

## **MOUSE – Notes for Paediatric Surgery Trainee Clinical Assessors**

### **How does it work?**

The process is trainee led. You observe the trainee undertaking the procedure and record your observations on the MOUSE template. The structured form enables the Clinical Assessor to provide verbal feedback to the Trainee. After completing the assessment form, you provide feedback to the trainee immediately after the procedure, which will take about 5 minutes.

### **Applicable procedures**

Trainees should only be observed undertaking procedures normally expected of them and in their usual work environment. Guidelines to what procedures trainees are expected to learn and/or have achieved competence in are available in the published paediatric surgical curriculum and technical templates.

### **Difficulty of procedure**

Please score the difficulty of the procedure:

- Definition of Easier than usual: uneventful procedure without any “usual” problems encountered when performing procedure – eg friable sac is a “usual” problem in neonatal herniotomy.
- Definition of More difficult than usual: unexpected problems unrelated to the expertise of the trainee. eg small premature baby herniotomy under spinal whose is moving or a T.O.F. repair under high frequency ventilation is more difficult than usual

### **Using the scale**

Comparison should be made with a trainee who is competent to perform the procedure unsupervised. It is expected that some ratings below “meets expectations or satisfactory” will be in keeping with some trainee’s level of experience or when first learning a procedure. Do not complete the overall rating unless you have observed the entire procedure.

### **Conduct**

The form is designed to prompt assessment, teaching and feedback in the main domains of operative competency: Situational Awareness, Decision making, Communication & Teamwork, Leadership and Technical ability. Therefore we want to see that the trainee prepares the patient and the operating theatre environment and team appropriately for the procedure (consent, investigations and information gathering, patient placement, draping).

The trainee is assessed on ergonomics of tissue and instrument handling. Importantly the trainee is also assessed on operative decision making and leadership (ability to understand the procedure, its steps and deal with variation or problems). The trainee should verbalise a plan for the steps they will be performing in the operation. If this differs from the assessor’s own protocol this can be an opportunity to teach, correct or debate the merits of different approaches depending on the procedure and the seniority of the trainee.

Lastly the professional conduct of the trainee’s interaction with the operative team and the completion of appropriate documentation are assessed.

## **Feedback**

In order to maximise the educational impact of using MOUSEs, you and the trainee need to identify agreed strengths and areas for development. This needs to be done sensitively and in a suitable environment. Feedback is best given immediately after the assessment.

### **After the assessment and feedback**

- You must sign and date the assessment form.
- Your responsibility for assessment form will have ended at this point unless a discrepancy arises with a rating, which you may be asked to verify.
- Trainee evaluations will be collated so that they build into an overall profile that can be added to the trainee's portfolio. The overall profile will inform the trainee's training progress. It will also be part of the feedback for ongoing development.
- At the end of the placement it is the trainee's responsibility to have acquired the required number and type of MOUSEs specific to their learning needs.

## **MOUSE – Notes for TRAINEES**

### **Who can you ask to assess you?**

You are required to undertake a minimum of One MOUSE during each month of clinical assessment. Each assessor must be approved as a trained assessor (is a FRACS Paediatric Surgeon).

You will also find that it helps you learn to assess yourself. The structured checklist offers you the criteria against which you will be assessed. You need to reflect upon the meaning of each item in order to understand what is required of you. Self-assessment can help you determine any gaps in your understanding or ability which you can bring to discussion with your supervisor, mentors and consultants. To facilitate self-reflection on learning points you are to fill in a trainee MOUSE form as part of the assessment. You can use the form to record the feedback you have been given and/or your viewpoint.

### **What is the purpose of being assessed?**

MOUSE is designed to provide feedback that will help you improve your work performance. Therefore you should be assessed undertaking procedures normally expected of you in your usual working environment where you would normally do the procedure.

### **Which procedures will be applicable?**

It is important that you choose different procedures which cover the curriculum competences. Global templates of technical competency are available for you to determine the types of procedures you should be aiming to learn and achieve competency in during different levels of training.

At your initial meeting with your supervisor at the beginning of a six month period of clinical assessment you can discuss the procedures that you need to cover within your rotation to demonstrate the competence required or to address deficiencies previously identified.

### **When can you use MOUSE?**

MOUSE can be used every time you carry out a practical procedure. It can be used at any time of day or night. You can request more assessments than the required minimum as this provides you with more feedback to work with and more learning opportunities. MOUSE can also be used to demonstrate greater than expected competency.

Your supervisors, consultants and/or the Board of Paediatric Surgery may instigate more than the required minimum assessments if there are areas of concern.

### **Feedback**

In order to maximise the educational impact of using MOUSE, you and your Clinical Assessors need to identify agreed strengths and areas for development. It is essential that you reflect on this feedback and try to overcome any weaknesses through further dedicated learning, observation and practice (more MOUSE). You can discuss methods of doing so with your Clinical Assessor and other assessors.

### **After the Assessment and Feedback**

You sign to state your satisfaction with the process at the bottom of the form. This is about satisfaction with the process not with how you have done on the occasion of your assessment. You will be responsible for ensuring that all of the assessments are shown to your supervisor (as part of your training portfolio) and copies submitted to the Executive Officer so that the information can be included together with your reports pertaining to your 3 monthly assessments.