

Case based Discussion (CbD)

for respiratory trainees

(see overleaf for guidance notes)

Training Centre:

Date of Assessment:

Trainee's Name:

Trainee's email address:

Years **remaining** until training complete: <1 1-2 2-3 >3 years

Assessor's Name:

Assessor's Email Address:

Educational supervisor's email
(if different to assessor)

Case setting: In-patient Out-patient -new Out-patient -review Emergency Dept Other

Case complexity: Straightforward Some complex features Complex

Who chose the case? Supervisor selected Trainee selected Random

Provide a brief summary of the case discussed:

What aspects of case were the main focus of discussion? (tick as many as relevant)

History/clinical findings Differential diagnosis Investigations Management plan Communication/ethics

Comment on what was done well and the areas for improvement.
Note- **constructive** feedback is required if the assessment is to be useful.

What was done well?

Areas for improvement? (If none, please state 'None')

Suggestions for development: (should be specific, realistic actions)

Based on this CbD, how much supervision does this trainee need for a future case of similar complexity?

Discuss all cases with supervisor before executing decisions

Discuss all cases with supervisor subsequently

Discuss a case with supervisor only if trainee wishes

No supervision needed. Could function as specialist

Signed

Assessor Trainee

Case based Discussion record form

Guidance notes for supervisors

- This form should be used for the recording of a Case-based Discussion (CbD) between a supervisor and trainee.
- This should normally be a planned activity.
- The trainee will usually select a case or cases which he or she has recently dealt with, in which there was some uncertainty/conflict or challenges in decision-making. (A supervisor may select/suggest a case if he is aware of one that would be suitable.)
- A period of 20-30 minutes of private, protected time should be set aside for the CbD
- The trainee should present a brief summary of the case and the issues it raises.
- The supervisor should focus on one or two aspects of the case, such as information gathering and interpretation, diagnostic approach, management planning, communication, and should initiate an exploratory discussion.
- Questions should be open (What diagnoses did you consider? How did you feel about the communication? What did you think were important factors in the history?) rather than closed questions. Try to avoid questions which merely test knowledge (How do you stage this cancer? What is the most important complication of this drug?) although they may be necessary later in the discussion.
- Avoid turning the session into didactic teaching. You are trying to explore the trainee's clinical reasoning and insight.
- Give honest, but constructive, feedback. If there were things that could have been done better, or areas that need development in the trainee's knowledge, it is important that you identify them and tell the trainee. That is the purpose of the exercise!
- Make sure you agree specific actions with the trainee to help them achieve the developmental goals.
- Make an assessment of the level of trust you have in the trainee's clinical competence in this setting. Would you want him/her to discuss each case with you before taking any action, or just tell you about the cases at the end of clinic, or after the ward round, or just tell you about the cases which he/she finds worrying? Is he/she ready to work independently as a specialist?
- Fill in all boxes on the form. Give an estimate of trainee seniority by how many years remain until they have completed their specialist training.
- Once the trainee and supervisor have both signed off the form, give the trainee a copy, and either keep the copy yourself, if you are the main educational supervisor for this trainee, or else send it to the main supervisor.