>Physical examination</b> <i>Conducts a focused physical examination.</i>  <input type="checkbox"/> Not applicable	Examination skills require improvement to reduce significant gaps, and improve recognition of important signs.	Targeted examination, but could be further refined. More attention is required to identify subtle signs.	Relevant, specific systematic examination including, subtle signs, that appropriately reduce the differential diagnosis.
<b>Interprets investigations</b> <i>Discusses implications of results in relation to DHM.</i>  <input type="checkbox"/> Not applicable	Interpretation of investigations could be improved, Recognition of implications for safety and efficacy of hyperbaric treatment not well understood.	Adequate interpretation of investigations. Can discuss results of common investigations and implication for diving or HBO therapy.	Comprehensive approach, able to interpret a range of investigations and make recommendations accordingly.
<b>Ordering of new investigations</b> <i>Plans and orders relevant investigations in relation to DHM.</i>  <input type="checkbox"/> Not applicable	Does not order specific investigations that may impact on patient safety or diagnosis or orders investigations that are not relevant or delay treatment.	Orders appropriate investigations and can determine the difference between investigations for safety or for diagnosis.	Orders specific tests highly relevant for patient safety and/or diagnosis within a management plan of how the tests outcome will affect the persons management.

	Level 1	Level 2	Level 3
<b>Adapts re-assessment</b> <i>Adapts assessment according to patient changing condition.</i> <input type="checkbox"/> Not applicable	Awareness and assessment of patient needs and developing signs and symptoms requires more focus.	Adequate approach to re-assessment of the patients developing signs and symptoms and shows adaptation of the management plan.	Has a comprehensive cycle of re-assessment and adaptation of the initial management plan depending on changes in patient's condition or changes in signs and symptoms.
<b>Explores patient's issues</b> <i>Identifies and explores patient's issues, concerns, beliefs, goals, expectations.</i> <input type="checkbox"/> Not applicable	Limited exploration of the patient's issues. Educational opportunities for the patient must be identified and appropriate ongoing referrals made.	Reasonable identification of the patient's issues, including beliefs, goals and expectations. Ongoing patient education, referrals to other services and follow-up could be better targeted.	Comprehensive exploration of the patient's issues, including appropriate education, relevant referrals and follow-up.

## FEEDBACK

What aspects of this assessment were performed well?	
Areas upon which to concentrate further development	

## OVERALL RATING

Please tick appropriate boxes.

- Trainee would benefit from observing supervisor completing clinical assessment with similar cases (*clear majority level 1*).
- Trainee skills need further development, direct supervision and feedback is required (*majority level 1, some in level 2*).
- Trainee can manage similar cases and consult with supervisor as required (*majority level 2*).
- Trainee can manage similar cases and may benefit from talking through more advanced aspects of a case from time to time (*majority level 2, some in level 3*).
- Trainee can independently manage similar cases and could assist junior colleagues (*clear majority level 3*).

Comments:

## NAMES AND SIGNATURES

Trainee name: \_\_\_\_\_ Trainee ID:

Trainee email: \_\_\_\_\_ Signature: \_\_\_\_\_

Assessor name: \_\_\_\_\_ ANZCA ID:

Assessor email: \_\_\_\_\_ Signature: \_\_\_\_\_

Supervisor of training name: \_\_\_\_\_ Signature: \_\_\_\_\_

### Instruction Sheet

A clinical skills assessment (CSA) involves an assessor/supervisor observing a trainee while they conduct an assessment of: a prospective diver for fitness to dive; or a patient presenting with a diving-related injury or for hyperbaric oxygen treatment. The intention is to assess the trainee's skills in taking a relevant history and performing a physical examination in an authentic situation. The prospective diver or patient should be new to the trainee where the appropriate skills may be demonstrated as part of the normal clinical care.

### CONDUCTING THE ASSESSMENT

---

1. The trainee will initiate a CSA by approaching an assessor and organising an appropriate time for the assessment.
2. The assessor considers the descriptor that best describes the trainee in that encounter, circling the descriptor and making notes on the assessment form during and/or immediately after the assessment.
3. Not all criteria may be applicable to be assessed during each CSA. In this situation the assessor should mark "not applicable" for that item.
4. A feedback discussion is a crucial part of workplace based assessments, and should occur immediately following the observation. It is expected to take 15-20 minutes and should be conducted in an appropriate private environment.
5. The assessor should encourage the trainee to reflect on their own performance. The assessor should then provide their perspective and provide written comments on the form to summarise the feedback discussed.
6. The assessor must determine whether the assessment should contribute to the completion of training requirements or whether the trainee would benefit from another similar exercise and feedback. The minimum criterion for an assessment that may contribute to completion of a stage of training is no descriptors from the left-hand column.
7. Trainees are encouraged to use the CSA as an opportunity to develop knowledge and skills. Trainees may complete multiple assessments on similar topic areas, intended to show improvement over time towards a satisfactory assessment.
8. The trainee and assessor discuss and agree to the next steps for development and the time-lines in which this should be completed – both sign the form.
9. The trainee is responsible for retaining the original CSA form. Completed forms are to be included in the trainee's portfolio to be reviewed by the supervisor of training at the next clinical placement review meeting.