**Direct Observation of Procedural Skills (DOPS)**

**COMPONENT ASSESSMENT**

Based on this encounter, if a similar case occurred, the involvement of a senior clinician with this trainee should be:

Select the **ONE** option that best represents the minimum senior clinician involvement required for the component to be performed at the level of a new FACEM.

<table>
<thead>
<tr>
<th>Technical Skill Performing the Procedure</th>
<th>Indications and Contraindications</th>
<th>Informed Consent</th>
<th>Preparation for Procedure</th>
<th>Situational Awareness</th>
<th>Communication and Consultation</th>
<th>Prevention and Management of Complications</th>
<th>Post Procedure Management</th>
<th>Discharge Advice to Patient/Carers</th>
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<tr>
<td>Senior clinician performs; trainee assists</td>
<td>Trainee performs; senior clinician instructs</td>
<td>Trainee directly observes</td>
<td>Trainee performs; checks prior, during, upon completion</td>
<td>Trainee performs; checks prior and upon completion</td>
<td>Trainee walks through check in person</td>
<td>Trainee performs; senior clinician available to advise via telephone</td>
<td>Trainee performs; senior clinician not required</td>
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Please rate the following skill.

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| | | | | | | | | |

Please rate as many of the following components as observed.

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GLOBAL ASSESSMENT

Based on this encounter, to perform this procedure if a similar case occurred, the involvement of a senior clinician with this trainee should be:

Select the **ONE** option that best represents the minimum senior clinician involvement required for the procedure to be performed at the level of a new FACEM.

**PATIENT CASE DETAILS**

Procedure: Select the **ONE BEST** option

- Advanced Airway (Direct laryngoscopy, oral ETT, RSI Self-inflating bag and setting up a transport ventilator)
- Administration of procedural sedation
- Use of non-invasive ventilation device (select ONE: Adult Paediatric)
- Central Venous Access (select ONE: With Ultrasound Without Ultrasound)
- Use of ultrasound (select ONE: Bovine FAST EFAST)
- Performance of Focused Abdominal Sonography in Trauma (select ONE: FAST EFAST)
- DC Cardioversion
- Tube Thoracostomy
- Lumbar puncture
- Other (please specify)

Patient Case Complexity: Select the **ONE BEST** option

- Low Complexity
- Medium Complexity
- High Complexity

**Trainee First Name:**

**Trainee Last Name:**

**Trainee ACEM ID:**

**Hospital:**

**Assessor First Name:**

**Assessor Last Name:**

**Assessor ACEM ID:**

**Date of Assessment:**
**Direct Observation of Procedural Skills (DOPS)**

**Areas of strength:**

**Areas for development:**

**Agreed learning goals for next encounter:**

**Any other comments about this assessment:**

### EVALUATION OF DOPS

<table>
<thead>
<tr>
<th>Time taken for observation:</th>
<th>Clinical Time</th>
<th>Clinical Support Time</th>
<th>Other</th>
<th>Mixed</th>
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<tr>
<th>Time taken for feedback:</th>
<th>Clinical Time</th>
<th>Clinical Support Time</th>
<th>Other</th>
<th>Mixed</th>
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<tr>
<th>Interval between observation and post-assessment feedback:</th>
<th>Clinical Time</th>
<th>Clinical Support Time</th>
<th>Other</th>
<th>Mixed</th>
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<tr>
<th>Trainee satisfaction with DOPS:</th>
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<th>Assessor satisfaction with DOPS:</th>
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EVALUATION OF DOPS

**Time taken for observation:**

**Time taken for feedback:**

**Interval between observation and post-assessment feedback:**

**Trainee satisfaction with DOPS:**

**Assessor satisfaction with DOPS:**

**EVALUATION OF DOPS**

**Trainee perfo**

**Senior clinician performs:**

**Trainee assistant:**

**Senior clinician directs and supplements required actions, reasoning and/or behaviours and directs trainee to assist:**

**Trainee performs; senior clinician instructs:**

**Trainee performs; senior clinician directly observes:**

**Trainee performs; senior clinician checks prior, during, upon completion:**

**Trainee performs; senior clinician checks prior and upon completion:**

**Trainee performs; senior clinician available to check procedure:**

**Trainee performs; senior clinician available to advise on check procedure:**

**Trainee performs; senior clinician not required:**

### INFORMATION

**DOPS**

A DOPS involves a trainee being observed by an assessor whilst performing a specific clinical procedure in the ED. The assessor rates and provides structured feedback on the trainee’s performance of this procedure. A DOPS is expected to take 10-15 minutes of observation and 5-10 minutes of feedback.

#### Rating Scales

- **Senior clinician performs:**
  - requested actions, reasoning and/or behaviours and directs trainee to assist.

- **Trainee assistant:**
  - senior clinician directs and supplements required actions, reasoning and/or behaviours.

- **Senior clinician determine:**
  - when to provide prompt in-person input.

- **Trainee performs; senior clinician instructs:**
  - trainee performs; senior clinician directly observes.

- **Trainee performs; senior clinician checks prior, during, upon completion:**
  - senior clinician determines if/when to provide prompt in-person input.

- **Trainee performs; senior clinician checks prior and upon completion:**
  - senior clinician determines if/when to request input prior and during.

- **Trainee performs; senior clinician available to check procedure:**
  - senior clinician determines if/when to ask senior clinician to provide in-person input.

- **Trainee performs; senior clinician available to advise on check procedure:**
  - senior clinician determines if/when to contact senior clinician to provide telephone input.

- **Trainee performs; senior clinician not required:**
  - trainee does not require telephone support from other clinicians.

**Components**

- **Please rate the following skills:**
  - Demonstrate tasks;
  - Direct trainee to assist with tasks;
  - Describe own clinical reasoning;
  - Discuss trainee’s thinking;
  - Exhibit and direct appropriate communication and professional behaviours.

**Please rate the following skills:**

- Demonstrate appropriate technique performing the procedure, including the knowledge and skill to perform it in a safe and timely manner.

**Indicators and Contradi**

- Indicators:
  - Demonstrates appropriate preparation and planning for the procedure (including equipment and staff), this may include (but is not limited to): an appropriate setting for the procedure, suitability for the patient, and consideration of the flow of the department, patient positioning, monitoring, communication, and equipment and staff, this may include (but is limited to): an appropriate setting for the procedure, suitability for the patient, and consideration of the flow of the department, patient positioning, monitoring, communication, and equipment.

**Preparation for Procedure**

- Demonstrates situational awareness, showing an ability to maintain focus on conducting the procedure while continuously monitoring the patient and the surrounding environment.

**Situational Awareness**

- Demonstrates appropriate interaction with the patient and the surrounding environment.

**Communication and Consultation**

- Demonstrates effective communication skills with both patient, family, and other staff throughout the procedure. Displays effective, clear, concise and collegial communication within the team. Displays communication with the patient that is appropriate for the procedure and patient / family / carers / end of life / mental health / social issues or who does not respond to first line treatment.

**Communication and Consultation**

- Demonstrates situational awareness, showing an ability to maintain focus on conducting the procedure while continuously monitoring the patient and the surrounding environment.

**Prevention and Management of Complications**

- Demonstrates an understanding of potential complications during and after the procedure. Demonstrates an ability to recognize and manage the potential complications of the procedure.

**Post Procedure Management**

- Ensures post-procedural management. Performs appropriate post-procedural care, including interpreting follow-up investigations, clinical care and documentation of the procedure.

**Discharge Advice to Patient / Carers**

- Provides appropriate discharge / disposition advice to patient / carers. Provides the patient and other staff with specific post-procedural advice and follow up to provide safe discharge from the emergency department.

**Patient Case Complexity**

- LOW complexity cases include those that are best described as:
  - A patient with a single-system problem, with minimal complications (medical and/or social) and responsive to first line treatment.
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- MEDIUM complexity cases include those that are best described as:
  - A patient with multi-system problems, and minimal complications (medical and/or social) and responsive to first line treatment.
  - A patient with multi-system problems, and minimal complications (medical and/or social) and responsive to first line treatment.
  - A patient with multi-system problems, and minimal complications (medical and/or social) and responsive to first line treatment.
  - A patient with multi-system problems, and minimal complications (medical and/or social) and responsive to first line treatment.

- HIGH complexity cases include those that are best described as:
  - A patient with multi-system problems, and multiple significant complications (medical and/or social) and not responsive to first line treatment.
  - A patient with multi-system problems, and multiple significant complications (medical and/or social) and not responsive to first line treatment.
  - A patient with multi-system problems, and multiple significant complications (medical and/or social) and not responsive to first line treatment.
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