The E-portfolio
adapted from ‘e-portfolio pearls’

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Outline

- Part One
  - WBPA
  - E-portfolio & Access
  - Using the E-portfolio
  - Pearls.....

- Part Two
  - Assessments in ST1
  - Learning log examples
  - PDP log examples
  - How to produce a good learning log / PDP
    - What is reflections...??

- Any questions?
MRCGP

• Three components
  • Applied Knowledge Test (AKT)
    – 3 hour computer based multiple choice test
  • Clinical Skills Assessment (CSA)
    – Simulated surgery of 13 patients
  • Workplace Based Assessment (WPBA)

– All test different skills
WBPA

• 12 Professional competences
  – 1 Communication and consultation skills
  – 2 Practising holistically
  – 3 Data gathering and interpretation
  – 4 Making a diagnosis/decisions
  – 5 Clinical management
  – 6 Managing medical complexity
  – 7 Primary care admin and IMT
  – 8 Working with colleagues and in teams
  – 9 Community orientation
  – 10 Maintaining performance, learning and teaching
  – 11 Maintaining an ethical approach
  – 12 Fitness to practise
• 12 Professional competences
  • Assessment tools:
    – Case-based discussion (CbD)
    – Consultation Observation Tool (COT)
      » Or Mini CEX in hospital posts
    – Multi Source Feedback (MSF)
    – Patient Satisfaction Questionnaire (PSQ)
    – Direct Observation of Procedural Skills (DOPS)
    – Clinical Supervisor Report (CSR)
What is the E-portfolio?

- Evidence for WPBA collected in E-portfolio over 3 years of training.
- Used for 6 monthly reviews with CS and ES
- At final review, used to make judgement of readiness of GPStR for independent practice
- **As important as formal assessments!**
- Provides feedback to GPStR & drives learning
How do I get one?

• Need to register with RCGP & become an Associate in Training (AiT) to get access
  • Register online (www.rcgp.org.uk/ait)

• Other benefits of being an AiT
  • Innovait journal
  • NPEP access

• Helpline
  • Email ait@rcgp.org.uk
  • Telephone (020) 7344 3078
What is the ARCP panel?

- All e-portfolios are reviewed (PMETB requirement)
  - Is this a safe Dr?
  - Are they competent?
  - Are they good at dealing with people?
  - Is (s)he open and honest?
  - Does (s)he continuously reflect & learn?
  - And, is (s)he a Dr I’d be comfortable seeing?
Some pearls

1. Where to put what in learning log?
2. Make it relevant for you
3. Record at 2 levels: general & specific
4. Recording feelings is good
5. Try and write in natural style
6. Visit e-portfolio regularly
7. Quality not quantity
8. Use PDP effectively
9. Make sure you do more than minimum number of assessments
10. Don’t miss sessions with Educational Supervisor
1. Where do I put what?

<table>
<thead>
<tr>
<th>Clinical Encounters</th>
<th>PUNs &amp; DENs, Case analyses, case reviews, any external clinical sessions attended, eg. OPD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Professional Conversations</td>
<td>Educational supervisor meetings, feedback/appraisal on day to day basis, discussions on health related topics or related to attitudes, skills or organisational management</td>
</tr>
<tr>
<td>Tutorials</td>
<td>Half-day release, tutorials in practice, consultation skills tutorials, tutorials on non-clinical stuff, ie. IT training</td>
</tr>
<tr>
<td>Audits/Projects</td>
<td>Audit, research/academic activity, any work linked to QOF</td>
</tr>
<tr>
<td>Significant Event Analysis</td>
<td>Reflection on significant event</td>
</tr>
<tr>
<td>E-learning modules</td>
<td>Record e-learning sessions (good ones – BMJ Learning, RCGP EGP Updates, GP Notebook GEM’s &amp; Doctors.net)</td>
</tr>
<tr>
<td>Reading</td>
<td>Books, papers, protocols, articles on web, filma, plays etc.</td>
</tr>
<tr>
<td>Courses/Certificates</td>
<td>Life support courses, Deanery led courses, eg. Child Health surveillance, mock CSA courses, external courses</td>
</tr>
<tr>
<td>Lectures &amp; seminars</td>
<td>Protected learning time events, eg. In-house education, lectures in hospital setting, seminars</td>
</tr>
<tr>
<td>OOH sessions</td>
<td>Document all sessions (note not extended hours)</td>
</tr>
</tbody>
</table>
2. Make it relevant for you

- Include anything that is useful for you
  - Useful tips
  - Protocols
  - Local guidelines
  - Aide-memoire
  - Clinical conundrum
  - Patient encounters that were difficult
  - Difficult encounters with staff
  - Things that went well etc..

- Aim to shift focus towards primary care
3. Record information at 2 levels

• General
  – entries may satisfy ARCP panel but of little educational use

• Specific
  – Makes you reflect on what you have actually learnt
  – Useful log to refer back to in future
4. Recording your feelings

- Not just facts
- How a case makes you feel,
  - eg. angry, anxious, frustrated - important for development
- Otherwise, may make mistakes again and again
- Don’t swear/slag off colleague (unprofessional)
- Remember to record good events/feelings too
5. Write in your natural style

• Shows people what you are like as a person

• Easier for you to use
6. Visit e-portfolio regularly

- Find method of logging in and updating that suits you
- Helps you to become more familiar with it
- If all entries added at last minute, how does it look to ARCP panel?
- Remember to regularly check curriculum coverage
- Topics usually more difficult to cover:
  - IM & T
  - Learning difficulties
  - Evidence based medicine
  - Palliative care
  - Genetics
7. Quality not quantity

- Suggestions:
  - Each week
    - 1 clinical encounter
    - 1 professional conversation
    - 1 tutorial
    - 1 reading entry
    - 1-2 seminars
  - Each year
    - 5 SEA’s
    - 1 audit
    - 4 courses

- That’s 190 entries (or 23 pages) a year
8. PDP

- Draw PDP from learning log entries when learning need/weakness identified
  - Shows ARCP/ES that reflecting!

- Get in habit of sending log entries to PDP – makes life easier

- **SMART** entries:
  - Specific, Measurable, Attainable, Relevant, Time bound.
9. More than minimum

• In case some do not reach criteria, eg. poor quality feedback given

• Try to do regularly if possible
  – Shows progression
  – Avoids mad panic at end of job!

• If problems getting then done, speak to clinical supervisor/GP trainer
10. ES sessions

• Essential for you to progress to next stage

• Organise early:
  – Contact at start of ST1
  – Then for ST1-1 review (normally January)
  – The ST2-2 review (normally May)
    • This is before the end of year ARCP Panel review!
One last pearl…

• Discuss with other ST1/2/3’s:
  – Hints/tips
  – Problem-solve together
  – Short-cuts

• If in doubt, speak to ES/hotline/TPD
BREAK
Learning log entries

• For each entry, select most appropriate curriculum headings from list........
Good learning log entry

• ‘How to produce a good learning log’ RCGP document

• A good log entry shows good reflection, i.e. insight into how you are performing & learning from experience

• A good entry should show:
  – Evidence of critical thinking & analysis
  – Self-awareness – openness & honesty about performance, with consideration of your feelings
  – Some evidence of learning
Learning log examples
PDP entry example
Useful resources

- RCGP E-portfolio for GP Speciality Training – A Guide for Trainees (RCGP website)
  - Dummy e-portfolio
    - Login: traineea
    - Password: rcgp

- www.bradfordvts.org.uk
  - Lots of useful advice including e-portfolio pearls

- www.gp-training.net
  - Another website with useful advice

- www.nottm-vts.org.uk
  - Walk-through guide to e-portfolio
Any Questions?