

Name of trainee:	Year of training:
Date:	Assessor, role: <ul style="list-style-type: none"> • Supervisor / trainer • Trainee (self-assessment) • Nurse • Other health professional (e.g. nurse, physiotherapist) • Other, specify:
Assessor, name:	
Setting <ul style="list-style-type: none"> • In-patient • Out-patient • Emergency • Other, please specify: 	Case complexity <ul style="list-style-type: none"> • Low • Moderate • High

Date	Time	Location	Weather	Remarks

Please score against what you would reasonably expect of a trainee at their stage of training.							
	Performance level						
	Below expectations		At expected level		Above expectations		Not observed
History taking	1	2	3	4	5	6	n/o
Physical examination	1	2	3	4	5	6	n/o
Communication	1	2	3	4	5	6	n/o
Clinical reasoning	1	2	3	4	5	6	n/o
Professionalism*	1	2	3	4	5	6	n/o
Documentation / proper record keeping	1	2	3	4	5	6	n/o
Time management	1	2	3	4	5	6	n/o
Overall clinical competence	1	2	3	4	5	6	n/o

*Professionalism refers to the commitment to carry out professional responsibilities (respect, compassion, and integrity), adherence to ethical principles, good communication with other team members and being sensitive to the needs of diverse patient populations.

Areas of strength (*To be completed by assessor and trainee after observation and discussion*)

Areas for improvement (*To be completed by assessor and trainee after observation and discussion*)

Learning goals and action plan (*To be completed by assessor and trainee after observation and discussion*)

Time observation: mins.

About the form

The mini-clinical evaluation exercise (mini-CEX), is a workplace-based assessment method. It is used to score a direct observation of a doctor/patient clinical encounter by one or more assessor(s). **This form should only be used if the assessor has directly observed the clinical encounter being rated.** Management of care of patients with acute and chronic, common and complex rheumatologic diseases across multiple care settings can be assessed. The instrument can also be used for self-assessment by the trainee. Cases should be chosen jointly by the trainee and assessor to address specific learning needs appropriate to the stage of training. The assessor can choose to fill out only 1-2 items, for instance: a nurse only provides feedback on the communication skills of the trainee.

Scope of the mini-CEX in the rheumatology setting

Mini-CEX are especially useful to assess common practical and clinical competences that should be acquired by all rheumatology trainees during their training period.

A mini-CEX is especially recommended for the evaluation of general communication skills, history taking, physical examination, professional behaviour, clinical reasoning and formulating a differential diagnosis, development of plans for clinical investigations and for management, good record keeping, providing a rheumatology consultation to other specialties and providers and participating in a multidisciplinary team meeting. The national curriculum or alternatively available European curricula can be used as a reference.

The same assessment method can be used to evaluate different competences depending on the selected case and focus. On the other hand, the same competences can be assessed using different methods (e.g. clinical reasoning through mini-CEX or CbD). The choice of cases, settings and assessment methods should be planned to allow a comprehensive and systematic cover of the educational needs of the trainee according to the stage of professional development.