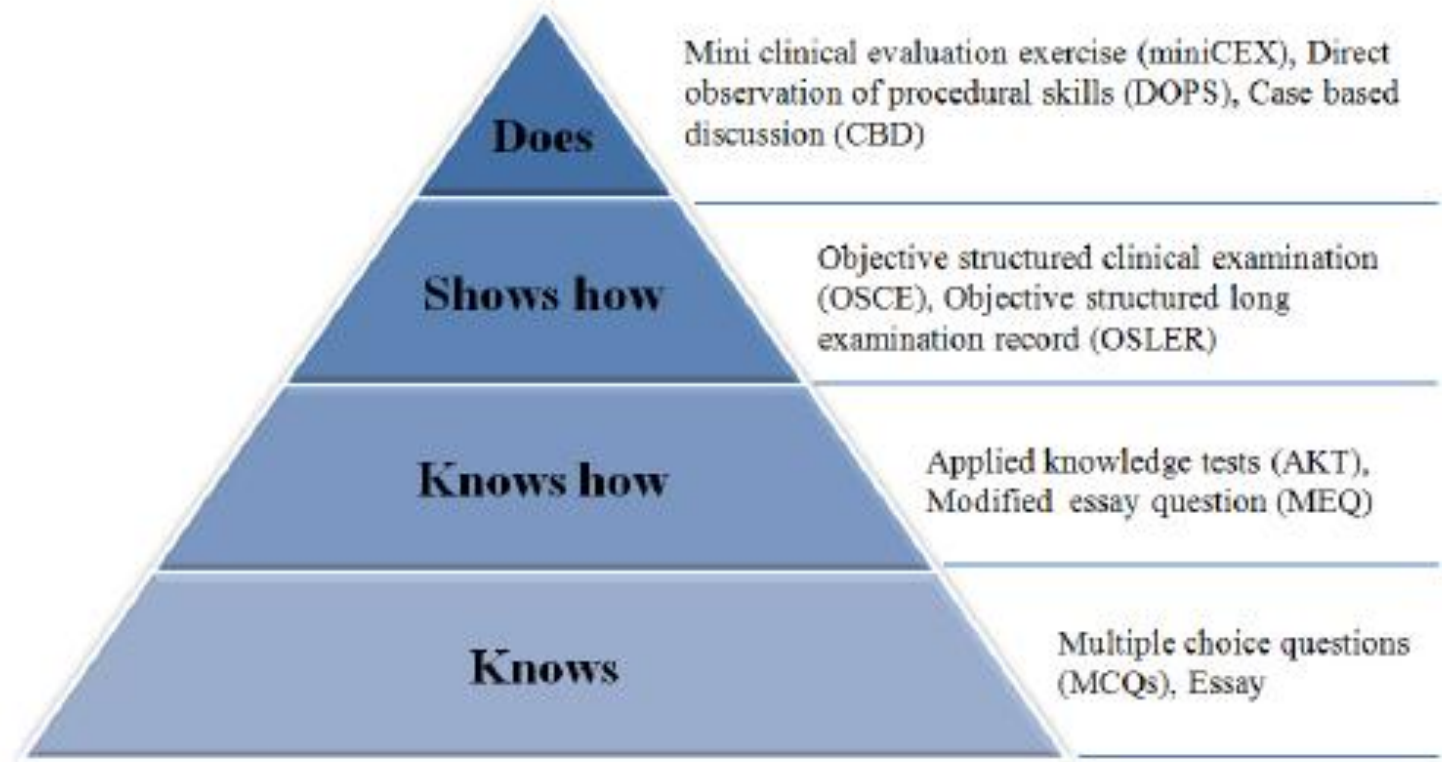


A person in a white lab coat is shown from the chest down, with their hands clasped in front of them. The background is a light-colored, possibly white, surface. In the bottom left corner, a stethoscope is visible on the surface. The overall image has a soft, slightly blurred quality.

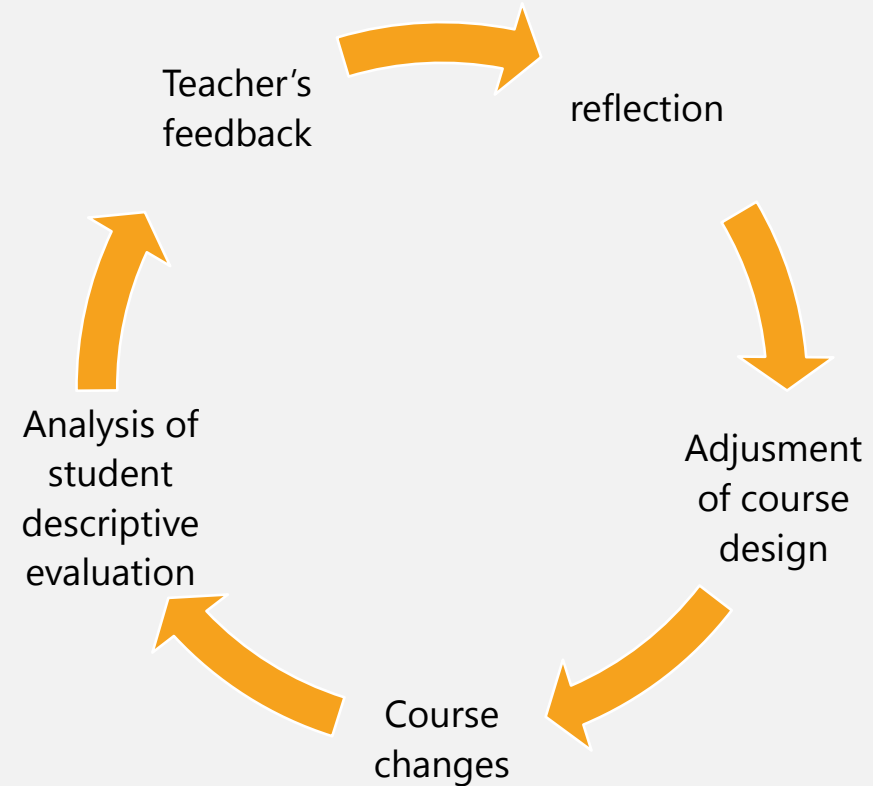
# WORK PLACE BASED ASSESSMENT: MINI CEX, CBD AND OSCE

Diah Handayani

MILLERS'  
PYRAMID OF  
CLINICAL  
COMPETENCY



# EVALUATION CYCLE TO IMPROVE TEACHING PROCESS



**CBD**



**WHAT S**



**GOAL**



**HOW**

# TOPIK BAHASAN

- Siapakah yang dievaluasi
- Kompetensi yang dinilai
- CBD Form
- CBD Blueprint
- Berapa kali
- Validitas? Realibilitas?
- Persiapan
- Durante

## Case Based Discussion

- Diskusi yang terstruktur mengenai manajemen klinis yang sesuai
- Umumnya penilai akan memilih beberapa rekam medis
- Diskusi berdasar kasus yang ditangani peserta bukan merupakan kasus bayangan/palsu
- Fokus menilai penalaran klinis, keputusan klinis dan diagnosis, manajemen masalah pasien sesuai dengan lingkup /jenjang residen,
- Fokus 1 atau beberapa atau seluruh aspek meliputi kelengkapan pengisian rekam medis, asesmen klinis, manajemen dan profesional

## TUJUAN CBD

- Untuk memberikan umpan balik sehingga meningkatkan kemampuan residen dalam hal keputusan klinis, keputusan klinis, dan profesionalisme
- Untuk mendorong pendekatan refleksi diri
- Untuk membantu residen menyusun bukti klinis dan menunjukkan perkembangan kompetensi
- Menjadi indikator perkembangan residen/penilaian kenaikan jenjang
- Untuk menentukan kompetensi untuk mandiri , atau menentukan jenjang kompetensi residen

## **KOMPETENSI YANG DINILAI DALAM CBD**

- Pengisian rekam medis
- Penilaian klinis
- Manajemen dan rencana tindak lanjut
- Professionalisme
- Kemampuan diagnosis dan dasar teori
- Keputusan klinis dan pilihan manajemen
- Komunikasi dan kerja sama antar sejawat dalam tim medis
- Evidens/rujukan yang digunakan termasuk intepretasi hasil suatu jurnal
- Kepemimpinan
- Melatih refleksi



# PROSES CBD?

- Residen memilih beberapa status dengan berbagai kompleksitas,
- Asesor memilih yang sesuai dengan jenjang pendidikan residen
- Residen yang harus banyak menjelaskan segala info tentang pasien dan proses penyampaian menjadi bagian yang dinilai asesor bisa Asesor bertanya sesuai dengan masalah pasien untuk menilai pengetahuan dasar patogenesis suatu kondisi atau diagnosis dan etiologi, serta kemampuan manajemen

# PROSES CBD?

- Asesor dan residen menentukan bersama keputusan klinis dan rencana manajemen pasien
- Asesor memberikan umpan balik fokus pada evaluasi perkembangan kompetensi residen, kemajuan, keunggulan, dan menggali hal yang harus dilakukan untuk meningkatkan kompetensi yang belum tercapai, dan membuat kesepakatan waktu untuk perbaikan kompetensi
- Minimal 30 menit
- Dilakukan beberapa kali dengan kasus dan penguji berbeda beda.

## **KELEBIHAN CBD**

- Diskusi yang terstruktur, mendalam mengenai keputusan klinis, → mengevaluasi keputusan profesi, dan penalaran klinis
- Dapat menilai proses pikir yang lebih rumit dan melakukan sintesis masalah
- Asesor dapat menggali lebih dalam pemahaman dan aplikasi klinis pengetahuan
- Dapat menilai aspek etika dan hukum
- Evaluasi pencatatan rekam medis

# **LOKASI/KEGIATAN CBD**

- Presentasi kasus dept/rs (termasuk laporan jaga)
- Di poli rawat jalan
- Pasien rawat inap, saat follow up bersama
- Patients igd saat jaga
- Kasus khusus yang harus dikuasi yang tidak ditemui residen

## SIAPA YANG MENGIKUTI CBD?



Residen

Semua level sesuai kompetensi yang akan dicapai



Penguji

Konsultan/staff  
Residen senior  
Supervisor



Semua asesor sudah diajarkan proses dan borang cbd yang digunakan

# CBD FORM

- Dapat mengevaluasi tujuan akhir
- Dapat menjadi latihan refleksi diri
- Resume kondisi pasien
- Kompleksitas kasus
- Area kompetensi
- 3-point rating scale
- *Tidak mengevaluasi hal di luar area atau yang tidak diobservasi langsung*
- Kolom umpan balikarea for written feedback
- 4-nilai untuk global summary
- Residen dan penilai dapat menambah refleksi
- Bisa terhubung dengan system evaluasi program studi

Please use black ink and CAPITAL LETTERS. Please complete the questions using a tick

Trainee		Assessor			
Name:		Name:			
GMC number:		GMC number:			
Specialty: <input type="checkbox"/> Cardio <input type="checkbox"/> Gen <input type="checkbox"/> Neuro <input type="checkbox"/> OMFS <input type="checkbox"/> Otol <input type="checkbox"/> Paed <input type="checkbox"/> Plast <input type="checkbox"/> T&O <input type="checkbox"/> Urol		Position: (must be trained Consultant, SASG, SpR)			
Hospital:		Institutional e-mail:			
Training post (e.g. CT1/ST1):		Training: No <input type="checkbox"/> Written <input type="checkbox"/> Web/CD <input type="checkbox"/> Workshop <input type="checkbox"/>			
Clinical setting (e.g. Outpatients):		CBD relates to reflective writing <input type="checkbox"/>			
Summary of the clinical problem:					
Focus of encounter:	Medical record keeping <input type="checkbox"/>	Clinical assessment <input type="checkbox"/>	Management <input type="checkbox"/>	Professionalism <input type="checkbox"/>	
Complexity of the case:	1. Appropriate for early years training				
	2. Appropriate for the completion of early years training or early specialty training				
	3. Appropriate for the central period of specialty training				
	4. Appropriate for Certificate of Completion of Training (CCT)				
<b>ASSESSMENT RATINGS</b>					
Your assessment ratings should be judged against the standard laid out in the syllabus for the trainee's stage of training					
How do you rate this trainee in their:	Outstanding	Satisfactory	Development required	Not assessed	
1. Medical record keeping					
2. Clinical assessment					
3. Diagnostic skills and underlying knowledge base					
4. Management and follow-up planning					
5. Clinical judgement and decision making					
6. Communication and team working skills					
7. Leadership skills					
8. Reflective practice/writing					
<b>FEEDBACK:</b> Verbal feedback is a mandatory component of this assessment. Please use this space to record areas of strength and suggestions of development which were highlighted during discussion with the trainee:					
<b>GLOBAL SUMMARY</b>					
After summarising the discussion with the trainee in the box above, please complete the overall level at which the Case-Based Discussion was performed on this occasion, if there was sufficient evidence to make a judgement:					
Level 0	Below that expected for early years training				
Level 1	Appropriate for early years training				
Level 2	Appropriate for completion of early years training or early specialty training				
Level 3	Appropriate for central period of specialty training				
Level 4	Appropriate for Certificate of Completion of Training (CCT)				
Time taken for observation (mins):			Time taken for feedback (mins):		
Date:	Trainee's signature:		Assessor's signature:		

# CBD BLUEPRINT

Assessment blueprints help to ensure that assessment methods are mapped to the domains of Good Medical Practice and the surgical curriculum.

A single method will cover some domains and the range of assessments should cover all domains

\*\* Directly assessed

\* Indirectly assessed

Good Medical Practice		Curriculum			
		Knowledge	Judgement	Technique	Professional
Knowledge Skills and Performance	a) Maintain your professional performance	*	**		*
	b) Apply knowledge and experience to practice	*	**		**
	c) Keep clear, accurate and legible records	*	**	*	**
Safety and Quality	a) Put into effect systems to protect patients and improve care	*	**		*
	b) Respond to risks to safety	*	**		*
	c) Protect patients and colleagues from any risk posed by your health	*	**		**
Communication Partnership & Teamwork	a) Communicate effectively	*	**	*	*
	b) Work constructively with colleagues and delegate effectively	*	**	*	**
	c) Establish and maintain partnerships with patients	*	**		**
Maintaining Trust	a) Show respect for patients	*	**		*
	b) Treat patients and colleagues fairly and without discrimination	*	**		*
	c) Act with honesty and integrity	*	**		*

# FREKUENSI CBDS?

- Dilakukan setiap tahap
- Tergantung waktu pendidikan tiap tahap or tiap modul, dan standar kompetensi yang ingin dicapai
- Minimal 1x tiap modul
- Perlu dipertimbangkan jumlah wbpa lain
- Disesuai kemampuan program studi , jumlah penguji dan jumlah kasus



# VALIDITAS DAN REALITAS

- Pelatihan assessor
- Cbd sejalan dengan sasaran pembelajaran tiap tahap
- Assessors terlatih dan berkualitas
- CBD merupakan asesmen “pembelajaran” bukan ujian akhir
- Umpan balik konstruktif sesuai kebutuhan residen
- Dilakukan sepanjang proses pendidikan
- Peningkatan kompleksitas kasus sejalan peningkatan jenjang dan perkembangan residen
- Dipadukan dengan berbagai asesmen lain
- Mendorong residen melakukan refleksi sesuai umpan balik

# PERSIAPAN

## Trainee:

- Mengatur waktu dengan asesor yang sesuai kasus
- Form cbd tersedia (printed or online)
- Membuat catatan kasus, resume dan menyiapkan catatan untuk follow up

## Assessor:

- Alokasi waktu khusus/sesuai jadwal
- Memahami kasus dan pola rekam medis yang sesuai

## Both:

- Ruang diskusi yang kondusif
- Fokus pada asesmen

# DURANTE CBD

## Residen

- Menjelaskan kasus dengan lengkap , masalah pasien dan rencana tatalaksana dengan lengkap
- Menjelaskan alasan diagnosis dan rencana manajemen berdasarkan teori yang diketahui atau pengalaman dengan kasus serupa, dan berbagai .
- Merefleksi hal yang diketahui dan akan dicapai dari kasus.

## Trainer:

- Gunakan pertanyaan terbuka

STRUCTURE  
OPEN QUESTION

## Defines the problem

- What are the issues raised in this case?
- What conflicts are you trying to resolve?
- Why did you find it difficult/challenging?

## STRUCTURE OPEN QUESTION

### Integrates information

- What relevant information had you available?
- Why was this relevant?
- How did the data/information/evidence you had available help you to make your Decision?
- How did you use the data/information/evidence available to you in this case?
- What other information could have been useful?

STRUCTURE  
OPEN QUESTION

## Prioritises options

- What were your options?  
Which did you choose?
- Why did you choose this one?
- What are the  
advantages/disadvantages of  
your decision?
- How do you balance them?

## STRUCTURE OPEN QUESTION

### Considers implications

- What are the implications of your decision?
- For whom? (E.G. Patient/relatives/doctor/practice/society)
- How might they feel about your choice?
- How does this influence your decision?

## STRUCTURE OPEN QUESTION

### Justifies decision

- How do you justify your decision?
- What evidence/information have you to support your choice?
- Can you give me an example?
- Are you aware of any model or framework that helps you to justify your decision?
- How does it help you? Can you apply it to this case?
- Some people might argue, how would you convince them of your point of view?
- Why did you do this?



STRUCTURE  
OPEN QUESTION

## Practices ethically

- What ethical framework did you refer to in this case? How did you apply it?
- How did it help you decide what to do?
- How did you establish the patient's point of view?
- What are their rights? How did this influence your handling of the case

STRUCTURE  
OPEN QUESTION

## Works in a team

- Which colleagues did you involve in this case? Why?
- How did you ensure you had effective communication with them?
- Who could you have involved? What might they have been able to offer?
- What is your role in this sort of situation?

STRUCTURE  
OPEN QUESTION

## Upholds duties of a doctor

- What are your responsibilities/duties? How do they apply to this case?
- How did you make sure you observed them? Why are they important

## AFTER THE CBD



### **Trainee:**

Buat rencana tindak lanjut  
refleksi diri termasuk umpan  
balik  
"self rating" ,



### **Trainer:**

Validasi atau review penilaian  
Follow up (PR dll)  
Diskusikan untuk perbaikan

# FURTHER READING

1. ISCP Guidance notes on using the CBD [https://www.iscp.ac.uk/static/public/cbd\\_guidance.pdf](https://www.iscp.ac.uk/static/public/cbd_guidance.pdf)
2. ISCP Guidance notes on using the Reflective CBD  
[https://www.iscp.ac.uk/static/public/reflective\\_cbd\\_guidance.pdf](https://www.iscp.ac.uk/static/public/reflective_cbd_guidance.pdf)
3. ISCP Tips for using CBD [https://www.iscp.ac.uk/static/public/cbd\\_tips.pdf](https://www.iscp.ac.uk/static/public/cbd_tips.pdf)
4. Academy of Medical Royal Colleges: *Improving Assessment*  
[http://www.aomrc.org.uk/doc\\_view/49-improving-assessment](http://www.aomrc.org.uk/doc_view/49-improving-assessment)
5. Critical analysis of case based discussion <https://www.bjmp.org/content/critical-analysis-case-based-discussions>

TERIMA KASIH