

DIRECT OBSERVATION

what, why, and how to and how to do it well...

WHAT is it?

Directly observing your learner in action to assess key competencies and offer the learner constructive feedback to guide their future development.



WHY do it?



LEARNERS

Get real-time feedback on key physician competencies, such as communication skills, patient-centeredness, decision-making, and physical exam skills, which are best assessed in actual practice,^{1,2,3}

PRECEPTORS

Learners award greater credibility to feedback that results from being directly observed doing authentic tasks.⁴

PATIENT CARE

Provides better supervision of clinical care.²

HOW to do it well:

1 | PREP FOR IT

plan ahead • set expectations • discuss goals



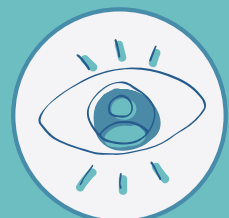
2 | KEEP IT TIGHT

just watch key parts • give feedback later



3 | BE A FLY ON THE WALL

sit out of sight of the patient • don't interrupt



UBC

Family Practice Residency Program

REFERENCES:

1. Bandiera G, Sherbino J, Frank JR, editors. The CanMEDS assessment tools handbook. An introductory guide to assessment methods for the CanMEDS competencies. Ottawa: Royal College of Physicians and Surgeons of Canada; 2006.
2. Cheung WJ, Patey AM, Frank JR, Mackay M, Boet S. Barriers and enablers to direct observation of trainees' clinical performance. Acad Med 2019;94 (1):101-14.
3. Ross V, Mauksch L, Huntington J, Beard J. Interdisciplinary Direct Observation: Impact on Precepting, Residents, and Faculty. Fam Med 2012;44(5):318-324
4. Yoyer, S. et al Investigating conditions for meaningful feedback in the context of an evidence-based feedback programme. Medical Education 2016;50(9):943-954.