



Year 4



Information for

Contact Emails

Undergraduate Assessment Administration Team <u>UGMedicAssessmentStudentQueries@cardiff.ac.uk</u>

Year 4 Director

C21 Director

C21 North Wales Programme Lead

C21N Year 4 Director

Director of Clinical Skills and Simulation

Clinical Assessment Lead

Dr Rachel Brooks

Prof Rhian Goodfellow

Dr Ffion Williams

Dr Hemant Maraj

Dr Paul Frost

Dr Sue Ensaff

BrooksRM1@cardiff.ac.uk

Goodfellow@cardiff.ac.uk

Ffion.williams@bangor.ac.uk

H.maraj@bangor.ac.uk

FrostP2@cardiff.ac.uk Ensaffs@cardiff.ac.uk

Contents

COVID-19 and clinical assessments	4
ISCE (Integrated Structured Clinical Examination)	4
ISCE format	
Provide a facility of	_
Preparing for ISCEs	
Reasonable Adjustments	t
Virtual ISCE	7
Formative mini ISCE	8
Giving feedback to your peers:	g
Summative ISCE	9
Timings	g
When and Where	10
Attendance, extenuating circumstances & incidents	10
Late arrivals at ISCEs	11
Patients	12
Real patients	12
Simulated (actor) patients	12
Examiners	13
Student conduct	14
Corralling/ Quarantining students	15
Domains of competence	16
Clinical examination/ clinical communication- process and content	
Technical performance- of clinical procedure: the following may be included:	
Diagnostics and clinical reasoning	19
Clinical care and patient safety	19
Professionalism	19
Standard setting	20
Feedback	21
Example formative ISCE peer marksheets	21
Remediation and Resit	23
Safety alerts	23
Example Year 4	
Communication station	25
Interprofessional communication skills	27

Clinical pharmacology, therapeutics & communication	29
Case Based Discussion	31
Acute assessment stations	34
Clinical examination stations	37
e-learning resources and Self-Directed Learning	39
Self-Directed learning area: Cardiff	39
Self-Directed learning area: Bangor	39
Further sources of information regarding clinical assessments	39

COVID-19 and clinical assessments

As you will be aware, 'standard' clinical assessments are reliant upon our ability to bring together significant numbers of patients, students, examiners, and professional service staff, in order to deliver these complex assessment events. We continue to monitor the clinical situation and follow public health guidance.

ISCE (Integrated Structured Clinical Examination)

The ISCE is an examination which assesses your clinical competence and professionalism - testing your communication, clinical examination, and practical clinical skills in an integrated fashion. The examination is aligned with learning outcomes up to and including phase 2 and is based upon the common clinical systems. In addition to being aligned to the MBBCh learning outcomes, the Year 4 ISCE is designed to be mapped to the GMC Medical Licensing Assessment content map (https://www.gmc-uk.org/-/media/documents/mla-content-map-_pdf-85707770.pdf) and Outcomes for Graduates 2018 (GMC: https://www.gmc-uk.org/-/media/documents/dc11326-outcomes-for-graduates-2018 pdf-75040796.pdf).

The Year 4 summative ISCE is undertaken to ensure that you have acquired the necessary clinical skills to progress to Phase 3 of the undergraduate C21 curriculum. The examination must be passed in order to progress to Phase 3.

Should you fail to meet the required standard during your summative assessment you will be offered remediation and will have the opportunity to re-sit the exam at the next exam period. The re-sit examination will be equivalent in format and difficulty to the original practical examination failed.

This booklet provides information about the Year 4, including detail regarding the domains of competence against which you will be assessed. This booklet should be read in conjunction with the Combined Assessment & Progression Guide 2022/23.

ISCE format

Students in Year 4 will undertake:

• one formative ISCE February 2023

one summative ISCE (ME4202) May 2023

You will also have access to the 'virtual ISCE' on Learning Central.

The Year 4 summative ISCE will comprise of **8 stations**.

The types of stations used are

- Communication skills
- Interprofessional communication skills
- Clinical pharmacology, therapeutics & communication
- Case based discussion
- Acute assessment x2
- Clinical examination x2

The ISCE encompasses the various areas and contexts of clinical practice (for example mental health, surgery etc.) and presentations and conditions that might affect patients. In addition, the ISCE will assess your clinical and professional capabilities- for example your ability to assess and manage risk, safeguard vulnerable patients etc., and assesses your ability to undertake practical skills and procedures as outlined in Outcomes for Graduates 2018 (GMC: https://www.gmc-uk.org/-/media/documents/dc11326-outcomes-for-graduates-2018 pdf-75040796.pdf). Finally, it assesses the various areas of your professional knowledge- for example biomedical sciences, clinical pharmacology and therapeutics, medical ethics and law and social and population healthfor example through considering illness prevention within the assessment of your patient care and management.

In order to pass the summative ISCE you need to pass a minimum of 6 out of the 8 stations in addition to achieving \geq 50% adjusted mark overall. Should you fail to meet the required standard during your summative assessment; you will be offered remediation and will have the opportunity to re-sit the exam at the next exam period. The re-sit examination will be equivalent in format and difficulty to the original practical examination failed.

Preparing for ISCEs

The Year 4 formative mini ISCE is designed to give you an idea of the types of station, timings etc. Simulated patients are experienced and specifically trained to give appropriate feedback and this model has been shown to be highly beneficial in previous years. It is just one opportunity for formative feedback on your clinical skills and you should be using every opportunity on clinical placement to obtain feedback from consultants and other clinicians, many of whom are examiners and from patients you meet.

Supervised learning encounters (SLEs) in Phase 2 and 3, are also a fantastic formative learning experience and a great opportunity for you to learn more about what is expected of you in the

clinical assessments, to test your existing knowledge and focus your future learning to achieve your best potential in future clinical assessments. The marking forms for the SLEs have been devised specifically with this in mind as they mirror the domains. Senior faculty from both Phase 2 and 3 continuously emphasize that students should be doing many more than the minimum detailed in the handbooks. The more SLEs you do, the more feedback you get.

Despite the COVID-19 pandemic there are still ample opportunities for you to practise history taking and clinical examination, utilising appropriate personal protective equipment (PPE).

You may also wish to refer to the relevant chapters in standard textbooks such as 'Macleod's Clinical Examination' and watch online videos such as those at geekymedics.com.

The key to gaining competence at clinical examination is practise. Take every opportunity to rehearse these skills by practising clinical examination on each other. Be mindful of dignity and avoid intimate examination. Treat these rehearsals as mini ISCE's, critique your colleagues using standard reference texts (Ensure that practising these skills falls within COVID regulations at the relevant time, for example you might practise these skills on your housemates as this will lessen any risk of COVID transmission). Familiarity with physical normality will help you identify pathological clinical signs.

Reasonable Adjustments

Students who have a range of disabilities including physical or sensory impairments, specific learning difficulties, long term medical conditions, mental health conditions and autistic spectrum conditions may benefit and be entitled to reasonable adjustments. If you believe you require additional measures, put into place or if you are unsure if you are eligible, it is your responsibility to raise this well in advance of any assessment.

If this is the case, get in touch with the **Student Disability Service (SDS)** to have your support needs and reasonable adjustments put in place as soon as they can.

It takes time for any recommendations to be sent to assessments and unless these are received 4 weeks ahead of exams the adjustments will not be put in place. So, contact SDS as soon as possible do not assume if adjustments were put in place in previous exams this will apply for any practical exams like ISCEs.

Contact details

https://intranet.cardiff.ac.uk/staff/people-and-teams/view/58180-disability-and-dyslexia-service

studentconnect@cardiff.ac.uk_+44 (0)29 2251 8888

Virtual ISCE

The assessment team in collaboration with the learning technology department, clinical skills, communication skills centre and academic staff are excited to offer you a virtual ISCE experience. This is an online resource developed to give you the opportunity to find out more about the kinds of task you will be expected to undertake during the summative ISCE whilst learning remotely.

There are 3 separate rotations:

- https://bit.ly/virtual-isces-y2
- https://bit.ly/virtual-isces-y4
- New Content: https://learningcentral.cf.ac.uk/bbcswebdav/pid-5537476-dt-content-rid-18235575 4/xid-18235575 4

Feel free to navigate your way around both links and all the stations. Each station is based on an actual ISCE, and you will be guided through the various activities that are expected in accordance with year level. This resource has the ability to save your responses for your own performance monitoring and learning needs.

If you wanted to experience taking part in a complete ISCE rotation as per ISCE exam we advise the following:

- 1. Click on the link and you will be taken to a virtual rotation highlighting the layout with all the pods.
- 2. On the left-hand side is a list of available stations. Each station has 2 views: "Out" & "In". The "Out" provides a view outside the pod and if you click on the icon, you will be provided with the station instructions. As a reminder, you are allocated 4minutes (summative ISCE) in the exam to read through the instructions before entering a station which lasts 15 minutes.
- 3. Once you have read the instructions you need to click the "In" version of the station to start the station. Once in the station follow the instructions and activities until you complete the station.
- 4. Note you can use the arrows at the bottom of each page to go backwards but not forward.
- 5. To access the next station, you will need to click on the list of stations in the left-hand column.

Note some of the stations contain videos where available and some resources.

Your feedback and queries are important to the assessment team as we value the benefit of providing meaningful learning opportunities and experiences.

Formative mini ISCE

In order to give you the opportunity to practise a range of ISCE stations in the run up to your Year 4 ISCE in May 2023, you will be given the opportunity to attend a formative mini ISCE, normally held during the Catchup Week in February 2023. The formative mini ISCE will give you the opportunity to learn more about the exam process and domain marking by completing modified domain mark sheets for your peers. Above all, the formative mini ISCE, and other formative clinical assessments that you undertake whilst on clinical placement, are a learning experience- a great opportunity for you to learn more about what is expected of you in the clinical assessments, to test your existing knowledge and focus your future learning to achieve your best potential in future clinical assessments.

During your formative ISCE you will be allocated a specific time and pairing prior to the exam and will be notified in advance when & where to report. You will rotate in pairs around six 15-minute ISCE stations with a 4-5 minute gap (pending Covid regulations at the time) between each station. You will each undertake 3 of the stations in full, under exam conditions, working individually and each of you will observe your peer undertaking the other half of the stations. After completing each of the stations, you will then be provided immediate verbal feedback from your examiner and written feedback via MyProgress.

Building upon your experiences of peer marking in the year 2 formative ISCEs, observing students are required to complete a formative feedback mark sheet for their colleague on MyProgress-this provides another dimension to the feedback that you will receive in the formative ISCE and also has the added advantage of giving you good insight into the expectations of examiners in the summative ISCE.

There is no 'global rating' on formative feedback mark sheets, and no numerical score, and the formative ISCE is not standard set-therefore you will not be told whether you have 'passed' or 'failed'. Instead, the feedback they will receive will be aimed at helping you to identify your strengths and weaknesses in your clinical and examination technique.

Students will log into their account using the app via the iPads provided. You will then select 'Assessments' on the left-hand menu and open the marksheet by clicking the 'respond now' box. Once this is done, you will hand the iPad to the examiner who will then enter the station number. Once the examiner has finished marking, they will select 'finish' and return the iPad to you. You should ensure the marksheet has been submitted before entering the next station. Your completed marksheets will be available to you on MyProgress under 'completed assessments' as soon as you 'synchronise' your account on the day of the formative ISCE. It is extremely important that student's re-sync their iPads at the end of each station to ensure the marksheets are uploaded into the 'completed assessments' folder. If the iPads are not synced, the marksheets will remain on the iPad and will not be available to you once you leave the exam venue.

Students MUST NOT remove any other paperwork from the sessions (scenarios, clinical resources, etc.) Examiner mark sheets will also be submitted via MyProgress, so you will receive your feedback as soon as the exam finishes.

Giving feedback to your peers:

DO

- say what they did well
- say what could be done better and how (be specific)
- say HOW to improve (e.g., practise with patients, clinical skills lab, books, e-learning resources, etc.)

DON'T

- Be so negative they feel they cannot improve
- Overstate the quality of the performance (or lack of it) the feedback should be candid

Summative ISCE

In the summative year 4 ISCE, you are required to undertake **eight 15-minute ISCE stations with a 3-4 minute gap (pending Covid regulations at the time) between each station**. Each station is standardized ensuring a fair examination during which each student sees the same group of cases and is asked to perform the same clinical tasks with the same set of questions as all the other students taking the examination on your particular day, so that everyone's examination experience is equivalent.

Instructions will be on display outside & inside each station but may be repeated/ clarified by the examiners as necessary.

Different stations will be used for each day of examinations, in order to ensure fairness to all of you as you will be sitting the stations across different days in varying sequence.

Timings

An alarm will sound at:

0 minutes

4 minutes

7 minutes

11 minutes

15 minutes

Further details regarding the station timings for the various different kinds of station are detailed in the **Example Year 4 ISCE stations** section.

These alarms will sound regardless of the format of the station you are sitting- your examiner will guide you if the timings vary for a particular station. The sub-timings are given to guide you through the various elements of the station in order to ensure you have sufficient time to answer as many elements of the station as possible.

If you finish early, you MUST stay in the room until the end of station alert sounds. You are permitted to provide additional information in relation to any data interpretation or clinical care and management, but you are not allowed to repeat any history taking, examination or technical

skill. If you haven't finished by the end of the time allowed for the station, you MUST move on to the next station in order that you get the appropriate preparation time for the next station.

During 2022/23, we will be keeping a close eye on the latest recommendations for the use of PPE in a clinical setting and this will be reflected in the time awarded between stations. You will be advised of this ahead of the ISCE and this time is used for you to move between stations, prepare according to Public Health Wales guidance and read the station briefing. The examiners use this time to complete mark sheets and write formative domain linked feedback for you, to support your further learning.

When and Where

The Year 4 summative ISCE will be conducted across two days. It will involve, a number of parallel equivalent circuits, in order to accommodate everyone. You will be invited to attend for one ISCE session, which will either be on one morning or one afternoon and you will complete all 8 stations of your ISCE in one 'go.' You will be notified approximately 2 weeks before the ISCE week your specific rotation timings, venues, and dates via Learning Central.

Please refer to the Assessment Calendar on Learning Central for specific dates of the exam. The examinations may occur across multiple sites simultaneously. You will be informed of your allocation to a specific venue, date, and time approximately 2 weeks before the examination. At each venue, a number of parallel circuits will run in order to accommodate everyone across the exam period.

Attendance, extenuating circumstances & incidents

Attendance is compulsory. You must display your University ID.

Should you be acutely unwell or are unable to attend for another reason and you wish to take the summative ISCE at the next opportunity: you must submit a declaration of extenuating circumstances no later than 24 hours from the commencement of the examination. You also need to notify the Year coordinator ASAP (who will inform the Academic Year Lead).

You can find further information regarding Extenuating Circumstances including deadlines and dates for submission, on Learning Central and the student intranet.

In the event you want to submit an incident/ concern/ extenuating circumstances form in relation to an event that took place on the day of the exam please email: ugmedicassessmentstudentqueries@cardiff.ac.uk.

You have 7 calendar days from the date of the exam to email. It is important that you adhere to this time frame in order for your request to be discussed and considered in time for any board decision to be made.

Anything received after 7 calendar days from the day of the sitting will not be considered.

Late arrivals at ISCEs

For Clinical examinations you will be provided with an arrival as well as a start time and venue location for the exam. It is important that you arrive on time for these exams. If you arrive after the exam has started, you will not be permitted into the exam venue. You will then be required to sit the exam at the next available opportunity which will normally be the resit period.

If you are going to be late to an examination, you must email UGMedicassessmentstudentqueries@cardiff.ac.uk and the Year Co-ordinator to let us know.

Patients

Real patients

Real patients are used in some stations. Please remember that many real patients will have physical signs that you are expected to identify and recognise, and other patients may not have abnormal physical signs.

Please also remember that patients of all ages tire easily or may need to go to the toilet etc., and therefore you should be aware that it may be necessary for the time between stations to be extended or for you to be placed on a rest station during your circuit, should a patient become unwell during the examination and require substitution.

Simulated (actor) patients

Actors enable us to assess clinical competencies that would be difficult to provide in a standardized manner to all of you with real patients. All are experienced role players, and some will be familiar faces from the communication skills workshops. The actors have detailed scripts for their roles and attend training sessions before the exams to go through these roles to ensure they are able to play them consistently and undergo Equality, Diversity, and Inclusivity training. There will inevitably be minor variations, and these are taken into account by examiners when marking.

Feedback from simulated patients themselves <u>do not currently contribute towards the</u> <u>summative mark</u> for your performance in ISCEs, but their feedback does contribute towards the formative feedback you will receive after the exam and gives you a useful insight into how you are perceived by patients in terms of your interaction with them.

Student Volunteers

It may not be possible to use real patients, in which case student volunteers or foundation doctors may be recruited to help with the examination stations.

All student volunteers and Year 4 students are asked to complete a friends & family declaration form ahead of the ISCE to accommodate any potential conflict of interest.

Student volunteers are informed to expect a physical examination and be willing to have a cardiovascular/respiratory/peripheral vascular /gastrointestinal/musculoskeletal or neurological examination. They are only informed 1hr before the session of the exact examination and reminded that strict confidentiality is expected.

As year 4 students, there are opportunities to volunteer to be a volunteer at Year 2 ISCEs. If this is an opportunity you would be interested to take up, look out for emails from the assessment team.

Examiners

Examiners are experienced teachers who are aware of the expected level of performance and knowledge of the students assessed. In addition, examiners are required to undertake regular Cardiff University School of Medicine undergraduate examiner training which includes Equality, Diversity, and Inclusivity training.

Examiner conduct is monitored by the University through a combination of peer review, psychometric performance monitoring and by **External Examiners**, present during clinical assessments. We aim to ensure that the process is fair, and that the standard expected from you are equivalent to students at the same level at other medical schools. Examiners receive a briefing leading up to the clinical assessment, and on each day attend station calibration discussions to ensure consistent application of marking schedule and student experience.

Each examiner marks objectively, stays within the station and marks the same station all the way through the circuit. External examiners may also be present during the examination, ensuring fair process. Examiners in training may also be present observing the stations.

If you have concerns about any aspect of behaviour within an ISCE that may have affected your performance, you are encouraged to raise that with the Academic Lead on the day of the ISCE. This could include but is not limited to perceptions of unfairness or bias.

General concerns that have not affected your performance can be discussed with Year Directors or Deputy Directors, a member of the Centre for Medical Education Equality, Diversity and Inclusion Team or another member of staff.

Student conduct

Student conduct- please also refer to the Student Intranet (Academic Regulations).

You are expected to conduct yourself in a professional manner throughout all examinations, both formative and summative. You should wear either clean scrubs, according to Public Health Wales and Centre for Medical Education guidance, or clean, smart clothes appropriate to a clinical environment- making sure that your name and your number are clearly displayed for the examiner and that you are bare below the elbow, hair is tied back etc.

Ensure that you are familiar with and adhere to the All Wales NHS Dress Codehttps://gov.wales/nhs-dress-code

You must adhere to principle 2 in addition to all principles.

You must follow all instructions given by the assessment team and invigilators. You are expected to bring your stethoscope and a watch (EXCLUDING smart watches e.g., Apple Watches, Samsung Gear etc). All other possessions should be placed for secure handling as per instructions at the exam venue. Should calculators be required for any station, they will be provided and therefore, you are not permitted to bring your own calculators to the exam.

Following arrival at the exam venue (including the briefing and holding rooms and all other waiting areas), you should not attempt to communicate with other student by any means, either directly or indirectly e.g., via mobile phones or other communication devices.

According to University Regulations, any communication with other students including via smartphone/computer/tablet (e-mail, sms, WhatsApp, Skype, etc.) whilst in the exam venue, or the briefing/post-exam holding areas, could be interpreted as cheating, and will be treated as a breach of exam security. Furthermore, you should not communicate with any other student by any means after they have taken the exam and whilst others are still waiting to take the exam as it will be treated as a breach of exam security.

DO NOT bring valuables into your exam as the University cannot be liable for any loss incurred. It is recommended that mobile phones and all other electronic devices be left at home, however if you do choose to bring them with you, they must be switched off when you arrive and placed according to invigilator instructions in secure storage until you are permitted to leave. Any attempt to send or receive information relating to the exam will be considered a breach of university regulations and treated accordingly.

Cardiff University's Academic Integrity Policy

It is important to be familiar with this policy as it outlines the core values of what Cardiff University expects from their students to abide by in their academic work. Within the definition of academic misconduct, we wanted to draw your attention to examination misconduct.

'Examination misconduct: any action in an examination venue which is against examination rules and/or which may lead to an unfair advantage over other students. This may include bringing unauthorised materials or items into an examination, copying the responses of another student, communicating with any person other than the examination invigilator in an examination by speaking, text, telephone, gestures or on any other platform, impersonating another student, or

allowing yourself to be impersonated.'

The unauthorised materials include any books of faith and advise that any such requests need to be applied for at least 4 weeks in advance of any assessment to Student Disability Service who will in turn inform the Assessment team. In the event a student does not follow process this will be viewed as a case of unfair practice.

Personal Protective Equipment (PPE)

PPE requirements during the ISCE may be changed according to advice issued by Welsh Government and Public Health Wales. At the time of this booklet being completed, we expect students to adopt the following approach:

- 1. Screen yourself for symptoms suggestive of COVID-19. These are an increase in temperature, a new cough and a loss of smell or taste. If you have these symptoms, you should self-isolate and get a test.
- 2. Perform hand hygiene by hand washing or using alcohol gel prior to each ISCE station.
- 3. Wear appropriate PPE (as determined by up-to-date clinical guidance) before performing any clinical examination.
- 4. You may be required to complete a registration questionnaire at the start of the ISCE.

We will inform you should this advice change.

The student briefing for each station will be displayed for you to read for the 4-5 minutes (Formative ISCE) or 3-4 minutes (Summative ISCE) in between each station. This will direct you as to what task you are expected to do at the beginning of the station, for example take a focused history or examine a particular system or part of the patient.

Unless specifically instructed otherwise in the student briefing on display before you enter the station, you should speak to the examiner as you enter the room. The examiner will check your ID and then give you instructions for the rest of the station. In general, if the examiner asks you questions then you should direct your response towards them. If the patient or simulated patient asks you a question, then direct your reply towards the patient. The examiner will direct you if necessary.

You are being assessed on your clinical and communication skills and taking notes during stations may detract from your communication directly with the patient therefore you are **not** permitted to use pens and paper to take notes during the ISCE stations unless it is a specific component of the station for example documenting a procedural skill result, of making notes in an interprofessional SBAR format communication station.

Corralling/ Quarantining students

You may be held on the day of the exam for a couple of hours after an exam has finished and others will be held for a period of time before their exam starts. This is necessary to ensure that students on different rotations/ timings on any one day do not communicate with one another, which could provide an unfair advantage to some students.

During this time, the use of electronic devices will not be permitted, and you will need to let the invigilator know if you wish to go to the toilet. You will, however, be able to talk to other students in the room. If you are being held after the exam or are reporting early for afternoon sessions, please bring food and drink with you and any books/paper revision notes you wish to use.

Domains of competence

Skills will be assessed within five equally weighted domains of competence (P1-P5) at the level of student at the end of Phase 2 of the course. You will be familiar with this format of assessment from your year 2 ISCE. The domains of competence reflect the outcomes of Outcomes for Graduates and each domain is linked to a specific skill. Domain based marking gives credit to students who demonstrate global competence and fluency. The specific components of each station and the domains across which you are assessed in each station vary slightly depending on the station and examples can be found in this booklet. Please note that the specific domain headings vary between the various speciality stations.

Examples include:

- P1: Clinical examination/ communication- process- How you do it
- P2: Clinical examination/ communication- content- What you find/technical performance (acute stations)
- P3: Diagnostics & clinical reasoning
- P4: Clinical care & patient safety
- P5: Professionalism

Clinical examination/ clinical communication- process and content

In some stations, you will be expected to take histories from and examine patients presenting with a range of medical problems.

Clinical communication: you may be expected to take a history of a patient's reasons for seeking medical help, either from a patient or their representative e.g., a relative, including their particular concerns and worries and the impact of the health problem on their life. You might also be expected to share information with patients, or their representative, e.g., a relative, for example a diagnosis and the rationale for their diagnosis, results, a procedure, or management plan and in these circumstances. You may also be required to gather information from or share information with a colleague. Unless instructed otherwise by the Examiner, you should use an Elicit-Provide-Elicit model as you will have already learnt during your communication skills workshops- i.e., prior to providing information, you should elicit what the patient or their relative knows already in order that you can tailor your explanation to the patient's needs. Please refer to the 'Calgary-Cambridge Guide: Communication Skills required for a Consultation' (Silverman, Kurtz, and Draper 2004). You will find a copy of this in the Year 4 Clinical Communication Skills workbook on Learning Central.

In some stations, you may also be assessed on your ability to communicate in more challenging situations, for example breaking bad news or managing an angry patient. These consultations could be with real patients or simulated patients (actors) and the setting could be in primary or

secondary care. We do not provide a specific list of presentations as we expect you to be able to perform – at the level of an end of Year 4– in a wide range of circumstances. You are expected to be aware of the issues surrounding safeguarding and have an understanding of the appropriate management of vulnerable patients.

Clinical examination: you are expected to perform and be competent at performing full physical examinations of the common systems and body regions. These may include, though not exclusively:

- Cardiovascular System
- Respiratory System
- Gastrointestinal system
- Abdomen (excluding examination of external genitalia)
- Joints and Musculoskeletal system GALS, knees, hips, hands and back.
- Central and Peripheral Nervous system (including upper limb, lower limb, eye and cranial nerve examinations, otoscopy and ophthalmoscopy)
- Cognitive function (for example using the for example using the Mini-ACE (Mini Addenbrooke's Cognitive Examination- instructions sheet will be provided) tool), Glasgow Coma Scale assessment, mental state examination
- Intimate examinations on manikins including rectal and vaginal examinations
- Other- including, but not exclusively, peripheral vascular system, thyroid, neck, breast & skin

You are given a short clinical vignette to direct you in the student briefing for each station. If you are directed towards examining the patient, then you would not normally be expected to ask the patient questions, beyond those relating specifically to the examination you are conducting, for example obtaining verbal consent to examine them and checking whether they are in any pain before palpating, etc. You are expected to introduce yourself to the patient, explain to the patient what you are doing and give clear, concise instructions as to what you need them to do, for example moving them into a certain position.

Treat the patient and communicate with them as you would in a clinical setting. The examiner will move you on as necessary according to their standardised instructions. You must use hand gel and cleanse your hands appropriately before and after examining each patient.

You should examine patients in the ISCE in the same way as you have been taught and practising during your clinical placements. You are expected to expose the patient, having obtained verbal consent from them, adequately for the relevant clinical examination. It is good practice to offer a chaperone. Further guidance may be found on the GMC website.

Whilst examining the patient you do not need to talk through your examination; however, examiners may ask for clarification as to what you are looking for in order to award marks appropriately e.g., Muscle wasting or fasciculation. You should act and examine patients the same way in which you have practised for the last 4 years. The examiner will give you specific instructions depending on the station as to what information you are required to share, and they will directly ask you questions that you should answer. Marks will be awarded appropriately for

the skills demonstrated, regardless of whether or not you choose to talk your way through the examination with the examiner.

Please remember that many real patients will have physical signs that you are expected to identify and recognise; however, other patients may not have abnormal physical signs. You are expected to recognise 'normality' as well as pathology. You should follow the instructions given to you by the Examiner, for example where diagnostic and clinical reasoning and clinical care questions relate to a follow up clinical encounter for the patient you have examined, they would include any additional relevant information at that point e.g., clinical details to enable you to answer questions appropriately.

You should be using every opportunity while on clinical placement to practise presenting your findings fluently, having spoken to and assessed patients. The purpose of the presentation is so that you can state the pertinent positive and negative elements of the history and examination which helped you make a diagnosis.

Technical performance- of clinical procedure: the following may be included:

- Provide Basic Life Support and the use of AEDs (Automated External Defibrillators)
- Hand Hygiene and Personal Protective Equipment
- Infection Control, Clinical Waste Management
- Vital Signs, Monitoring Blood Glucose and using NEWS charts
- BMI, height, and weight
- Measurement of child and plotting growth chart
- Wound Assessment, Aseptic Technique and Dressing a Simple Wound
- Urinalysis, MSU, Pregnancy Test
- Nasal swabs (MRSA screen)
- Wound swab
- Intramuscular and Subcutaneous Injections
- ECG Monitoring/Recording
- Respiratory Function, Inhalers, Peak Flow, Oxygen Delivery Devices
- Venepuncture and Blood Cultures
- Calculating a drug dose and writing a prescription for medication or fluids
- IV fluids and Manual Drip I/V Fluid set up
- Cannulation and IV drug administration
- Male and female catheterisation
- Suturing and local anaesthetics
- Arterial puncture
- Basic First Aid

You will be given precise instructions by the examiner which you should follow. In general terms, unless instructed otherwise, you are expected to interact with the simulated patient/ patient throughout the procedural skill elements of stations. This should include, unless instructed otherwise, giving a brief structured explanation of the procedure, obtaining verbal consent, and talking to the patient throughout, as you would be expected to do when performing a procedural skill on a real patient.

It is advisable that you do not move the models etc. and instead leave them where they are as they have been positioned in the correct place for the station. It is also important that you treat any models with respect and ensure that you treat them as you would a patient. Smaller/disposable items of equipment, for example an ANTT tray, may be moved to suit you and will be repositioned to a standard place in time for the next student in order to ensure a consistent experience for all students.

On Learning Central you will find- Clinical Skills Module-Learning Resources and select the individual procedural skill in the drop-down list. Within each skill folder are a range of resources, but for procedural skills revision, the Cardiff University e-tutorials can be followed. There are 'checklists' at the end of most of the e-tutorials but we would encourage revision of the whole tutorial AND plenty of SDL practice, rather than focus just on a checklist.

Diagnostics and clinical reasoning

You will be assessed on your clinical reasoning ability. This will include an assessment of your clinical summary of your findings (from speaking to and examining the patient as required by the varying stations), the accuracy and breadth of your differential diagnosis and the demonstration of a logical interpretation of clinical findings and results.

In addition to formulating a differential diagnosis and answering questions to demonstrate your rationale, you may be expected to interpret clinical data related to the case, for example though not exclusively X-rays, MRI or CT images and clinical photographs and images, NEWS charts, paediatric blood pressure centile charts, growth charts, ECGs, blood (normal ranges provided) and microbiology results, lung function tests (spirometry and peak flow charts).

When interpreting results you should use a methodical approach, for example, begin by confirming you have the correct patient details, the type of result, and date of results.

Clinical care and patient safety

You will be asked questions about the clinical management of various conditions and presentations that have been covered up to and during Phase 2. You are expected to demonstrate the ability to manage patients safely and appropriately, at the expected level of a year 4 student. You will be expected to give the rationale for the plan you give.

Professionalism

You will also be examined on your professionalism - your manner with the patients and your conduct throughout the examination. You are required to demonstrate respect for the patients, communicate clearly, consider patient safety, comfort, and dignity. You are also required to demonstrate safe hand hygiene (cleanse your hands appropriately before and after examining each patient) and maintain appropriate personal appearance and behaviour for a clinical environment.

Standard setting

The examination is standard set by the borderline regression method. In order to pass the Year 4 ISCE, you must pass at least 6 out of 8 stations in addition to achieving ≥50% standard set adjusted mark overall for the examination. Candidates must demonstrate an acceptable level of performance across a range of stations. This is a standard method for examinations of clinical performance.

Cardiff University Registry does not accept a pass mark that differs from examination to examination and imposes the restriction that a mark of 50 or above will be considered a pass, and any mark below 50 considered a failure. This means that if the Standard Set pass mark for an examination is not equal to 50 then an adjustment must be performed to the marks awarded to students so that the pass/fail status of students is preserved when the adjusted marks are passed to Registry.

The adjustment mechanism uses a simple and transparent linear transformation in the form of simple ratio which stretches or shrinks the students mark when we apply the registry required mark of 50%. Therefore, after implementing the registry required 50% mark and the standard set pass mark, the distance in scores varies at the lower and the upper end. The scores closer to pass mark or lower than pass mark have a smaller distance from the raw % score whereas the scores with higher upward spread from the pass mark have a larger adjustment. This transformation method ensures that students are not disadvantaged based on their raw scores or SS adjusted scores. Because the raw %score is different for each station and each station has a separate standard set pass mark, the amount of change in SS adjusted score would vary depending on student's raw %score after taking account of the standard set pass mark on each station and the registry required mark. For example, where the station raw % scores is 90% but the station also has higher pass mark (67%), the difference in raw % and SS adjusted score would be large around 22%. In case of the student whose scores changed by 5%, this student would have obtained a raw percent score somewhere between 55-60%, whereas students who got 85-90% raw %scores would have about 8% change in scores. This change is much smaller at the lower end, students who failed and had raw percent score around 43-49% would have a smaller score change of about 3-4%. In case where a student has obtained (65%) raw scores at a given station and obtained a global mark of 3(Pass) and the pass mark for that station is set at 64%, the student would pass that station with around 51% standard set adjusted score and would be just above borderline performance. A borderline performance would mean minimal competence, in the context of ISCE, a borderline student is the one who meets the standard by the smallest possible margin, but this is classified as 'pass'. Anyone scoring below the borderline performance would fail.

Students re-sitting the ISCE will again require to pass a minimum of 6 out of 8 stations and achieve ≥50% standard set adjusted mark to pass, however, their mark will be capped at 50% for a re-sit (second) attempt unless they have extenuating circumstances which have been accepted.

Feedback

Please refer to the combined Assessment & Progression Guide for further information regarding your feedback and how to use it.

Example formative ISCE peer marksheets

You will find several example peer-marked marksheets along with example stations later in this booklet, plus an example of the formative feedback you will find on the rear of paper marked ISCEs, shown on the next page of this booklet.

Please note, feedback from electronically marked ISCEs will have a different appearance but will include similar content. These example marksheets are representative, and actual marksheets will vary, depending on the station content for each particular exam.

Examiner marksheets have a similar format but also include details of expected tasks for each domain in order to ensure consistency of marking. Examiner marksheets also include an additional standard setting box which is not provided during formative ISCEs.

Example formative feedback				
What was done well? Please outline what you feel the student could d	o to improve even furth	ner		
What could be done better/ tip: Please outline what the student needs to do to it		competencies		
Safety Alert ('Yellow Card') Deta	ailed description	n of action or bel	naviour:	
SP stations only: Formative fee	dback from sim	ulated patient:		
(Please note this feedback is purely formative an (SPs: Fill in one bubble per row for the most app	ropriate description of h	now you felt the student o		Key areas to practice:
you as a patient & the single area you feel they v	Improvement	Proficient	Excellent	
Providing structure:	required			
Relationship:				
<u>relationship.</u>				
Non-verbal communication:				
Exploring patient's perspective:				
Verbal communication:				
Overall satisfaction with doctor patient relationship:				

Remediation and Resit

Students failing to meet the required standard during their summative assessment will be expected to attend remediation and have the opportunity to re-sit the exam at the next exam period. The re-sit examination is equivalent in format and difficulty to the original practical examination failed. Remediation will be coordinated by the curriculum team, and you are expected to engage fully with all remediation teaching.

If you fail the ISCE, it is particularly helpful if you share and discuss the feedback information given with your Personal Tutor/ Educational Supervisor/ Year Director. You are encouraged to bring your feedback to any additional teaching you may be offered, in order that the tutor can discuss specific areas in which to focus support.

Safety alerts

The GMC requires the Medical School to assess clinical knowledge, skills, professional attitudes, and behaviour. If a student demonstrates poor attitude and behaviour or displays a dangerously low standard of skills or knowledge, then an examiner can complete a 'Safety Alert' to draw this to your attention so that you can receive feedback and targeted remediation if required. As such, safety alerts enable examiners to highlight students whose skills or behaviour have not reached the standard expected and to provide essential formative feedback and enable appropriate extra help to be provided as needed.

Should you receive a 'Safety Alert' during a summative ISCE, detailed feedback will be provided and you are actively encouraged to seek further learning to address any knowledge, communication or skills gap identified. You are expected to discuss any Safety Alerts, in addition to all feedback from the ISCE, with your personal tutors and Educational Supervisors on placement, thereby ensuring you are learning from the assessment and using your feedback as Feed FORWARD. We would also actively promote you discussing safety alerts with your educational supervisors on starting year 5 to enable targeted support/opportunities during the placement.

Safety alerts might include potentially life—threatening errors, inappropriate or dangerous levels of knowledge, poor or unsafe clinical skill technique, inappropriate behaviour with a patient or simulated patient or the examiner. Common examples include (please note this list is not exhaustive):

- Rudeness/ roughness or patient disregard
- Inappropriate attire or hygiene- for example failing to wash hands before examining patient
- Poor or dangerous examination technique
- Inadequate communication skills
- Poor basic mathematics, for example when calculating or administering drug doses

- Failure to identify drug allergies- remember to ask the patient, check for medical alert necklace / bracelet, etc., and then once drug allergies are elicited remember to consider the information in the context of appropriately prescribing safe alternatives for your patients
- Poor clinical skills- for example poor CPR technique, inappropriate disposal of sharps or poor aseptic technique
- Failure to understand & apply mental capacity act

Example Year 4

This section starts on the next page.

Communication station

Gathering information from and sharing information with patients and their families and carers are core skills for all doctors. In addition, doctors are required to manage uncertainty and deliver safe, person-centred care. At times, you will be required to communicate effectively in more challenging circumstances- for example breaking bad news, and supporting patients who may be distressed or agitated

In these stations you will be given **7** minutes, during which you are expected to communicate with a patient or their relative/ carer. This might also involve obtaining a history from a patient, obtain a collateral history from a relative or share information with the patient or their relative / carer. You may also be required to interpret related clinical resources and discuss these with the patient / relative or carer.

In other cases, you may be asked to rationalise and explain a diagnosis +/- procedure or management plan to a patient, their relative or representative. This may also involve interpretation of and explanation/discussion of related clinical resources.

You will be assessed in terms of your clinical communication skills (process and content) as well as your clinical reasoning and clinical care when talking to the patient, by answering questions from the simulated patient. The main reason that the patient is presenting will be described on the door of the room for you to read before you enter the room.

After 7 minutes the examiner will stop you and ask you to:

- Summarise and present the patient's case
- You may be asked to share an appropriate differential diagnosis and state and justify your rationale for your most likely diagnosis
- Answer questions relating to standardised clinical resources
- Answer standardised questions relating to clinical care and patient management

EXAMPLE STATION: COMMUNICATION SKILLS

Student Briefing	You are a 4th year medical student on clinical placement in a District General Hospital.
Setting:	Gynaecology assessment unit
Patient's Details:	Josie Davies was Referred by her GP complaining of reduced foetal movements. She is 35 weeks pregnant.
Your Task:	You have been asked to take a history from the patient. At 7 minutes the examiner will ask you present your findings. You will then be asked to interpret clinical data and answer questions relating to your clinical reasoning and clinical care for the patient



Cardiff University Year 4 ISCE 2022/23

Example formative peer mark sheet: Communication skills					
Name of student					
Name of assessor					
		Fail	Borderline	Pass	Excellent
P1	Communication skills- process Did the student obtains/ share relevant information through appropriate history and physical/mental health examination, and assess and manage risk?				
P2	Communication skills- content Did the student gather/ provide accurate and comprehensive information?				
P3	Diagnostics and clinical reasoning Did the student demonstrate logical interpretation of clinical and preliminary investigation findings? Did the student formulate an appropriate prioritised list of problems and differential diagnoses, demonstrating logical justification/ prioritisation and ranking, and an ability to reason their diagnosis?				
P4	Clinical care & patient safety Did the student answer the clinical care & patient safety questions appropriately? Did the student deal appropriately with complexity and uncertainty including managing multimorbidity and prioritising tasks? Did the student demonstrate an understanding of relevant investigations and how the results might determine further care? Did the student interpret results and ensures they are acted on appropriately in the context of the clinical situation, avoiding over-investigation? Did the student assess and generate a safe and appropriate management plan for chronic conditions/ emergency/ acute presentations, and promote health and prevent disease as appropriate? Did the student demonstrating an ability to consider risks and benefits of alternative management options whilst utilising evidence-based guidelines appropriately and demonstrating person-centred consultation and management skills?				
P5	Professionalism Did the student demonstrate respect for the patient, communicate clearly, consider patient safety, comfort, and dignity? Did the student demonstrate safe hand hygiene, personal appearance, and behaviour? Did the student behave in accordance with legal and ethical responsibilities (including equality and diversity principles) demonstrating understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients, where applicable?				
-	rt ('Yellow Card') ease complete the 'Safety Alert' box on the reverse)			Yes	No

Interprofessional communication skills

Newly qualified doctors must learn and work effectively within a multi-professional and multi-disciplinary team and across multiple care settings. To achieve this, you are required to demonstrate effective interdisciplinary team working and appropriate communication skills to ensure safe, high quality care provision. This will include effectively communicating and working with colleagues in various situations, for example handover or referral of a patient, and when things go wrong, for example when errors arise. You will be required to demonstrate that you can respond appropriate to request from colleagues, whilst applying flexibility and adaptability to problem solving and shared decision making.

In these stations you will be given 4 minutes to take a brief history from a patient. The examiner will then stop you and share with you a summary of their clinical findings- you may also be asked to interpret related clinical resources.

At approximately 7 minutes, the examiner will ask you your differential diagnosis and rationale. You will then be asked to speak to a clinical colleague on the telephone to refer or handover the patient for example using SBAR to structure your handover. You are permitted to make brief notes to prompt you on a sheet that the examiner will give you.

After 11 minutes the examiner will stop you and ask you standardised questions relating to clinical reasoning, clinical care, and patient management.

You will be assessed in terms of your clinical communication skills (process and content) as well as your clinical reasoning and clinical care when talking to the patient and colleague, as well as your clinical reasoning, clinical care, and professionalism. The main reason that the patient is presenting will be described on the door of the room for you to read before you enter the room.

EXAMPLE STATION: INTERPROFESSIONAL COMMUNICATION

Student Briefing	You are a 4 th year medical student on clinical placement in a District General Hospital.
Setting:	Emergency unit
Patient's Details:	This patient is presenting following an episode of self-harm
Your Task:	Please take a brief history from the patient. You will then be given the patient's clinical findings and asked to
	handover the patient to a colleague on the phone.
	At 11 minutes the examiner will ask you to look at clinical data and answer some questions.



Cardiff University Year 4/ Year 5 supplementary ISCE 2022/23

Example formative peer mark sheet: Interprofessional Communication Name of student Name of assessor Fail Borderline Pass **Excellent Communication skills- process** Information gathering: Did the student demonstrate a fluent and skilled approach to obtaining a focused history from the patient? Communication with colleague: Did the student demonstrate a fluent and P1 skilled approach? Did the student communicate effectively with health care professionals, patients, relatives, carers, and other advocates? Did the student demonstrate the ability to work effectively, respectfully, and supportively as a member of the team? Р2 **Communication skills- content** Information gathering: Did the student obtain an accurate and comprehensive focused history from the patient? Handover: Did the student include appropriate content-, including appropriate introduction, patient details, summary of clinical findings, synthesis of situation and recommendation? Р3 Diagnostics and clinical reasoning Did the student demonstrate logical interpretation of clinical and preliminary investigation findings? Did the student formulate an appropriate prioritised list of problems and differential diagnoses, demonstrating logical justification/ prioritisation and ranking, and an ability to reason their diagnosis? Ρ4 Clinical care & patient safety Did the student answer the clinical care & patient safety questions appropriately? Did the student deal appropriately with complexity and uncertainty including managing multimorbidity and prioritising tasks? Did the student demonstrate an understanding of relevant investigations and how the results might determine further care? Did the student interpret results and ensures they are acted on appropriately in the context of the clinical situation, avoiding over-investigation? Did the student assess and generate a safe and appropriate management plan for chronic conditions/ emergency/ acute presentations, and promote health and prevent disease as appropriate? Did the student demonstrating an ability to consider risks and benefits of alternative management options whilst utilising evidencebased guidelines appropriately and demonstrating person-centred consultation and management skills? Р5 **Professionalism** Did the student demonstrate respect for the patient, communicate clearly, consider patient safety, comfort, and dignity? Did the student demonstrate safe hand hygiene, personal appearance, and behaviour? Did the student behave in accordance with legal and ethical responsibilities (including equality and diversity principles) demonstrating understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients, where applicable? Safety Alert ('Yellow Card') (If YES, please complete the 'Safety Alert' box on the reverse) No Yes

Clinical pharmacology, therapeutics & communication

As a newly qualified doctor, you will be required to prescribe medications and fluids, undertake medication reviews, communicate regarding and monitor the effects of medicines safely and effectively.

In this station you are required to communicate with a patient, relative or carer, focusing upon clinical pharmacology and therapeutics.

You will have **7** minutes to talk to the patient or relative/ carer regarding a specific task relating to therapeutics, for example undertaking a review of their medication, explaining, and answering the patient's questions regarding a new medication or taking a history about a possible adverse reaction.

You will then be asked to summarise the case and answer standardised questions from the Examiner relating to standardised clinical resources, and your clinical reasoning (until the warning bell at 11 minutes). You will then answer questions relating to clinical care and patient management.

You will be assessed in terms of your clinical communication skills (process and content) as well as your clinical reasoning and clinical care when talking to the patient or their relative/ carer, as well as your clinical reasoning, clinical care, and professionalism. The main reason that the patient is presenting will be described on the door of the room for you to read before you enter the room.

EXAMPLE STATION: CLINICAL PHARMACOLOGY, THERAPEUTICS & COMMUNICATION

Student Briefing	You are a 4 th year medical student on clinical placement in a District General Hospital.
Setting:	General medical ward
Patient's Details:	This 75-year-old patient was admitted yesterday with delirium, secondary to prescribed benzodiazepines.
Your Task:	Please talk to the patient about their medication At 7 minutes the examiner will ask you to summarise your findings. You will then be asked to interpret clinical data and answer questions relating to your clinical reasoning and clinical care for the patient



Cardiff University Year 4/ Year 5 supplementary ISCE 2022/23

Example formative peer mark sheet: Clinical pharmacology, therapeutics & communication Name of student Name of assessor Fail Borderline Pass **Excellent** Communication skills- process Did the student demonstrate effective communication with the patient? P1 P2 **Communication skills-content** Did the student gather/ provide accurate and comprehensive information from/ to the patient? Prescribes, reviews, communicates, and monitors the effects of medicines safely and effectively? Uses and records information safely and effectively? Р3 Diagnostics and clinical reasoning Did the student demonstrate logical interpretation of clinical and preliminary investigation findings? Did the student formulate an appropriate prioritised list of problems and differential diagnoses, demonstrating logical justification/ prioritisation and ranking, and an ability to reason their diagnosis? Ρ4 Clinical care & patient safety Did the student answer the clinical care & patient safety questions appropriately? Did the student deal appropriately with complexity and uncertainty including managing multimorbidity and prioritising tasks? Did the student demonstrate an understanding of relevant investigations and how the results might determine further care? Did the student interpret results and ensures they are acted on appropriately in the context of the clinical situation, avoiding over-investigation? Did the student assess and generate a safe and appropriate management plan for chronic conditions/ emergency/ acute presentations, and promote health and prevent disease as appropriate? Did the student demonstrating an ability to consider risks and benefits of alternative management options whilst utilising evidence-based guidelines appropriately and demonstrating person-centred consultation and management skills? **P**5 Professionalism Did the student demonstrate respect for the patient, communicate clearly, consider patient safety, comfort, and dignity? Did the student demonstrate safe hand hygiene, personal appearance, and Did the student behave in accordance with legal and ethical responsibilities (including equality and diversity principles) demonstrating understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients, where applicable? Safety Alert ('Yellow Card') (If YES, please complete the 'Safety Alert' box on the reverse) Yes No

Case Based Discussion

In the 'Case Based Discussion' (CBD) station you will be required to submit a case for both the formative and summative ISCEs. Each submitted case should be on anything you have encountered in clinical placement and been involved with their care.

All submissions need to be uploaded onto Turnitin 2 weeks ahead of the ISCE and you will be notified in advance of the deadline and a link for submission.

Your submission needs to follow the following criteria:

- Maximum of one side of A4 using Calibri font size 12
- Clear structure with headings for the history
- Widely used and accepted abbreviations can be used e.g., TIA
- Contain your name and student number in the top right-hand corner
- Only PDF documents will be accepted
- New case for each ISCE sitting (formative, summative, re-sit)
- The personal details of the patient need to be anonymised, so you are unable to identify the patient based on the submission
- The case must be one that you haven't used or presented before from any previous assessments (i.e., Patient Pathway/Oncology/Formative/Summative ISCE etc.).
- It can be a case that you have come across if your clinical placement and discussed with your tutor, however it cannot be anything submitted as part of an assessment.

At the ISCE you will be provided with a paper copy of your submitted case by the examiner to help as an aid memoire.

In the ISCE CBD station you will be assessed on your ability to succinctly present the case. You will also be assessed on your ability to consider risks and benefits of alternative management options whilst utilising evidence-based guidelines appropriately and demonstrating personcentred consultation and management skills. Finally, you will be assessed on your ability to demonstrate appropriate equality and diversity principles- for example understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients.

You will first be asked to present a patient you have met and **for whom you have been involved in their care**. You will be asked to discuss their case with the examiner, before being asked questions about the patient's diagnosis and management and your holistic assessment of their case. Finally, you will be asked questions about ethical and social science aspects to their case.

When selecting a suitable case for the CBD ISCE station, please consider the above marking criteria and ensure patient confidentiality is maintained throughout.

Examples of suitable cases to present might be a patient presenting with multiple comorbidities, for whom lifestyle issues might contribute. Alternatively, a vulnerable patient for whom there were safeguarding concerns or issues relating to their capacity or ability to consent to treatment or a procedure, etc.

EXAMPLE STATION: CASE BASED DISCUSSION

Student Briefing You are required to present a patient you have met on clinical placement.

At 7 minutes, the examiner will ask you questions relating to your assimilation of the case, your clinical reasoning, management planning and holistic assessment of the case.

Finally, the examiner will ask you questions relating to ethical and social aspects to the patient's case.



Cardiff University Year 4 ISCE 2022/23

Example formative peer mark sheet: Case based discussion Name of student Name of assessor Fail Borderline Pass **Excellent** Communication skills- process Did the student present a fluent, skilled, and holistic approach to their Ρ1 presentation the patient in a professional manner? P2 Communication skills-content Did the student provide accurate and comprehensive information relating to the patient's case, including all key elements, and significant positive and negative findings? Did the student address ethical and social science aspects of the patient's case and an appropriate understanding of the impact of these factors upon the patient? Р3 Diagnostics and clinical reasoning Did the student demonstrate logical interpretation of clinical and preliminary investigation findings? Did the student formulate an appropriate prioritised list of problems and differential diagnoses, demonstrating logical justification/ prioritisation and ranking, and an ability to reason their diagnosis? Ρ4 Clinical care & patient safety Did the student answer the clinical care & patient safety questions appropriately? Did the student deal appropriately with complexity and uncertainty including managing multimorbidity and prioritising tasks? Did the student demonstrate an understanding of relevant investigations and how the results might determine further care? Did the student interpret results and ensures they are acted on appropriately in the context of the clinical situation, avoiding over-investigation? Did the student assess and generate a safe and appropriate management plan for chronic conditions/ emergency/ acute presentations, and promote health and prevent disease as appropriate? Did the student demonstrating an ability to consider risks and benefits of alternative management options whilst utilising evidence-based guidelines appropriately and demonstrating person-centred consultation and management skills? P5 **Professionalism** Did the student demonstrate respect for the patient, communicate clearly, consider patient safety, comfort, and dignity? Did the student demonstrate safe hand hygiene, personal appearance, and behaviour? Did the student behave in accordance with legal and ethical responsibilities (including equality and diversity principles) demonstrating understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients, where applicable? Safety Alert ('Yellow Card') (If YES, please complete the 'Safety Alert' box on the reverse) No Yes

Acute assessment stations

The acute stations test how you will assess and manage everyday acute admissions to any clinical speciality you have encountered during Phase 1 or 2 of the course, for example acute medicine, child health etc. The main symptom that the patient is presenting with will be described on the door of the room for you to read before you enter the room. You should assess the patient based on the clinical urgency.

You will find an Examiner in the room with a simulated patient and the examiner will guide you through the station. Please note the 7-minute bell should be ignored in the acute stations and sub-timings will be guided by the examiner, to move you through the various elements of the station within the permitted 15 minutes.

You will be asked to:

- Take a brief history (clinical communication- content and process)
- Respond to specific questions- these might include questions relating to your differential diagnosis and immediate management plans and interpretation of clinical data relating to the patient. (Clinical diagnostics and reasoning and Clinical care and patient safety)
- Perform a practical task- procedural or written skill (Technical performance)

Each acute station is different and may vary in terms of structure. As such there may be variations from this guidance depending on the station, however the general timings and structure are normally as follows:

At start of station: you will be directed by the examiner to take a brief focused history from the patient.

At 4 minutes:

- a short clinical findings summary is given by the examiner, usually including the patient's NEWS chart
- you will then be asked to give your differential diagnosis
- you will then be asked how you would investigate the patient
- you will then be presented with some clinical results relating to the patient and asked to interpret these/ identify key abnormalities etc (bloods/ x-rays etc)
- you will then be asked what most likely diagnosis is and why

By 7 minutes: you will be asked about your initial and ongoing management of the patient

By 11 minutes: you will be asked to perform a related clinical procedural skill.

15 minutes: end of station

EXAMPLE STATION: ACUTE MEDICINE

Student Briefing	You are a 4 th year medical student on clinical placement in a District General Hospital.
Setting:	Emergency Medical Admissions Unit
Patient's Details:	This patient has been admitted with a swollen & painful left arm. They have not yet had any investigations.
Your Task:	Please take a history from the patient. You will then be asked questions by the guide and asked to perform a clinical procedural skill.



Cardiff University Year 4 ISCE 2022/23

Example formative peer mark sheet: Acute assessment					
Name of student					
Name of assessor					
		Fail	Borderline	Pass	Excellent
P1	Communication skills- content and process Did the student demonstrate a fluent and skilled approach to obtaining a history from the patient? Did the student obtain relevant information about the patient through appropriate history +/- physical/mental health examination? Did the student demonstrate a fluent and skilled approach to communicating with the patient? Structured e.g., Elicit Provide Elicit.				
P2	Technical performance Did the student explain and perform the procedure appropriately and safely?				
P3	Diagnostics and clinical reasoning Did the student demonstrate logical interpretation of clinical and preliminary investigation findings? Did the student formulate an appropriate prioritised list of problems and differential diagnoses, demonstrating logical justification/ prioritisation and ranking, and an ability to reason their diagnosis?				
P4	Clinical care & patient safety Did the student answer the clinical care & patient safety questions appropriately? Did the student deal appropriately with complexity and uncertainty including managing multimorbidity and prioritising tasks? Did the student demonstrate an understanding of relevant investigations and how the results might determine further care? Did the student interpret results and ensures they are acted on appropriately in the context of the clinical situation, avoiding over-investigation? Did the student assess and generate a safe and appropriate management plan for chronic conditions/ emergency/ acute presentations, and promote health and prevent disease as appropriate? Did the student demonstrating an ability to consider risks and benefits of alternative management options whilst utilising evidence-based guidelines appropriately and demonstrating person-centred consultation and management skills?				
P5	Professionalism				
	Did the student demonstrate respect for the patient, communicate clearly, consider patient safety, comfort, and dignity? Did the student demonstrate safe hand hygiene, personal appearance, and behaviour? Did the student behave in accordance with legal and ethical responsibilities (including equality and diversity principles) demonstrating understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients, where applicable?				
-	rt ('Yellow Card') case complete the 'Safety Alert' box on the reverse)			Yes	No

Clinical examination stations

These stations usually involve 'real' patients. At this stage the emphasis is on eliciting physical signs, making diagnoses, and formulating an appropriate management plan, not just performing the examination in 7 minutes, therefore having examined the patient, you will then be asked:

- To summarise your clinical findings
- Discuss and answer questions relating to standardised clinical resources (e.g., blood results etc.)
- Develop an appropriate differential diagnosis
- State and justify the rationale for your most likely diagnosis
- To answer standardised questions relating to clinical care and patient management

You must follow appropriate PPE guidance regarding hand cleansing before and after examining each patient. You do not need to talk through your examination; however, examiners may ask for clarification as to what you are looking for in order to award marks appropriately e.g., Muscle wasting or fasciculation.

There will be a briefing outside each station that tells you which system or part of a system you should examine. Each clinical examination station lasts for 15 minutes. You will have 7 minutes to assess and examine the patient. You will then be asked to summarise your findings and answer standardised questions from the Examiner relating to standardised clinical resources, your clinical reasoning, and your differential diagnosis (until the warning bell at 11 minutes). You will then answer questions relating to clinical care and patient management.

EXAMPLE STATION: GASTROINTESTINAL STATION

Student Briefing	You are a 4 th year medical student on a clinical placement in general surgery
Setting:	Surgical outpatient clinic
Patient's Details:	This patient is complaining of abdominal pain
Your Task:	Please examine the patient's gastrointestinal system. At 7 minutes the examiner will ask you to summarise your findings and provide a differential diagnosis. You will then be asked to interpret clinical data and answer questions relating to your clinical reasoning and clinical care for the patient.



Cardiff University Year 4/ Year 5 supplementary ISCE 2022/23

Example formative peer mark sheet: Clinical examination Name of student Name of assessor Fail Borderline Pass **Excellent** Clinical examination-process P1 Did the student introduce themselves and obtain verbal consent? Did the student complete a fluent and thorough physical examination of the patient? P2 **Clinical examination- content** Did the student identify all the correct signs? Р3 Diagnostics and clinical reasoning Did the student demonstrate logical interpretation of clinical and preliminary investigation findings? Did the student formulate an appropriate prioritised list of problems and differential diagnoses, demonstrating logical justification/ prioritisation and ranking, and an ability to reason their diagnosis? Ρ4 Clinical care & patient safety Did the student answer the clinical care & patient safety questions appropriately? Did the student deal appropriately with complexity and uncertainty including managing multimorbidity and prioritising tasks? Did the student demonstrate an understanding of relevant investigations and how the results might determine further care? Did the student interpret results and ensures they are acted on appropriately in the context of the clinical situation, avoiding over-investigation? Did the student assess and generate a safe and appropriate management plan for chronic conditions/ emergency/ acute presentations, and promote health and prevent disease as appropriate? Did the student demonstrating an ability to consider risks and benefits of alternative management options whilst utilising evidence-based guidelines appropriately and demonstrating person-centred consultation and management skills? **P**5 **Professionalism** Did the student demonstrate respect for the patient, communicate clearly, consider patient safety, comfort, and dignity? Did the student demonstrate safe hand hygiene, personal appearance, and behaviour? Did the student behave in accordance with legal and ethical responsibilities (including equality and diversity principles) demonstrating understanding of patient capacity, consent, and confidentiality in delivering care, safeguarding vulnerable patients, where applicable? Safety Alert ('Yellow Card') (If YES, please complete the 'Safety Alert' box on the reverse) Yes No

e-learning resources and Self-Directed Learning

To help you revise your clinical procedures there are on-line tutorials available on Learning Central

Self-Directed learning area: Cardiff

You can practise within the Self-Directed Learning area, 3rd Floor Cochrane. An online booking system allows you to pre-book a 50-minute slot within the SDL. To gain access to the booking system please visit: https://resourcebooker.cardiff.ac.uk and locate the 'Medic Self-Directed Learning Space' tile. An instructional video can also be found on Learning Central (Medic – Clinical Skills module / Self-Directed Learning area).

Opening Times

Monday, Tuesday, Thursday, and Friday: 09.00-16.00

Wednesday: 09.00-15.00 (Tutor in the House)

During exam periods these times and availability may be subject to change.

Any changes will be announced on Learning Central.

The Self-Directed Learning Area hosts an 'In-House' tutor so that students may ask questions about skills they are unsure about. On a Wednesday, the tutor will not be there to demonstrate the skill in full, but just to help answer difficult points or to provide support.

Self-Directed learning area: Bangor

You can practise within skills area at Deiniol Block which is situated behind Brigantia.

There will be "in-House" tutor session as well as access to the SDL.

Further details regarding such arrangements and availability will be provided on LC.

Further sources of information regarding clinical assessments

Please refer to the Combined Assessment and Progression Guide on Learning Central.