

Clinical case analysis is a form of chart-stimulated recall, using a documented clinical encounter as a stimulus for questioning. It is a hybrid assessment format that combines clinical note or case report review with oral questioning. Using the participant's own patients situates the assessment within a realistic context, adding to the authenticity and value of the exercise. Probing questions are used to assess clinical decision-making and the ability to reflect on and explain the rationale for the decisions.

Overview

Clinical case analysis can be conducted in the participant's workplace using recent patient notes as a stimulus. Alternatively the assessment can be done remotely using submitted cases. The participant provides the case material either as submitted cases or as patient notes selected at random by the assessor from the appointment book. The main area of focus for this assessment is on clinical reasoning, with a minimum of two clinical case analyses completed per six month term.

The Workplace Based Assessment (WBA) competencies that will be assessed

1. Communication skills
2. Information gathering and interpretation
3. Making a diagnosis, decision making and reasoning
4. Therapeutic reasoning
5. Clinical Management
6. Partnering with the patient
7. General practice systems
8. Professionalism
9. Overall clinical competence

The standard is set at the level of RACGP Fellowship. Participants are rated as being at or progressing towards the standard.

Assessor responsibilities

- Determine if random case analysis of notes or case-based discussion of submitted cases will be used as the stimulus for the assessment.
- Review submitted cases and prepare notes to guide the assessment OR make a random selection of recent cases seen by the participant from the appointment book.
- Use the case notes and suggested questions to guide the assessment.
- Consider how the participant has performed in each of the areas and how they are progressing towards the expected standard.
- Encourage the participant to reflect on their own performance prior to discussing observations.
- Provide feedback on the performance and agree on any action items.
- Encourage the participant to update their learning plan based on agreed learning outcomes.
- Complete and submit the rating form.

Participant responsibilities

- Only use your own case material for this assessment.
- Submit the cases at least 7 days before the assessment. Be prepared to review and improve the case if asked to do so by the assessor.
- The consultations should cover a range of different clinical problems, age groups and gender.
- Use the case submission template when writing up your case.
- Actively seek feedback and make sure that you get answers to the questions about your performance that you want to ask.
- Reflect on the feedback and update your learning plan accordingly.

Process

- A minimum of two cases assessed in each six-month term.
- Cases are submitted online for the assessor to review. If not yet at an acceptable standard then the participant will be guided to review and resubmit.
- The assessor selects the cases for discussion.
- The assessor will ask the participant to present their case, after which they will ask a series of questions.
- Rating forms are completed in the PEP online portal.

Communication and consultation skills

Communication is appropriate to the person and the sociocultural context.

Engages the patient to gather information about their symptoms, ideas, concerns, expectations of health care and the full impact of their illness experience on their lives.

Communicates effectively in routine and difficult situations.

Uses a variety of communication techniques and materials (e.g. written or electronic) to adapt explanations to the needs of the patient.

Prioritises problems, attending to both the patient's and the doctor's agenda.

Information gathering and interpretation

A comprehensive biopsychosocial history is taken from the patient.

All available sources of information are appropriately considered when taking a history.

Specific positive and negative physical examination findings are elicited

Rational options for investigations are chosen using an evidence-based approach

Collects and reports history and examination data in a hypothesis-directed manner

Making a diagnosis, decision making and reasoning

Integrates and synthesises knowledge to make decisions in complex clinical situations

Modifies differential diagnoses based on clinical course and other data as appropriate

Articulates an appropriate problem definition

Formulates a rational list of differential diagnoses

Demonstrates metacognition (thinking about own thinking)

Therapeutic reasoning

Outlines and justifies the therapeutic options selected, basing this on the patient's needs and the problem list identified.

Clinical Management

Non-pharmacological therapies are offered and discussed

A patient-centred and comprehensive management plan is developed

Managing the uncertainty of undifferentiated conditions

Manages the uncertainty of ongoing undifferentiated conditions

Partnering with the patient

Implements screening and prevention strategies to improve outcomes for individuals at risk of common causes of morbidity and mortality

Coordinates a team-based approach

Demonstrates understanding of available services in the local community.

Current and emerging public health risks are managed appropriately

Identifies opportunities to effect positive change through health education and promotion

Professionalism

Appropriately manages ethical dilemmas that arise

Identify and manage clinical situations where there are obstacles to provision of duty of care

Actively engages in feedback as a dialogue, discussing performance and setting own goals for professional development

General practice systems

Maintains comprehensive and accurate clinical notes

Written communication is clear, unambiguous and appropriate to the task.

Demonstrates efficient use of recall systems to optimise health outcomes

Accurately completes legal documentation appropriate to the situation

Patient confidentiality is managed appropriately

Informed consent is explained and obtained

Overall clinical competence

To be rated as being at the standard expected for Fellowship would require that the participant performs consistently at that standard across all domains.