

2.5 Evaluation Process and Reforms

2.5.3 Reforms in examination procedures and processes including automation of the examination system

Workplace Based Assessment

Workplace based assessment complements the traditional classroom learning and ensures that medical professionals are competent in delivering safe and effective patient care in real-world settings. The various workplace-based assessment done in SMVMCH are:


- ***Direct observation***

It involves direct observation of the professional's performance by an assessor/mentor/guide. Postgraduate (PG) student is observed by the guide during their regular work activities, such as patient interactions, clinical procedures, teaching sessions and other tasks.

- ***Multiple Assessment Tools***

These tools include structured mini-clinical evaluations (mini-CEX), case-based discussions, Direct Observation of Procedural Skills (DOPS), peer assessments, patient feedback and self-assessments.

Mini-CEX is a short-structured assessment where the evaluator observes a student encounter with a patient. It assesses the not only the clinical skills but also communication, professionalism and other competencies. Immediate feedback is provided to the students and the individual's performance is rated. DOPS assessment is structured, with clear criteria and


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guidelines to assess the procedural skills. Evaluator uses a standardized rating scale to evaluate the students' performance

Peer Assisted Skill Assessment enables the students to evaluate their peer skill performance and helps to identify the routinely done mistakes and provide opportunities for correction.

- ***Formative and Summative Assessment***

Formative assessment provide feedback and identify areas for improvement to improve skills continuously. Summative assessments make judgements about a professional's overall competence and readiness for progression. SMVMCH conducts regular and robust formative and summative assessments as per the NMC guidelines.

- ***Reflective practice***


SMVMCH has incorporated reflective writing process in the curriculum. Faculty and students are trained for reflective writing. Reflective writing is motivated among students during the field trips, AETCOM sessions, Early Clinical Exposure sessions and family adoption programs.

- **Self-assessment and Critical Appraisal**

UG students evaluate themselves during the mentor mentee meetings and seek feedback from their respective mentors. PG students are required to do self-assessment and critical appraisal that gives an opportunity to reflect on themselves. Self-assessment helps them to identify their strengths and weakness, their career goals, seek feedback from their mentors and to recognize their accomplishments.

- **Logbooks**


All UG and PG students are required to document their academic activities in the log books. These log books ensures that students keep a track of the attained competencies and skills in each


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department. The attained skill competencies are certified by the respective department faculty and HODs. The log books also encourage the students for reflecting on the learned experiences, lessons learned and decisions taken.

- **360 Degree Feedback**

It is also known as multi-rater feedback, which involves gathering feedback from multiple sources to provide a comprehensive view of an individual's skills, behaviours and performance. The sources include self-assessment, peers, faculties, nurses, department clerks and stakeholders. The feedback is usually collected using questionnaires or surveys, where students are rated to provide their perceptions about the individual's strengths, weakness and areas for improvement. The process is kept anonymous to encourage honest feedback. This type of feedback provides a holistic assessment for the students, which may be missed by the traditional way of assessment. SMVMCH is in the initial phase of developing this assessment plan and future actions involves incorporating the 360-degree feedback plans into the student support system.



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DEPARTMENT OF DERMATOLOGY, VENEREOLOGY & LEPROSY

Modified Mini – PAT (Peer Assessment Tool)

Name: Dr. S. Youvalakshmi

Year: First Year (2022 – 2025)

Date: _____

Assessor's Position: Consultant Resident Preceptor Other Please Specify _____

How do you rate this student in their:	Below expectation for PG	Borderline for PG	Meets expectations for PG	Above expectation for PG
Good Clinical Care				
1. Ability to interpret patient problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Ability to formulate appropriate management plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Awareness of their own limitations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Ability to recognize psychosocial aspects of illness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Utilize appropriate resources e.g. ordering investigations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Good Medical Practice				
6. Ability to manage time effectively / prioritize	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Technical skills appropriate to Postgraduate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship with Patients				
8. Communication with patients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Communication with caregivers and / or family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Respects for patients and their right to confidentiality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working with Healthcare Team				
11. Verbal communication with colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Written communication with colleagues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Ability to recognize and value the contribution of others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Accessibility / Reliability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Overall, how do you rate this doctor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Do you have any concerns about the postgraduates professionalism Yes No

If yes please state your concerns:

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Name of the assessment method	DOPS (Direct Observation of Procedural Skills)
Objectives of the method	To assess the competency of postgraduate resident's technical, operative and professional skills in basic diagnostic and interventional procedures. To provide appropriate feedback to the students to improve their skill.
Competencies/Topics assessed by the method	Endometrial curettage Cervix biopsy Colposcopy Pap smear Vaginal delivery Vacuum delivery
Short description of the method	After taking consent from the patient, postgraduate resident was assessed for commonly performed procedure. The assessor observed the resident conducting the procedure in all 4 domains mentioned in the checklist. Assessment included preprocedural preparation till post procedural care. The assessor evaluated and signed the DOPS checklist. At the end of the assessment, feedback was given to the postgraduate resident highlighting their strength and weakness.
Feedback obtained from the students and Faculty regarding the method	Students feedback on DOPS: It helped to identify the areas need to be corrected. It also helps in gaining confidence that the procedure is done correctly.
Photo document attached	✓

TRUE COPY ATTESTED

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DEPARTMENT OF GENERAL MEDICINE

Direct Observation of Procedural skill - (DOPS) - Assessment

Procedure :-

Evaluated by :

Date:

	N/A	Below expectations 1	Borderline 2	Meets expectations 3	Above expectation 4
Domain and comments:- Professional approach: (to include communication, consent and consideration of the patient)					
Knowledge (indication, anatomy, technique * Demonstrates appropriate pre-procedure preparation)					
*Appropriate analgesia / sedation					
Technical ability					
Aseptic technique					
Post procedure management					
Overall ability to perform procedure		Need more practice	May need supervision		Competant to perform unsupervised

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2.5.25

Mini- Clinical Evaluation Exercise (CEX) checklist

Student name : DR. NITHIN RAKESH S.

Roll number : _____

Name of clinical evaluation done : Respiratory system

	Unsatisfactory		Borderline satisfactory		Highly satisfactory		Not assessed
	1	2	3	4	5	6	
History taking					5 ✓	6	
Physical examination				4 ✓	5	6	
Professionalism					5 ✓	6	
Communication skill				4 ✓	5	6	
Clinical judgement				4 ✓	5	6	
Overall performance				4 ✓	5	6	

Please circle the appropriate score for that sub-division.

Feedback:

	Student's self-opinion about performance	Faculty feedback
Mention what is done well	Was Confident about History Taking and Examination.	History taking
Suggestions for development	Training with the checklist will improve performance.	To improve communication by explaining to parent.
Agreed plan of action	Based on checklist, to improve components which were missed.	

Assessor's signature: Dr. T. Preethi

Student's signature: S. NITHIN RAKESH

Date and time: 24/11/22 12 pm

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Faculty feedback:

	Student's self-opinion about performance	Faculty feedback
Mention what is done well	Due to observation, I understood the importance of every step.	Stepwise performance was good
Suggestions for development	Awareness of checklist will show the ideal method	To communicate better with parents
Agreed plan of action	As per checklist features, to do all steps.	

Assessor's signature: *T.P.* Dr. T. Preethi Student's signature: *R.K.* R. Kokila

Date and time: 24/11/22 12.30 pm

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*Appropriate analgesia / sedation					
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Post procedure management					
Overall ability to perform procedure		Need more practice		May need supervision	Competant to perform unsupervised
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