### CASE-BASED DISCUSSION ASSESSMENT FORM (CBD)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Assessor's GMC No.** |  | **Trainee's GMC No.** |  | **Year of training** |  | **Item No.** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | [ ]  1 | [ ]  2 | [ ]  3 | [ ]  4 |  |  |  |

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| --- |
| **Patient problem/Diagnosis** |
|  |  | Is the patient: [ ]  New? [ ]  Follow-up? |
|  |
| Case Complexity: | [ ]  Low | [ ]  Moderate | [ ]  High |
| Assessor: | [ ] Clinical Supervisor | [ ] Other consultant | [ ]  Peer | [ ]  Other |  |
| No. of previous CBDs observed (with any trainee) | [ ]  None | [ ]  1-5 | [ ]  6-10 | [ ]  >10 |
| Have you had training in use of this tool? | [ ]  Read guidelines | [ ]  Face to face training | [ ]  Web/CD ROM | [ ]  Course | [ ]  Other |

Please mark one of the circles for each component of the exercise on a scale of 1 (extremely poor) to 9 (extremely good). A score of 1-3 is unsatisfactory, 4-6 satisfactory and 7-9 is above that expected, for *a trainee at the same stage of training and level of experience*. You must justify each score of 1-3 with at least one explanation/example in the comments box, failure to do so will invalidate the assessment. Please feel free to add any other relevant opinions about this doctor's strengths and weaknesses.

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|  | **UNSATISFACTORY** |  | **SATISFACTORY** |  | **ABOVE EXPECTED** |  |
| **1. Clinical record keeping** |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **2. Occupational assessment** |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **3. Risk assessment & management** |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **4. Investigation and/or referral/clinical liaison** |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **5. Advice & recommendations** |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **6. Preventive opportunism** |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **7. Professionalism** |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **8. Ethics and/or legal** |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **9. Team working** |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **10. Clinical reasoning (& decision-making)** |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **11. Organisation/Efficiency** |  |  |  |  |  |  |  |  |  |  |  |  |
| [ ]  Not observed or applicable | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |
| **12. OVERALL OCCUPATIONAL MANAGEMENT** |  |  |  |  |  |  |  |  |  |
|  | [ ]  1 | [ ]  2 | [ ]  3 |  | [ ]  4 | [ ]  5 | [ ]  6 |  | [ ]  7 | [ ]  8 | [ ]  9 |  |

**Assessor's comments on trainee's performance on this occasion**

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*(Expand box to add more text if necessary)*

**Trainee's comments on their performance on this occasion**

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|  |

*(Expand box to add more text if necessary)*

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| **Trainee's signature** |  | **Assessor's signature** | **Date (DD/MM/YY)** |
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| Time for observation (mins)  |  |  |
| Time for feedback (mins) |  |  |