

This is a Summary document - for further detail please refer to the Guidance Document

How does an rDO differ from a normal DO?

1. The ME will observe remotely using a live streaming platform- Zoom.
2. Assessor may be observing the participant engaging in telehealth.
3. Assessment of competency is still made based on direct observation of consultations whether observed face to face or telehealth/telephone consultation.

Remote Direct Observation (rDO) suggested schedule

15 minutes	Before the rDO; The assessor and participant should have a ‘practice run’ on Zoom prior to the visit to ensure that the technology works for both
Remote direct observation visit	
15 minutes	Brief meeting with the participant (introductions; discuss purpose of the visit and if there are any particular things the participant would like the assessor to focus on)
30 minutes	Consultation patient one and feedback
30 minutes	Consultation patient two and feedback
30 minutes	Consultation patient three and feedback
30 minutes	Consultation patient four and feedback
60 minutes	Random case analysis of two cases, discussion and feedback and/or
60 minutes	Case-based discussion of two selected cases and feedback

How will the remote direct observation work?

1. The assessor must liaise with the participant prior to the visit re the live streaming platform- Zoom- and to discuss internet access/availability. See notes as to how to access Zoom securely.
2. The assessor must send a meeting link for the rDO to the participant via the MCCC zoom account. This is to be done before the rDO visit date, when both the assessor and participant agree on an rDO date.
3. The assessor and participant must have a ‘practice run’ on Zoom prior to the visit to ensure that the technology works for both. This should be done before the rDO and not on the same day.
4. Ensure that both the assessor’s device and participants device are fully charged and/or plugged in during the rDO.
5. The assessor needs to be in a private place during the remote visit to maintain confidentiality and to ensure no interruptions.
6. The participant may need a phone tripod to place their phone/iPad so that the observer can see both the registrar and the patient.

7. If telehealth is being conducted by the registrar (and it is *recommended* – but dependent on circumstances-that no more than 1-2 consultations are to be conducted by telehealth during the visit), the phone consultation needs to be on speaker phone, or if via videoconferencing in a way that the assessor can both see and hear the consultation.
8. When RCA is used, the participant will need to turn their device so that the assessor can view the clinic screen/patient notes/appointment book unless the clinic has approved Zoom to be downloaded onto the clinic desktop.

Format

Ensure that the registrar introduces you as the observing assessor before each consultation and that verbal consent is confirmed. Patients will have signed a rDO consent form if attending the consultation. If they have booked for a telehealth consult, they will have had verbal consent recorded at booking or returned a signed emailed rDO consent form.

Clinical case analysis: RCA and CBD

1. The assessor should check that the participant has ascertained from their clinic as to whether they can download Zoom onto the clinic desktop in order to allow screen sharing for RCA before the visit. The clinic must give pre-approval and the registrar should download BEFORE the visit.
2. If the clinic has not approved the download of Zoom onto the clinic desktop, then the assessor will have to see the desktop/appointment book/notes via the livestream for RCA.
4. Clinical case analysis which consists of Random case analysis (RCA) and / or Case based discussion (CBD) is to be incorporated into the rDO. RACGP prefer RCA to be part of the work-based assessments compared to CBD.
5. Case based discussions may be part of the rDO visit or alternatively the assessor can schedule a separate ZOOM meeting between the participant and the assessor to complete the CBD's.

Feedback and reports

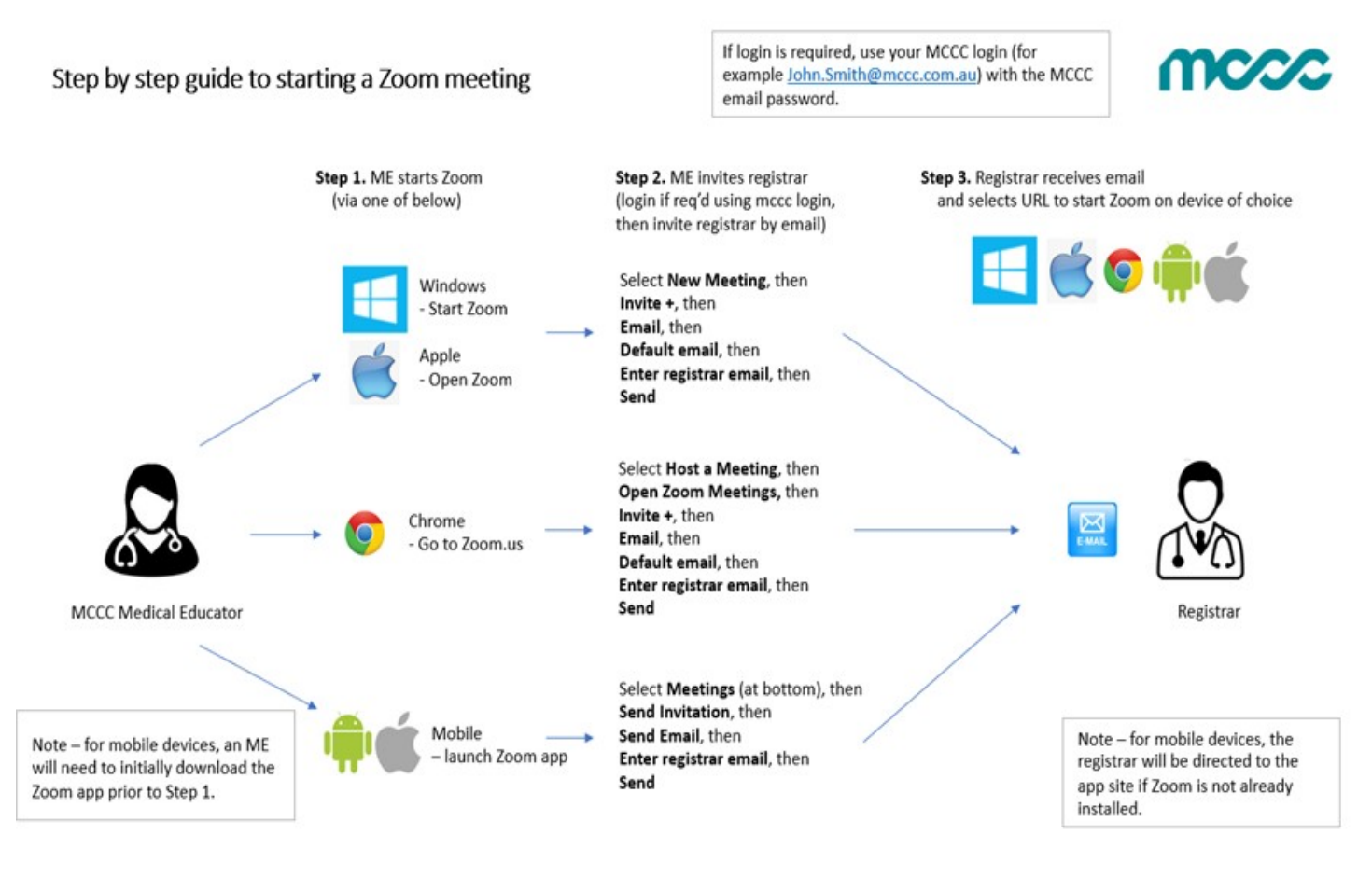
You will give immediate feedback verbally after each consultation to the participant. You will also complete a written report summarising your discussions via the RACGP portal

Summary – rDO Processes for Assessors

Appendix

Zoom

Zoom is free to sign up and should be via the MCCC email account.



Summary – rDO Processes for Assessors

RCA by Zoom

Option 1

The Zoom meeting organized by the assessor continues and the registrar turns the device so that the assessor can see the desktop/appointment book/patient notes.

Option 2

The participant will need to have received pre -approval from the clinic and should have downloaded Zoom on the clinic desktop prior to the visit. The live stream meeting to observe consultations will need to close. The assessor needs to invite the registrar as above to a new meeting via Zoom which the participant opens on the desktop and then the participant can screen share the notes/appointment book. If RCA is occurring between booked consultations then following RCA completion, that meeting will again have to close, and the ME open a new meeting and invite the registrar in on their device to allow the livestream. Why? If more than 2 devices are on a Zoom meeting, it will shut down after 40 minutes.

Should you have any problems, please email helpdesk@mccc.com.au