The Clinical Competency Assessment (CCA) is being introduced by the College as an assessment pathway to be offered from September 2022 and through 2023. This assessment replaces the Alternative Assessment Pathway (AAP) offered to candidates in November 2021 and March 2022.

The Clinical Competency Assessment comprises Portfolio Review of the three most recent end-of-rotation In-Training Assessments (ITAs), one of which must be a Stage 3 ITA (6 months FTE).

- Where a successful Portfolio Review outcome is not achieved, a Case-based Discussion (CbD) – a workplace-based summative assessment - will be offered (45-minute clinical case-based discussion with two assessors).

Overview

Case-based Discussion (CbD) Assessment is offered as part of the Clinical Competency Assessment (CCA) pathway to those candidates who are not able to demonstrate the required standard through the Portfolio Review.

The RANZCP Fellowship program assesses the full range of CanMEDS Fellowship Competencies throughout the course of training. The aim of the CBD is to assess a range of these competencies as they relate to the case presented.

Candidates will be able to access the CbD Marksheet and performance criteria expected for each domain from the College website, which will help them to prepare for the CbD Assessment. The expected standard for the CbD assessment is that of a trainee at the end of Stage 3.

Format of the CbD

Selection of cases

Candidates are required to select two recent cases where they have been involved in the care of the patient.

The candidate’s involvement in the care of the clinical cases submitted for the CbD should have occurred in the previous 12-18 months.

Candidates must obtain consent from the relevant patients to be able to use the case for assessment purposes.

- The cases selected can be from any age or specialist area, however, all cases will be assessed at the standard of a generalist psychiatrist level.
- Candidates may include cases where they completed only a single assessment of a patient.
- The assessors will select one case and the candidate will be assessed on the written presentation of the selected case and discussion with assessors, against pre-determined criteria.
- Candidates must select two distinct cases for discussion for the CbD assessment. The two selected cases should offer distinct aspects of presenting the problem, management, or key issues.
Written summary

- Candidates will submit written summaries of the two cases to the College of up to 1500 words each. At the end of each summary, candidates should clearly indicate the number of words used. The case summaries may be returned if the number of words exceeds the limit.

- The two case summaries presented should be distinguishable for assessors to make a reasonable choice. The case summaries should be coherent, well organised, and clearly articulate patient information and management plan, to reflect a sound grasp of knowledge of the case and important aspects of treatment.

- It is recommended that candidates use a structured approach and organise their case summary around some clear headings. One possible way to organise the case summaries is as follows:

  o Brief background of the patient
  o Candidate’s involvement with the patient
  o Presentation and initial assessment
  o Social/Cultural/Medical/Psychiatric and Family History
  o Any drug/alcohol history
  o Evaluation of past assessments and management
  o Developmental history
  o Mental State Examination
  o Formulation
  o Diagnosis
  o Initial and ongoing management (including any communications and collaboration with family, carers, and treatment team).

- Candidates must be mindful when writing and presenting their cases of the difference in Mental Health Acts across Australia and New Zealand, particularly in the use of forms and acronyms. They should clearly describe the relevant aspects of the Act that applied in the jurisdiction where the patient was treated. Candidates should avoid using acronyms for service units as these also vary between Health Services. Using specialised abbreviations should be avoided or spelled out when writing the case summary.

- Candidates must de-identify the patient’s name and any other identifiable features such as names of the health services in their case summaries. Candidates should use initials for the patient’s name and a generic term such as Service 1/Service 2 to refer to services. It is also recommended that candidates and assessors use the generic term ‘patient’ when discussing the case.

- The quality of the written case summary will be assessed as part of the Communication domain of the CbD marksheet.

- Case summaries must be uploaded on the InTrain by the due date before the assessment. Along with the case summaries, candidates must submit a signed patient consent form for each case. Patient information and consent form

- The case file will not be shared with assessors.

- Any inaccurate or fabricated case summaries may be considered by the RANZCP to be potential misconduct, and the RANZCP may take appropriate action in such circumstances.
Case discussion

The assessors will select one of the cases on the day of the assessment for discussion and questioning. The candidate will be informed of which case is to be discussed when they join the AV meeting.

The duration of the case will be a maximum of 45 minutes.

Candidate presentation – Maximum 5 minutes

Candidates present a concise summary of what they consider to be the salient features of the case (please note the full written summary submitted with the case should not be repeated here). Candidates can also provide a rationale for selecting the case for discussion and may offer what they consider to be key issues relevant to the case, which could form the basis for some of the discussion.

Case discussion – 40-45 minutes (depending on the time taken for presentation)

During the case discussion, the assessors will probe further into aspects of the candidate’s involvement in the case, including their assessment and role in treatment provision, asking suitable questions from each of the relevant domains given in the CbD Marksheet, paying particular attention to whether the candidate demonstrates the standard required for the Fellowship competencies relevant to the domains.

Prior to the case, the assessors will have some time to discuss and select the case for assessment from the two submitted cases.

The assessors will have 15 minutes to complete their marking following the CbD assessment.

Candidates will be notified of the allocated time slot for their CbD assessment at the time of their CbD confirmation. CbD assessment will be held within specified weeks – see the schedule on the CCA website.

To facilitate the assessment of a broader range of Fellowship Competencies are assessed, the assessors may ask follow-up questions on the areas that they feel may not have been sufficiently covered by the candidate. This may include “hypotheticals” related to the case presented.

Candidates and assessors will receive the links to the following resources:

- CCA CbD Guidelines (this document)
- Clinical Competency Assessment Frequently Asked Questions
- CbD Overview and Performance Criteria
- CbD Marksheet
- Guidance for discussion document
- Patient information and consent form
- Details of the support Hotline (will be provided with the date and time of the CbD assessment).

Assessors will separately be provided with information regarding calibration training for the CbD.
Assessor team composition

- Assessors will be current RANZCP accredited supervisors and/or assessors.
- The College will assign assessors to a CbD assessment based on their availability and ‘Can’t See’ considerations, to mitigate any conflict of interest.
- The College will confirm the availability for a set or scheduled date with the candidate and both assessors.

AV CbD Delivery and Operationalisation

- All participants who take part in the AV CbD will connect via Zoom.
- If Zoom cannot be accessed, approval can be sought to use Teams as a backup platform.
- The College will initially host the meeting to ensure that all participants have arrived and will provide technical support.
- The ‘host’ rights will be transferred to an assessor once the examination is ready to commence.
- The CbD session must not be recorded by either the candidate or the assessors.
- The participants can complete the AV CbDs from their homes or workplace.
- All participants are required to have the appropriate equipment to undertake AV CbD.

This includes:

- A device that can access Zoom (preferred) or Teams. Information on supported devices for Zoom can be found at Supported USB HID devices for the Zoom Desktop Client (to ensure a PC workstation/laptop (other devices such as Mobile Phones or iPads are not recommended) with appropriate Audio and Visual functionality is available in the room including:
  - a wired internet connection
  - noise-cancelling headphones
  - a webcam connected to / inbuilt in the computer

NOTE: A test call with candidates will be conducted approximately a week prior to the scheduled assessment to check for any technical issues. Candidates must complete the test call using the computer which will be used for the CbD. As firewalls and security systems may have an impact on networks connected to the internet, we strongly recommend that the candidates complete the test call successfully prior to the CbD proceeding. College staff will arrange connectivity and equipment check opportunities prior to the CbD assessments.

- College staff will arrange the date and time to undertake the CbD and will send Zoom link(s) to the assessors and the candidate.
- At the nominated assessment time, both assessors will join the Zoom link from their personal or department workstation.
- During this time the candidate will wait in the virtual ‘lobby’.
- College staff will log in with the assessors to ensure that the audio and video are working.
- The candidate will be informed by college staff when they will enter the virtual assessment room to commence CbD.
- The CbD will be a maximum of 45 minutes in duration. Assessors will be responsible for managing the timing of the CbD.
In the CbD

- Candidates are required to display identification (e.g.: Driver's license, passport, Health Service Identification card) for confirmation of identity at the commencement of the Assessment via the webcam to the College staff and remain on camera for the entire assessment.
- The candidates must complete the CbD in a private room and confirm that no other person/s is present during the CbD assessment. The assessors will confirm this prior to the start of the assessment.
- A failure by a candidate to properly adhere to the above, or any other contravention of the RANZCP’s Code of Conduct or Code of Ethics in the course of the Case-Based Discussion, may be considered by the RANZCP to be potential misconduct or otherwise unprofessional conduct, and the RANZCP may take appropriate action in such circumstances.
- In case of technical issues: If the case has been selected and/or the CbD commenced, and the issue is ongoing (or prolonged) the assessment will be rescheduled. In this instance, the assessors must advise College staff via the dedicated Hotline who will notify the participants and reschedule the CbD assessment to a mutually convenient date as soon as possible. An Incident report should be completed for any incidents that occurs which could have an impact on candidate performance or the ability of assessors to evaluate performance. An Incident report link can be found on the College’s website. All incident reports need to be submitted within five (5) working days from the examination date. No further submissions will be accepted as the Incident report link will be unavailable past this date.

CbD Marking

- At the completion of the assessment, each assessor will complete their individual marksheet, after which the two assessors will discuss the candidate's performance to reach a consensus mark (15 mins).
- The final mark for the candidate will be based on consensus marking.
- All assessment mark sheets duly signed by the assessors will be returned to the College on the day of the assessment.
- There will be a nominated member of the CbDOP on stand-by for the days of CbD Assessments if the assessors are unable to reach a consensus. Mark sheets will be submitted/forwarded to that CbDOP member on the day of the assessment for discussion to facilitate a consensus meeting to determine the outcome. College staff will organise the meeting as soon as possible after the CbD.

Results

- All results will be reviewed and finalized by the CbDOP.
- Candidates will receive their results as soon as they are finalized.
- Should there be a delay for any reason, the College will notify the candidate and provide an updated timeframe.

Please contact the RANZCP if you have any questions relating to the process or requirements via assesshelp@ranzcp.org