

AN ASSESSOR'S GUIDE TO THE SLE-DOPS ASSESSMENT

The Supervised Learning Event tools (previously known as Workplace based assessments) Direct Observation of Procedural Skills (DOPS) formalises the process in which trainees undertake a procedure under the observation of more experienced colleagues. It ensures that there is a systematic assessment of performance and structured feedback is given. SLE-DOPS tools can include procedures such as spirometry or audiometry, or communication activities such as presentations, among others.

Supervised Learning Events are “*Formative*” events intended to:

- Promote feedback and self-reflection
- Help trainees to identify opportunities in the clinical environment to promote longitudinal progression towards learning goals
- Encourage them to reflect and actively seek feedback
- Help them set action plans and agree learning goals when they have follow-up discussions with their educational supervisor

The assessment and the supporting forms have been revised so that they are more closely and easily linked to the Faculty training handbook and curriculum. This has been done by using the Faculty competency assessment framework to identify which competencies can be assessed by means of SLE-DOPS, and where appropriate, including these on the SLE-DOPS assessment form. There are a range of SLE-DOPS forms for different procedures and also a generic SLE-DOPS form that should be used for all other activities.

General notes:

- The process is ‘trainee led’ – i.e. the onus is on the trainee to organise each SLE-DOPS with an assessor, to ensure the paperwork is fully completed and to ensure the minimum target number of SLE-DOPSs are done in each year of training. It would be useful to encourage trainees to carry out these formative assessments throughout the training year in order to maximise their value.
- The educational supervisor should help the trainee select a range of relevant activities for SLE-DOPSs across the breadth of the training syllabus and suitable to their training needs.
- SLE-DOPSs can be undertaken to evaluate progression towards achieving competency in a particular activity or to evidence attainment of one or more of the Faculty curriculum competencies. For this reason, the SLE-DOPS assessment

framework and standards for the activity being assessed are linked to the Faculty core curriculum competency framework.

- At least **four** SLE-DOPS assessments should be performed annually but trainees are encouraged to undertake more.
- The assessor will usually be the educational or clinical supervisor, but another consultant, or a fellow trainee who is more experienced can assist with SLE-DOPS assessments. It is also reasonable for other colleagues such as health and safety advisers, senior occupational health nurses or occupational hygienists to act as assessors provided that they familiarise themselves with the assessor guidelines. Sampling a number of different assessors and a broad range of activities is advantageous, and all of these assessments should be included in the training portfolio. The assessor need not know the trainee beforehand but must have a level of expertise in the activity that is being observed.

The process for each SLE-DOPS

1. The trainee should identify, with the help of their supervisor, an activity or procedure suitable to their training needs for which their performance can be observed. This may be a procedure carried out as part of the routine work of the department, such as audiometry, spirometry, workplace visit, or a procedure or activity relevant to one or more of the Faculty curriculum competencies.
2. The trainee will then select the SLE-DOPS form appropriate to the activity. There are a range of forms specific to common procedures and activities, and a generic form that can be used in other instances. The trainee should discuss their reasons for selecting the activity with the assessor and the educational supervisor so that their objectives in undertaking the procedure and the SLE-DOPS form can be identified.
3. The assessor should observe the trainee and then rate their performance against a pre-defined criteria that has been included on the final page of the form and is called the rubric, as this acts as guidance for assessors. These criteria represent areas of competencies being assessed and a description of expected performance.
4. The assessor should rate the trainee against the performance that could reasonably be expected of them **at their stage of training and level of experience**. If the trainee is rated as below expected in any of the areas, it must be justified with at least one explanation/example in the comments box. If the trainee is rated as above expected, please also provide comment. Failure to do so will invalidate the assessment.
5. The form requires that the year of training is recorded (i.e. the year of training is marked as 1, 2, 3 or 4). The trainee will know their year of training, and should inform the assessor of this before the SLE-DOPS begins.
6. It may be helpful and relevant when giving feedback, to provide further detail on the form to emphasise if the trainee is at a specific point in their training year (e.g. if they are a new trainee at the start of year 1; or if the trainee is about to

complete training, and at the end of year 4). If this is relevant to the feedback and description of expected performance that is given, please add a comment in the assessor's feedback section to provide clarification.

7. The primary purpose of an SLE-DOPS is to provide *constructive feedback*, i.e. it is an "Assessment for Learning" for the trainee. The trainee should be given feedback immediately after the assessment, including discussing any areas where further development is needed. This discussion should identify how any development needs could be addressed and can be included in an action plan.
8. The SLE-DOPS should reinforce an educational culture where feedback for learning is the norm. If they are repeating an activity that has been assessed on an earlier occasion, the trainee should view the process as an opportunity to improve their performance.
9. Both the assessor and the trainee should sign the form at the end of the assessment. After completing the form, the trainee will keep a copy in their trainee's logbook. They are also required to make a copy to give to their Educational Supervisor. The assessor may wish to have a copy for their own records, for example, to help with self-reflection of teaching and feedback skills, and/or to keep as evidence of teaching activity in the CPD record.

The assessment forms

The first page of the form captures the trainee's personal information, the assessor's details (including GMC number if applicable) and details of the activity or procedure that is being assessed. If the assessment can be linked to one or more of the Faculty curriculum core competencies, this should be recorded in the box provided along with the expected learning outcome. The remainder of the first page comprises the rating scale for the areas of competencies in which you will assess the trainee (see below).

The second page of the form is intended to capture the feedback discussion that the assessor will have with the trainee. Space has been provided for comments from the assessor and the trainee's reflection on both their performance and the feedback that is given. If an educational need is identified it can be recorded on this page.

The final page of the form is the rubric (standard of performance) for the assessment. This has been developed as guidance for the assessor to describe the expected performance in each of the areas of competencies.

Descriptors of trainee performance: what is the assessor looking for?

As a guide, a description of expected performance has been given so that the assessor can rate the trainee's performance into one of three broad categories:

- Below expected
- Expected
- Above expected

The performance should be judged against what is expected and a rating awarded. The assessor should familiarise themselves with the assessment framework before an SLE-DOPS is undertaken.

Early encounters with an activity observed for an SLE-DOPS may return judgements of below expected. This requires clear justification and an action plan for learning and skill development. Likewise scores of above expected would also require justification.

Progressive improvement of the trainee is expected if they have continuing informed feedback during their training, and as they progress through the spiral curriculum. The SLE-DOPS should be recognised as part of a series of formative assessments which will build up a portfolio of essential educational events along a learning trajectory, not as an end in itself in the way that a traditional formal examination may be seen.

The competencies that are being assessed are:

- 1. Approach to the problem** *includes knowledge, information gathering and time management*
- 2. Conduct of the assessment** *includes clinical judgement, risk assessment, information management and health promotion*
- 3. Communication output** *includes method and effectiveness of communication delivery*
- 4. Recommendations to management** *includes appropriateness /quality of advice and recommendations*
- 5. Professionalism** *includes overall behaviour along with legal, ethical and clinical governance issues*

Within each of these areas, specific Faculty curriculum core competencies that relate to the procedure or activity can be included. The Faculty curriculum core competencies have been separated into knowledge, skills and attitudes so that they can be assessed. The *assessment framework* describes how each element is assessed and the trainee can use the SLE-DOPS forms to document their performance and progress through their training programme.

Those procedures that have a specific SLE-DOPS form (eg audiometry) have gold standards for performance which can be included as a reference. If the trainee prefers to be assessed on the areas of competency only, and does not wish to include the specific core competencies from the curriculum, this section of the form can be left blank.

If the trainee wishes to use the generic SLE-DOPS form, and wishes to include a curriculum core competency, it will need to be identified and added to the form.

The Faculty core competency should be inserted on the front page of the SLE-DOPS form and (if appropriate) the knowledge, skills and attitudes from the competency framework should be added to the rubric on the last page of the form. This means that the guidance in the rubric can be used to rate the trainee's performance with respect to the knowledge, skills and attitudes that have been selected. If the assessor is not the clinical or educational supervisor, advice can be sought from them to select suitable core competencies.

How does this feed back into learning and annual assessment?

The purpose of this tool is mainly educational – to enable feedback that supports and promotes development of high standards of clinical practice.

The SLE-DOPS undertaken in each training year will be collated by the educational supervisor who will summarise them on an annual report form. This will be evaluated by the ARCP panel (to chart progress, areas of strength, developmental needs, and plan educational objectives).