

Policy Name: 9.04.1 Direct Observation of Core Clinical Skills

Scope

The University of Texas at Tyler School of Medicine (UT Tyler SOM) is dedicated to upholding the highest standards of medical education, aligning with LCME Standard 9.4, which states the following:

A medical school ensures that, throughout its medical education program, there is a centralized system in place that employs a variety of measures (including direct observation) for the assessment of student achievement, including students' acquisition of the knowledge, core clinical skills (e.g., medical history-taking, physical examination), behaviors, and attitudes specified in medical education program objectives, and that ensures that all medical students achieve the same medical education program objectives.

This policy applies to all clinical faculty (attending physicians, resident physicians, and advanced practice providers) and Clinical Assessment Team members involved in the medical education of SOM students. This policy enforces a structured approach to the direct observation of medical students' core clinical skills, ensuring the assessment and development of competencies in history-taking, physical examination, professionalism, interpersonal and communication skills, and interprofessional collaboration.

Policy Objective

To define a consistent, centralized process for the direct observation and evaluation of medical students' essential clinical skills across all clerkships, utilizing a Clinical Experience and Skills Passport. This document will specifically mark skills requiring direct observation by clinical faculty, alongside facilitating the recording of the faculty member's name and observation date by the student.

Policy Components

- Centralized Reporting Mechanism: Adoption of a Clinical Experience and Skills Passport as the official record for logging direct observations. This passport will list specific skills requiring direct observation by clinical faculty, where students will document the observer's name and the date of observation.
- Clerkship-Specific Skills Observation: Mandatory direct observation requirements per clerkship are specified as follows, ensuring these students are directly observed by clinical faculty in crucial clinical skills pertinent to each specialty.

| Clerkship | Histories Required | Physical Exams Required | Physical Exam Type |
|-------------------|-----------------------|----------------------------|-------------------------|
| Family Medicine | 1 | 1 | Musculoskeletal/Back |
| Internal Medicine | 1 | 1 | Lung and Cardiovascular |



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| OB/Gyn | 1 | 1 | Pelvic and Breast |
|------------|---|---|-------------------------------|
| Neurology | 1 | 1 | Neurologic |
| Pediatrics | 1 | 1 | ENT |
| Psychiatry | 1 | 1 | Psychiatric and Mental Status |
| Surgery | 1 | 1 | Abdominal |

• Faculty and Clinical Assessment Team (CAT) Responsibilities:

- o Clinical faculty are tasked with directly observing students' performance of clinical skills and providing immediate verbal formative feedback.
- o Faculty members will assess clinical reasoning and communication skills during oral patient presentations on rounds.
- Faculty are also required to evaluate students' written documentation in patient charts as a measure of clinical reasoning and communication skills.
- CATs will be embedded to conduct direct observation of clinical encounters with patients and the healthcare team to assess professionalism, and interpersonal and communication skills.
- CATs will collect multisource feedback from healthcare team members, patients, caregivers, and peers regarding observed student behaviors relevant to professionalism, interprofessional collaboration, and communication. This feedback will form part of the ongoing formative assessment process, providing students with timely and actionable feedback.
- CATs will collect weekly summative assessments from clinical faculty, including feedback specific to the direct observation of the history and physical exam skills when performed.

• Documentation and Compliance

 Students are responsible for timely documentation of direct observations in the Clinical Experience and Skills Passport. Direct Observations must be complete by the final day of the clerkship.

Data Collection

- Summative data from clinical faculty assessments will be compiled weekly to provide a structured evaluation of students' clinical skills proficiency.
- Clerkship directors will provide structured feedback based on summative data during required mid and final course feedback sessions. As part of the session, the clerkship director will review authentic student notes, assess clinical reasoning through chart stimulated recall, and provide feedback on note quality.
- o Formative data from both clinical faculty and CATs will be collected continuously to guide and inform students' development.



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Distribution

- Medical students will review this policy during the Transition to Phase 2 orientation. The
 Department of Medical Education will require that links for the policy be included in
 the syllabus for each clerkship and elective. DME will also ensure the policy is posted on
 the SOM website.
- Clinical faculty will be provided with a copy of the policy during onboarding and annually thereafter. Clinical faculty must attest to reading and understanding the policy.
 The policy will be posted for faculty access on the SOM website.

Compliance and Monitoring

- The clerkship director is responsible for the oversight of this policy's adherence by clinical faculty, ensuring that direct observation and assessment practices are consistently applied.
- The Phase 2 Director will oversee the clerkship directors' and certified assessment specialist team's assessment and feedback quality.
- The Phase 2 Subcommittee will review and update this policy as necessary to remain current with medical education standards and to improve the educational strategies based on feedback and outcomes.

Curriculum Oversight Committee approved: 5/7/2024

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