

Supplementary to:

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Assessment of competence and feedback

Psychiatry clerkship

4th semester of graduate programme, University of Copenhagen

Spring 2025

Portfolio

Introduction

During this semester, you will be introduced to assessment of competence and feedback in connection with typical clinical learning situations to strengthen learning. You will become familiar with the seven roles of the doctor and the assessment tools used in internships (KBU) and specialist training programmes. This learning tool helps prepare you for working as a doctor and provides a smoother transition from being a student to becoming a doctor.

Learning objectives and assessment followed by feedback

The overall learning objectives are described in the logbook from the University of Copenhagen. During your clerkship in psychiatry, in addition to the competencies in the logbook, you must achieve basic clinical competencies within the following three areas:

- Medical record taking, part 1: patient interview
- Medical record taking, part 2: documentation and objective mental status examination
- Summary of the psychiatric medical record

Within each area, a competence card has been developed in which the learning objectives are specified in the form of assessment criteria used during the assessment.

When you begin your clerkship, you will be introduced to the competence cards. You will also receive access to the electronic version, which we recommend that you use.

After the first few days, you should begin practicing with the competence cards in your daily clinical work. You may practice with the cards as many times as needed. This will help you become aware of what you find easy and where you need improvement, so that you continuously develop your competencies throughout the placement as you gain routine in the tasks.

You are encouraged to ask one of your fellow students to conduct an assessment (so-called peer-to-peer assessment) before a doctor conducts the formal assessment. This must also be documented.

When you are ready to have your competencies approved, this should take place in collaboration with your coordinator or a doctor in the department. In some departments, this may be a psychologist or a nurse.

Approval may be based either on a conversation or on direct observation of the competence. The assessment uses a scale from 1–3, where 3 is the highest score, and the complexity of the patient is considered. We expect that during your clinical placement you will be able to achieve level 2. You will receive immediate feedback after the assessment, allowing you to work on improving your skills based on the feedback. Assessments may be repeated as many times as wanted and needed; we encourage you to do it several times.

The placement concludes with completion of a short electronic questionnaire about your experiences with the competence cards as well as an interview.

Documentation

You must indicate who conducted the assessment (student, doctor, psychologist, etc.). We also ask that the name of the assessor be written on the competence card.

This documentation is used to confirm that competencies have been achieved and to describe the learning process. It also provides insight into the learning opportunities offered by the department and the extent to which they are utilized.

FEEDBACK

Initial – is the student ready for feedback?

Firstly about the overall performance

- The student describes what went well
- The supervisor describes what went well
- The student describes what could have been done better and how

The supervisor describes areas for improvement and how skills can be developed

Detailed feedback – the supervisor reviews the competence card assessment

- Learning goals/plan are formulated – summary of what should be learned and whether this remains the focus next time
- Feedback/evaluation

Competence Card 1 – Part 1: Medical Record, Patient Interview

Student name:

Complexity of the interview (tick one):

Low

Moderate

High

This competence card is used to train the roles involved in conducting a patient interview with a psychiatric patient and in writing the psychiatric medical record. The card supports practice in patient communication, interprofessional collaboration with other healthcare professionals, and reflection on one's own professional role. The card is assessed based on direct observation of you as a student during a patient interview. The supervising physician provides specific and constructive feedback after the patient interview has been completed

Needs improvement

Acceptable level (as expected at start of internship)

Above expected level

Cannot be assessed

Before the interview

Preparation before the interview (review of records, physical setting/safety)

Involves relevant other staff

During patient interview

Establishes contact

Clarifies frame and purpose of the interview with the patient

Involves the patient

Obtains relevant information

Explores and elaborates on problems

Understands the patient's perspective and asks clarifying questions

Appropriate closure of the interview

Date:

Supervisor's signature:

Feedback

What did the student do well, and how can this be further improved?

What did the student do less well, and how can this be improved?

Competence Card 1 – Part 2: Medical Record, Documentation

Student name:

Complexity of the interview (tick one):

Low

Moderate

High

This competence card is used when writing a psychiatric medical record, but it may also be used to practise the objective mental status examination, for example when observing another clinician conducting a patient interview. It is natural for the medical record to be written after a patient interview, as a continuation of Part 1 of the competence card. The assessment takes place in daily clinical practice, where a physician—preferably a senior clinician or—reviews your draft medical record either in the clinical setting or during afternoon teaching sessions (“Klinikundervisning”). You can expect specific and constructive feedback based on the assessment form, which may also lead to a clinical discussion of your evaluation of the objective mental status examination.

Needs improvement

Acceptable level (as expected at start of internship)

Above expected level

Cannot be assessed

Patient history

Mental status examination

Cognition

Appearance and behaviour

Contact

Affect

Mood

Psychomotor activity

Speech/thought disorder

Thought content (e.g. delusions)

Risk assessment (suicide, aggression)

Konklusion

Conclusion and summary

Treatment plan including prescriptions

Generelt

Overall structure of the medical record

Date:

Supervisor's signature:

Feedback

What did the student do well, and how can this be further improved?

What did the student do less well, and how can this be improved?

Competence Card 2 – Summary of the Psychiatric Medical Record

Student name:

Scope/complexity of the medical history (tick one)

Low

Moderate

High

This competence card is used to summarise the psychiatric medical record. The competence is achieved by reviewing a patient's record in IT-system and writing a clinically relevant, focused summary in IT-system. Inform a physician in the ward/section that you have prepared the summary and request assessment and feedback.

Needs
improvement

Acceptable
level (as
expected at
start of

Above
expected level

Needs
improvement

Introduction and area of focus

Summary of current admission

Previous psychiatric history since childhood

Previous somatic history

Social history/life course

Substance use problems

Psychiatric medication history

Previous use of coercion

Legal measures

Focus area adequately addressed in the summary

Date:

Supervisor's signature:

Feedback

What did the student do well, and how can this be further improved?

What did the student do less well, and how can this be improved?