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**Foundation Training Year: Mini-CEX (mini-clinical evaluation exercise)**

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| **Title of mini-CEX** |  | **Date of mini-CEX** |  |
| **Trainee pharmacist** |  | **Stage of training**  **(in weeks)** |  |

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| **Please grade the following areas:** | **Below expectations** | **Meets expectations** | **Exceeds**  **expectations** | **Not Applicable** |
| **Delivery of patient care** | | | | |
| 1. Patient consultation |  |  |  |  |
| 2. Need for medication |  |  |  |  |
| 3. Medication choice |  |  |  |  |
| 4. Medicine specific issues |  |  |  |  |
| 5. Provision of medicine |  |  |  |  |
| 6. Medicines information and patient education |  |  |  |  |
| 7. Patient-centred approach |  |  |  |  |
| 8. Follow up / transfer of care |  |  |  |  |
| 9. Professionalism |  |  |  |  |
| **Problem solving** | | | | |
| 10. Gathering information |  |  |  |  |
| 11. Knowledge |  |  |  |  |
| 12. Analysing information |  |  |  |  |
| **13. Overall clinical care** |  |  |  |  |

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| Summary of case: (to include date of patient intervention, clinical setting, patient type, focus of encounter and complexity of case) | |
| What went well? | Suggestions for development: |
| Agreed action (SMART: Specific, Measurable, Achievable, Realistic and Timely): | |
| Trainee pharmacist reflection: | |

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| Name and Signature of supervisor: |  | Date |  |
| Position of supervisor: | Designated supervisor / Practice or Clinical supervisor | | |

NB: This Assessment tool must be mapped by the trainee pharmacist to the [GPhC Foundation Training Year Interim Learning Outcomes](https://www.pharmacyregulation.org/education/pharmacist-foundation-training-scheme/foundation-training-year-2021-22) and the [HEE Foundation Training Year Assessment Activities Guide](https://www.hee.nhs.uk/our-work/pharmacy/trainee-pharmacist-foundation-year-programme) when submitting it on the e-portfolio.

Grading advice and prompts are included on page 3.

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|  | **Criterion prompts** |
| **Grading advice** | Meeting an expectation is based on professional experience and judgement and so will be subjective to each supervisor. The supervisor should explain their rationale for their decisions to the trainee pharmacist.  ‘Not applicable’ should be used if there was no opportunity for the trainee to demonstrate the criteria in the presenting scenario. |
| **Delivery of patient care** | |
| 1. Patient consultation | Gaining patient consent, conducting a patient-centred consultation, exploring the medical/surgical condition with the patient, considering the patient’s own health beliefs, being aware of personal limitations and making appropriate referrals. |
| 2. Need for medication | Establishing the patient’s background, taking a medication history, and gaining the necessary information from a range of sources in order to decide on the appropriateness of drug therapy. |
| 3. Medication choice | Appropriate consideration of evidence-based medicine and drug interactions (drug-drug, drug-disease, drug-patient), and patient preference, appropriate application of guidelines such as the formulary, therapeutic switching policies, etc. |
| 4. Medicine specific issues | Checking that the medication is prescribed correctly (route, formulation, dose, frequency, course length) and considering available results and what effect they have on drug therapy, e.g. U&Es, LFTs, etc. |
| 5. Provision of medicine | Employing an effective system for the supply of medicines |
| 6. Medicine information and patient education | Provision of medicines and health advice, using evidence-based resources, to patients, carers, other pharmacy staff, medical and nursing staff, and other healthcare professionals. |
| 7. Patient-centred approach | Holistic approach taken to a patient care, considering of the patient's needs, lifestyle interventions, personal preferences and socio-economic issues Identification and prioritisation of medicines management issues. |
| 8. Follow up / transfer of care | Transfer of care issues / next steps in patient care and follow up; are considered and communicated |
| 9. Professionalism | Shows respect, compassion, empathy; establishes trust; respects confidentiality; behaves in an ethical manner; awareness of legal frameworks; awareness of limitations, time management. |
| **Problem solving** | |
| 10. Gathering information | Accessing and summarising the information required and ensuring the information used is up to date. |
| 11. Knowledge | Knowledge of pathophysiology of common medical/surgical conditions encountered, pharmacology, side effects, drug interactions, licensing of medicines. |
| 12. Analysing information | Demonstrating the ability to evaluate information gathered (reliability of source, relevance to patient care), correctly identifying the problem, appraising options, making appropriate decisions, and demonstrating a logical approach. |
| **13. Overall clinical care** | **A rating that summarises all the above in terms of outcome for the patient.** |