

Instructions for Completing a Structured Clinical Evaluation (SCE)

Preceptor Instructions

The Health Supervision Structured Clinical Evaluation (SCE) form has been developed for use by preceptors when observing medical students during a health supervision encounter in the outpatient clinic. Students are required to turn in at least one Health Supervision SCE form by the end of the rotation, and they will be included in the student's folder. While preceptors may complete more than one SCE for a particular student, by the end of the rotation each student is required to have at least one completed SCE.

Please take the form with you into the room while the student is completing a health supervision encounter with a child and parent. Ideally, we ask that you observe the student for the entire encounter. If that is not feasible, any observation time will suffice and complete the form accordingly. Use the descriptions under Communication and Relationship skills, Data Gathering/Interpretation and Anticipatory Guidance to help guide your observation and feedback. Although feedback on the physical exam skills is not included on the form, please include this information for your student during the feedback session and/or their blue card evaluation for the day.

At the end, please complete the feedback portion of the SCE, to include positive reinforcement and areas to correct. After the encounter, at any convenient time during the clinic day, please discuss your feedback with the student, based on your observation and notes. Please sign the student's clinical passport after you have completed the SCE. Give each completed SCE form back to the student to give to their site director.

Student Instructions

The Health Supervision Structured Clinical Evaluation (SCE) form provides a framework for feedback from your outpatient preceptor when you are completing a health supervision encounter. At the start of the health supervision visit, please explain to the parent and child that your preceptor may enter to observe you and that the preceptor will make notes about your interactions with them. For each encounter, your preceptor will observe the items listed on the form. After the encounter, your preceptor will discuss the form with you and offer you both reinforcing and corrective feedback, to help you improve your clinical skills.

Students are required to turn in at least one Health Supervision SCE form by the end of the rotation. You will be required to give the completed SCE form to your Site Director. While preceptors may complete more than one SCE, please ensure that by the end of the rotation, you have at least one complete SCE in your folder.

Student Name: _____

Date: _____

Note: The format of this tool was adapted from the USU
Dept. of Medicine Clerkship evaluation form.

Site: _____ Evaluator: _____

For each area of evaluation, please check the appropriate level of ability. Indicate the level at which the student consistently performed during your observation.

COMMUNICATION AND RELATIONSHIP SKILLS

<i>UNACCEPTABLE</i>	<i>NEEDS IMPROVEMENT</i>	<i>ACCEPTABLE</i>	<i>BETTER THAN ACCEPTABLE</i>	<i>OUTSTANDING</i>
Opening/closing/skill with questions			If Not Observed, Check Here o	
o Omits introductions and closing, rude and/or ignores either parent or child	o Introduces self, uses parent and child names, addresses both parent, child	o Identifies parent/child concerns. Uses some open-ended questions.	o Starts with open-ended questions and progresses to specific questions. Avoids multiple/presumptive/leading questions.	o Skillful questioning and appropriate, reflective summaries of information gathered
Relationship skills			If Not Observed, Check Here o	
o Disrespectful and/or dismissive of parent or child	o Inconsistent response to concerns, comments, or questions.	o Open body language, sits down, respectful facial expressions and tone of voice. Builds rapport. Listens attentively.	o Acknowledges/legitimizes parent/child concerns, feelings. Offers partnership, empathy, support and/or praise.	o Relates well to subtleties of parent/child culture, concerns, or special circumstances.

POSITIVE FEEDBACK :

CONSTRUCTIVE FEEDBACK:

DATA GATHERING/INTERPRETATION

<i>UNACCEPTABLE</i>	<i>NEEDS IMPROVEMENT</i>	<i>ACCEPTABLE</i>	<i>BETTER THAN ACCEPTABLE</i>	<i>OUTSTANDING</i>
History			If Not Observed, Check Here o	
o Major omissions, disorganized. Omits parents'/child's concerns.	o Poor flow, covers some important topics but omits others, questions do not seek supporting detail	o Complete history: birth history, social situation, military status, behavior, development, nutrition, safety	o Comprehensive, organized, questions imply interpretation and build a foundation for anticipatory guidance	o Reflects thorough understanding of patient situation, uses parent/child comments and concerns to build further questions
Immunizations			If Not Observed, Check Here o	
o Reports inaccurate data about the child's immunization status and/or the current CDC guidelines.	o Reviews the child's immunization status but does not relate it to current CDC guidelines.	o Reviews the child's immunization status and mentions current CDC guidelines.	o Reviews the child's immunization status, relates it to current CDC guidelines and correctly identifies needed immunizations.	o Can discuss risks and benefits of immunizations even with a parent with concerns about immunizations.
Growth chart			If Not Observed, Check Here o	
o Makes significant errors in recording data or identifying normal and abnormal findings. Inaccurate reporter.	o Records data accurately and completely but makes some errors in identifying normal and abnormal findings.	o Correctly identifies normal and abnormal findings. Accurate and complete reporter, moving to interpreter.	o Correctly identifies normal and abnormal findings. Relates findings to clinical situation. Interpreter moving to manager/educator.	o Formulates explanations for parent/child, appropriately targeted to their questions, concerns and understanding.

POSITIVE FEEDBACK:

CONSTRUCTIVE FEEDBACK:

ANTICIPATORY GUIDANCE

<i>UNACCEPTABLE</i>	<i>NEEDS IMPROVEMENT</i>	<i>ACCEPTABLE</i>	<i>BETTER THAN ACCEPTABLE</i>	<i>OUTSTANDING</i>
Organization and prioritization			If Not Observed, Check Here o	
o Offers random information. Jumps around. Disorganized.	o Logical flow but omits key information or ignores parent/child concerns.	o Addresses all concerns, integrates questions asked with information provided.	o Addresses all concerns and offers some additional information from guidelines.	o Time-efficient, offers prioritized guidance targeted to concerns and guidelines.
Education for parent and/or child			If Not Observed, Check Here o	
o Gives inaccurate information.	o Uses jargon without explaining. Not at appropriate level for parent and/or child.	o Solicits and answers questions. Avoids jargon. Provides accurate guidance appropriate to child's age.	o Explains reasons for recommendations. Addresses guidance to both parent and child as appropriate.	o Checks understanding by patient/family. Assesses child/family willingness and ability to follow recommendations.

POSITIVE FEEDBACK:

CONSTRUCTIVE FEEDBACK: