

How to get the most out of the ePortfolio

A guide for medical trainees



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Introduction

The ePortfolio may seem quite daunting early on with the array of presentations and assessment forms. You may already be well versed in use of similar systems as part of your foundation year training. However, the following are a few tips that will hopefully help you to make best use of the ePortfolio. Although this is written with the CMT trainee in mind, many of the general principles can be applied to higher levels of training (ST3+) or translated to other specialties (BST, ACCS).

Getting Started

- Try to acquaint yourself with the various sorts of work-based assessments (WPBAs) early on. You should receive information at the start of CMT with regard to each of these and we would recommend attending ePortfolio training sessions if available to you.
- Familiarise yourself with the relevant curricula - Generic and GIM(Acute Medicine) - and identify which areas you are expected to achieve by the end of each training year. Try to tie this in with the number of assessments you will need to achieve in this period. The latter will usually be detailed in an 'ARCP Decision Aid' document which your programme directors will use at each ARCP to assess whether you are progressing adequately.
- The focus areas used to structure the Generic curriculum are not all that self explanatory (e.g. good note keeping comes under team working and patient safety), so it is a good idea to read the fine print in the sections of this particular curriculum.
- All curricula can be downloaded from the JRCPTB website under 'specialties'.

The Personal Development Plan (PDP)

- The personal development plan places the onus on you to set the targets you wish to achieve at each stage of the training year/ in each of your medical posts.
- Try to be specific and realistic in your targets by referring in your PDP to precise areas of the curricula.
- The curriculum for CMT/ACCS (medicine) is helpful in stating a list of objectives for each of the medical specialties, which you can aim to achieve as you move from one specialty to the next.
- Identify the work based assessments that will allow you to show that you have achieved these goals. Also think laterally in terms of courses, conferences and personal study.
- Other aspects to cover in your PDP include: planned courses e.g. ALS; Exams (MRCP); Audit and Research projects; clinic experience; membership of organisations (e.g. BGS if you are a budding geriatrician).

Assessments

- If you know your posts for the next two years, then try to identify which of the presentations you are likely to encounter in each, as well the procedures you may get a chance to perform. You can then use this to target your assessments e.g. if you are soon to move to Respiratory, there is little to be gained from using the assessments in your Renal post to demonstrate experience in presentations such as dyspnoea and cough.
- Some assessments lend themselves to demonstrating particular competencies. DOPS for procedures, CbDs for presentations (Acute level 1 Competencies), ACAT for the acute presentations e.g. shock/ cardiac arrest.
- Be selective in the cases you use for CbDs/ mini-CEX. If you have several possible cases in mind to use for assessments, choose one that reflects the breadth of experience you have gained i.e. maximises the presentations or generic skills encountered. If you feel you are seeing very similar presentations during your normal day to day ward work, look to your time spent on-call or on take.
- Presentations made at department meetings as well as patients seen and discussed in clinics are a good source for CbD assessments.
- On a registrar or consultant ward round, ask your seniors to observe you seeing a new ward patient, explaining management/ treatment options or breaking bad news. All of these can be used for mini-CEX assessment.
- With regard to MSF assessments, it is often better to use the "ticket" system to e-mail the details to assessors with a hyperlink to the online form (emails are not as easy to lose as paper requests). Keep a record of their email addresses as you may need to send a generic reminder if the response rate is a little on the low side.
- ACAT/ DOPS are easily discussed with seniors during a particular shift, but sometimes it may be difficult to complete the form online on the same day (especially after nights!). In these circumstances, it is often useful to take the e-mail address of your assessor who can then complete the form online at a time more convenient for them.
- Make use of occasions when you happen to be on-call/ on-take with senior members of your normal ward firm. Often they can make a better overall assessment of your skills.

General Aspects

- Keep a record of the teaching sessions attended and any other additional courses, presentations, exams undertaken. Staying up-to-date on the ePortfolio site makes it easier when it comes to ARCP.
- If you have concerns that your particular post is not allowing you to meet the objectives in your PDP, especially procedures, let your educational supervisor know early on.
- A little planning goes a long way. Good luck.

Summary

- Familiarise yourself with the curricula and the types of work based assessments early on.
- Include specific and realistic objectives in your PDP, and refer to the curricula where possible.
- Use the PDP to strategise how you will meet the objectives that you have identified (i.e. which WPBAs and when).
- Be selective in the cases/scenarios used in WPBAs to maximise the number of presentations/ competencies assessed.
- Try to be proactive in obtaining assessments where possible. ACATs/ DOPS can potentially be completed at a slightly later date (take down e-mail addresses of assessors and use the "ticket" system)
- If you have concerns that your posts are not allowing you to achieve your objectives, alert your educational supervisor early on.