

Clinical Assessment and Quality Assurance

Discipline of Physiotherapy TCD 2017

Content

- Assessment in the clinical setting
- BSc in Physiotherapy assessment tool
- Quality assurance
- Discipline of Physiotherapy's experience with assessment

Assessment in Clinical Education

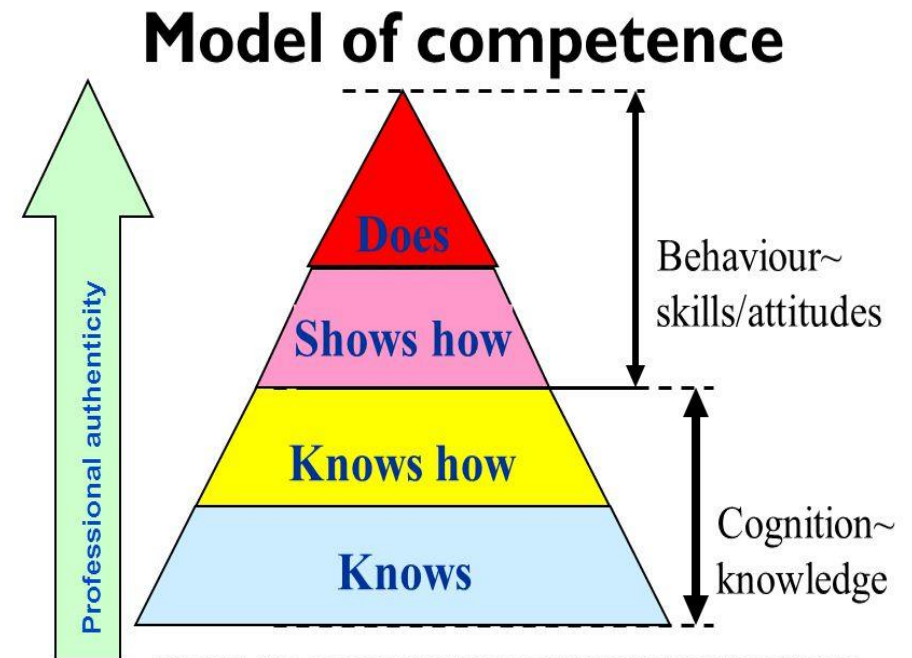
- Clinical education contributes to approximately one third of Health Sciences courses.
- Clinical Education modules account for a significant percentage of the final degree marks. High stakes examinations.
- Clinical assessment tools need to be psychometrically sound and appropriate for use in all clinical settings.
- Health professional programme providers are challenged by clinical performance assessment for reasons related to:
 - The evidence supporting assessment methods used
 - Factors related to the observation component of the assessment process

Assessment in Clinical Education

- Professional regulatory bodies for health professionals require students to attain certain competencies before they can register.
- Accurate grading of students is required by universities to ensure students are awarded a mark that reflects their true performance. Particularly for their final degree mark as many graduate work as “autonomous practitioners”.
- Grading students demands objectivity, accuracy and consistency to ensure students are ready for practice and patient safety is assured.

Competence versus Performance

- *“Competency-based assessment measures what doctors can do in controlled representations of professional practice; performance-based assessment measures what doctors do in actual professional practice”.*



Miller GE. The assessment of clinical skills/competence/performance. Academic Medicine (Supplement) 1990; 65: S63-S67.

Examples of Assessment Tools

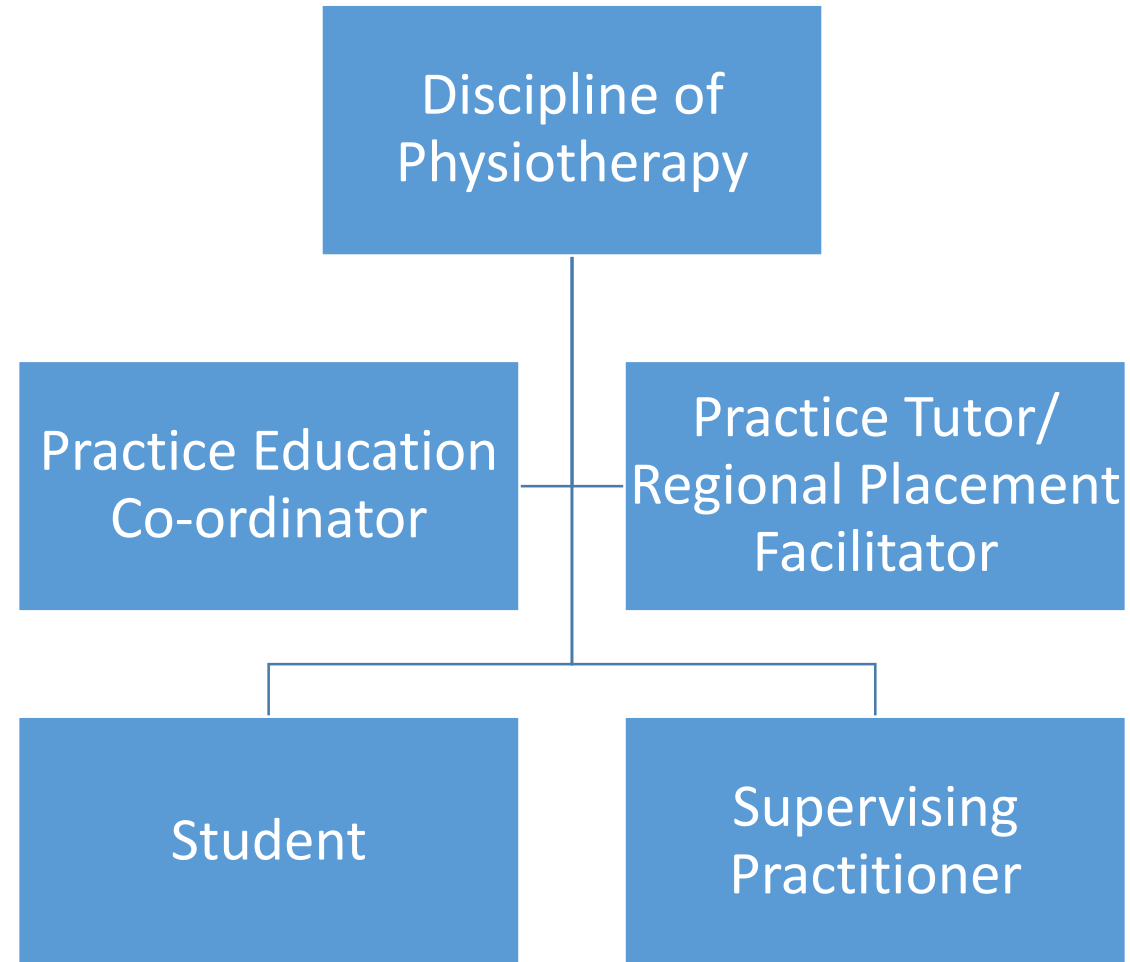
Competence:

- Objective Structured Clinical Exam
- Practical exams
- Oral/ viva exams

Performance:

- 360 degree assessment
- Mini-CEX
- Performance based assessment tools e.g. CAF
- Long case/ seen or unseen clinical exam
- Portfolios
- Reflective logs/ essays

Model of Clinical Education in the BSc programmes in Physiotherapy in Ireland



Year 1	Year 2	Year 3	Year 4
Anatomy 1	Anatomy 2	Scientific Investigation 1	Practice Education III (20 ECTS)
Clinical Anatomy	Clinical Sciences	Paediatric and Learning Disability	Scientific Investigation 2
Physiotherapy Skills	Neurology Systems	Clinical Rehabilitation	Ergonomics 2
Physics	Cardiovascular and Respiratory Systems	Psychology	Advances in Physiotherapy
Chemistry	Musculoskeletal Systems	Rehabilitation of Bone and Joint Diseases	
Physiology	Professional Issues I	Professional Issues II	Professional Issues III
	Exercise Medicine 1	Exercise Medicine 2	Sports and Exercise Medicine
	Practice Education I (10 ECTS)	Practice Education II (20 ECTS)	

Clinical Education Modules in the BSC Physiotherapy Programme TCD

Module	ECTS	Assessment Tool	Placement
Practice Education I	10 ECTS	Common Assessment Form (CAF) Level 1	Placement 1 (5 weeks)
Practice Education II	20 ECTS	CAF Level 2	Placement 2 (6 weeks) Placement 3 (6 weeks)
Practice Education III	20 ECTS	CAF Level 3 Final Patient Assessment	Placement 4 (4 weeks) Placement 5 (5 weeks) Placement 6 (6 weeks)

Background

- Following the Bacon Report 2000 the DoHC set up The National Planning Group
- They recommended the development of a national evidence-based form to be developed for the assessment of student placement
- Sub-Committee set up under the auspices of Chartered Physiotherapists in Education (an Employment Group of the ISCP) first met in August 2004 to look at developing a common assessment form for all the Schools of Physiotherapy in the Republic of Ireland
- The Common Assessment Form was developed by the summer of 2006
- Validity and reliability was established (Coote et al, 2006)
- Rolled out to clinical site in 2007

Common Assessment Form

- Performance based assessment tool
- Continuous assessment
- Formative and summative feedback
- Three levels of the assessment form

CAF STRUCTURE

- The form consists of three parts:
 - Part 1: Five areas of practice
 - Part 2: Safety and professionalism
 - Part 3: Record of clinical hours

CAF Structure and TCD Grading System

Areas of Practice	Learning Outcomes	Assessment scoring
Patient Assessment	10	100
Patient Treatment and Management	10	100
Professionalism	10	100
Communication	5	50
Documentation	5	50

Understanding Learning Outcomes and Behaviours

- Learning outcomes are statements of achievement that the student should have gained by the end of the placement.
- Behaviours: Describe actions that should be demonstrated to indicate the learning outcome have been achieved.
- As the student progresses through the levels the learning outcomes do not change but the expected behaviours do.

Example of change in behaviour descriptors for 'Patient Assessment' learning outcome

CAF LEVEL 1	CAF LEVEL 2	CAF LEVEL 3
<p>Learning Outcome: Demonstrate Appropriate Background Knowledge</p>	<p>Learning Outcome: Demonstrate Appropriate Background Knowledge</p>	<p>Learning Outcome: Demonstrate Appropriate Background Knowledge</p>
<p>Behaviour: a) answers basic questions from educator/tutor on core clinical knowledge and skills. b) with guidance justifies assessment with reference to core information presented in lectures and background reading</p>	<p>Behaviour: a) answers questions form educator/tutor on core clinical knowledge and skills. b) justifies assessment with reference to theoretical concepts and available evidence appropriate to his/her experience.</p>	<p>Behaviour: a) Comprehensively answers questions from educator/tutor on core clinical knowledge and skills b) Justifies assessment with reference to supported texts and the available evidence</p>

1st 280-400 (70-100%)	2:1 240-279 (60-69%)	2:2 200-239 (50-59%)	3rd 160-199 (40-49%)	Fail 0-199 (0-39%)
<p>Consistently, always, flexible, efficient, effective, shows excellent ability, clear evidence of .., uses experience to.., show independent initiates, comprehensive, exceptional, outstanding, etc</p>	<p>Very good, minimal prompting, minimal correction, minimal guidance, occasionally need direction/ assistance etc.</p>	<p>Good, sometimes needs assistance, sometimes needs prompting, most of the time..., good standard, most interventions... etc.</p>	<p>Satisfactory, adequate, limited use of .. , limited evidence of.., needs direction to.. , needs a lot of help to.., needs encouragement to.., reluctant to.. , difficulty in .. , repeated assistance to.., inconsistent, variable accuracy, limited, frequent guidance etc.</p>	<p>Unacceptable behaviours despite considerable guidance, fails to meet the performance criteria, lacks commitment to self development, significant areas of weakness. Poor ability, significant gaps in knowledge, weak, unreliable, insufficient, disorganised, inaccurate, inappropriate,</p>

Final Patient Assessment Exam

- Clinical exam in final year
- Performance based assessment tool
- One patient is selected – can be an unseen patient or a patient from the students caseload
- The student carried out an assessment or an assessment and treatment
- The student presents their finding back to two examiners and the case is discussed
- Examiners award a mark based on the assessment criteria set out using the standards set by the marking criteria

Quality Assurance

- CAF reliability and validity established
- Model of practice education – provides input from a second assessors
- Clinical education study days and individual education sessions
- On site education and training provided by the tutors using videos of students performances as part of training for educators
- Audit of marks and feedback provided as appropriate

Advice to assessors

- Attend workshops held by Practice Education Teams
- Take students regularly
- Discuss performance with other staff members; basic grades; seniors, MDT; patients
- Ensure sufficient time to observe the student, seeing a range of key skills with a range of clients
- NB observation in first week to determine safety and initial performance of student; this will take time
- Once you have identified student needs, you can focus your observation time on these aspects
- Make notes on every observation
- Check assessment form regularly, familiarise yourself with what is required

References

- Coote et al (2007), The development and evaluation of a Common Assessment Form for physiotherapy practice education in Ireland, *Physiotherapy Ireland* 28:6-10
- Van Der Vleuten and Sghuwirth (2005), Assessing professional competence: form methods to programmes, *Medical Education* 39: 309-317
- O'Connor et al (2016), Clinical Performance Assessment Tools in Physiotherapy Practice Education: A Systematic Review, *Physiotherapy*