



# Mastering the E-Portfolio

## What Is It?

The foundation programme e-portfolio is all about you providing evidence that you have met the specific outcomes – either to complete F1 and progress, or to complete F2 and finish foundation training. After each year you have an Annual Review of Competency Progression (ARCP) which will assign you an outcome. After successful completion of F2 you will receive a Foundation Achievement of Competence Document (FACD) which allows you to enter specialty training.

## ARCP Outcomes

Depending on how things have gone during the year, or how your portfolio looks, you may encounter different ARCP Outcomes. These outcomes are used across both years:

1. Congratulations! You've passed F1 and are ready to move into F2.
2. (not used)
3. Inadequate Progress – you need additional training time.
4. Released From Training Programme – Bad. Times.
5. Incomplete evidence.
6. Congratulations! You've passed F2 and will be getting your FACD.

Essentially – 1 and 6 are pass outcomes. 3 means you need more rotations (anywhere from one to three). 5 means you're missing some bits and pieces on your portfolio, often you can submit the extra evidence to convert it to a pass outcome. Finally 4 means you've been kicked-out of the foundation programme.

## Assessments

Depending on which foundation school, trust or hospital you're in your requirements for assessment quotas and spread across the years may be different. You may also have to have certain numbers completed by a consultant. Assessments are often completed by you sending "tickets" (i.e. request messages) to people via email through the e-portfolio system.

Below are some general guides for each one:



### Mini-CEX

Mini Clinical Examination. Get together with a senior (normally ST3+) and take a history, perform an examination, put together a plan and present a case. Admissions wards, A&E or clinics are great places to get these done as you would be presenting your patient to a senior anyway!

### CBD

Case-based Discussions. We've found different seniors do these differently, but a common way is to ask you to prepare one or two patients and bring them along to discuss them. Often you will be asked questions to test your knowledge and identify learning requirements, but they usually end up in a two-way discussion which is fantastic to improve your knowledge in a certain field.



## DOPS

Directly Observed Procedural Skills. Essentially what it says on the tin – everything from communication skills to suturing! These are particularly useful for demonstrating your interpersonal skills, teamworking, leadership etc.

## TAB

Team Assessment of Behaviour. This may also be referred to as an MSF (multi-source feedback). You need to send out tickets from the system to all the different people in your team to get feedback on your performance. This will include everyone from consultants to nurses, physiotherapists, pharmacists, porters. Our advice would be to get these done early-on as people can sometimes be difficult to track down to fill everything in. It is better if you request more responses than you'll need so it's not a scramble at the end!



## Who Can Help Me?

You will find you send most of your tickets towards more senior doctors, however there is definitely scope for mixing things up a bit. Think about who can best illustrate your skills – the senior nurse who comes with you to deliver bad news will have first-hand experience of what you're like, the pharmacist who helps you prescribe will give great feedback on how that is going! Take advantage of mandatory training to fulfil some outcomes or use F1/F2 courses as an opportunity to demonstrate skills to experts (e.g. chest compressions, airway management in ILS or ALS).

The best "assessment etiquette" is to ask for the assessment before seeing the patient – occasionally you will need to be opportunistic, but it's definitely handy for the assessor to know they should be assessing you! Also, spread your tickets out between people and throughout the rotation to avoid anyone having a backlog.



Many foundation doctors find it difficult to ask for assessments – wards are busy and people will need to take time out to help you. Sometimes you will need to chase people to fill in assessments for you and you might feel like this is annoying people. Rest assured we've all felt like a nuisance at some point trying to get the final TAB ticket done – but without it you might not pass F1 or F2, might miss out on your specialty training post, won't progress in your career. In the long run, being annoying for an hour is better! And all trainee doctors need assessments so should understand what it is like.

## Other Sources of Evidence

Besides the assessments listed above, e-portfolios can include e-learning, reflections, certificates, presentations – pretty-much anything! If it's unclear why something is linked to an outcome then you can add comments in the portfolio to illustrate why something is where. If you've won a basketball competition or single-handedly rowed the Atlantic then throw that into your "Additional Achievements" section and link it to show your skills – there are lots of ways to show you are good in a team.



## Argh! How Do I Fix My Portfolio? I've Only One Week Left!

Trying to keep the ward running whilst trying to fix your portfolio will be no fun, but all is not lost. The sooner you realise that you're not on track the better - get in touch with your clinical supervisor, educational supervisor or foundation programme tutors. Be up-front and honest, acknowledge that you probably should have done better and be pro-active in rectifying the situation. Do you have a zero-day that you could allocate to coming in and sorting assessments? What about a weekend? Are there any extra reflections or e-learning that could be done to strengthen a particular outcome?

Fundamentally, if everything is a huge disaster it is better to fail honestly than to bend rules to meet foundation outcomes – there is always next year!

Finally, our experience is that your supervisors and foundation team will bend over backwards trying to help you get things sorted provided you show you are willing to work hard yourself. No-one wants to let you fail!



# Remember To Start Early!

The Medisense Team