

Portfolio Assessment

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Steps in Portfolio Assessment



- Documentation of evidence of achievement of learning outcomes.
- Reflection on learning
- Evaluation (assessment) of evidence
- Defence of the evidence
- Assessment decision



Evaluation of evidence:The assessment criteria

1. Adequacy of evidence (coverage of all learning outcomes/content and quantity)

2. Reflective ability

3. Quality of evidence

Portfolio Component

Outcome Assessed

Patient presentations

Most (clinical skills, patient investigations & management, health promotion, information management, communication skills, knowledge, attitudes, higher order thinking, role of the doctor, professionalism)

Case discussions

Application of knowledge

Procedures; e.g. DOPS

Practical procedures

Ward ratings; e.g. Mini-CEX

Most

Elective report

Variable but personal development important

Personal skills (Independent,

Research project

learning, self management, time keeping)

Research skills

MCQ marks

Knowledge

Additional material selected by student Variable

Assessment of coverage



Map the evidence in each section to the portfolio outcomes/competencies

	Clinical skills	Patient manage -ment	Teamwork and leadership	Communication skills	Profession- alism & CPD
Introduction				\checkmark	✓
Pt. present.		\checkmark		\checkmark	✓
Case disc.		\checkmark			✓
Procedures	\checkmark	\checkmark	\checkmark	\checkmark	
Pt. consult's	\checkmark	\checkmark		\checkmark	✓
Research			\checkmark	\checkmark	✓
Elective			\checkmark		✓
Teaching			\checkmark	\checkmark	\checkmark
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Evaluation of evidence:The assessment criteria



1. Adequacy of evidence (coverage of all learning outcomes/content and quantity)

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Reflection



Evidence for learning / change of practice

What was the event?

Concrete experience

Active experimentation

How can I learn?

Reflective observation

What did I learn?

Abstract conceptualisation

What more do I have to learn?

Reflection: an example



- 1. What was the learning event? A patient who was on entanercept (an immunosuppressive drug) sought advice on travel vaccination for YF.
- 2. What did I learn? There are no resources for these types of patients. I did not know to advise either.
- 3. What more should I learn? Need to learn more about the indications and contraindications for vaccination for immunocompromised patients.
- 4. How can I learn it? Contact BSR (British Society for Rheumatology).
- 5. Evidence for learning: Patient was advised not to have the vaccine unless drug is stopped for 3/12; developed a patient guide.

Assessment criteria for reflective ability



- 1. What is the learning event?
- 2. What did I learn?
- 3. What more do I have to learn?
- 4. How do I learn it?
- 5. Evidence for further learning / change of practice?

1. Descriptive

2. Analytical

3. Evaluative

Rating

Reflection at 'descriptive' level



- 1. What was the learning event? A patient who was on entanercept (an immunosuppressive drug) sought advice on travel vaccination for YF.
- 2. What did I learn? There are no resources for these types of patients. I did not know to advise either.
- 3. What more should I learn? Need to learn more about the indications and contraindications for vaccination for immunocompromised patients.
- 4. How can I learn it? Contact BSR (British Society for Rheumatology).
- 5. Evidence for learning: Patient was advised not to have the vaccine unless drug is stopped for 3/12; developed a patient guide.

Reflection at 'analytical' level

- 1. What was the learning event? A patient who was on entanercept (an immunosuppressive drug) sought advice on travel vaccination for YF. Either the patient has not been given this information or he/she has forgotten.
- 2. What did I learn? There are no resources for these patients, due to lack of simple advice, and/or due to conflicting advice. I did not know either.
- What more should I learn? Need to learn more about the indications and contraindications for vaccination for immunocompromised patients, as this will enable providing clear, simple advice.
 How can I learn it? Contact BSR (British Society for
- 4. How can'l learn it? Contact BSR (British Society for Rheumatology). Other resources are journals, internet.
- 5. Evidence for learning: Advised not to have the vaccine unless drug is stopped for 3/12; developed a physician guide, as this would cover other similar related advice.



Evaluation of evidence:The assessment criteria

1. Adequacy of evidence (coverage of all learning outcomes/content and quantity)

2. Reflective ability

3. Quality of evidence

Portfolio entry: an example...

- 1. What was the learning event? A patient who was on entanercept (an immunosuppressive drug) sought advice on travel vaccination for YF.
- 2. What did I learn? There are no resources for these types of patients. I did not know to advise either.
- 3. What more should I learn? Need to learn more about the indications and contraindications for years for immunocompromised patients.

 Rating
- 4. How can I learn it? Contact BSR (British Society for Rheumatology).
- 5. Evidence for learning: Patient was advised not to have the vaccine unless drug is stopped for 3/12; developed a physician guide.

Portfolio entry: an example...



TRAVEL ADVICE

Only 2 live attenuated viruses, yellow fever and polio, are used regularly for foreign travel.

Yellow fever - this must not be given. Patients should be advised not to travel to countries requiring this e.g. mid-Africa. If the patient has to travel, an exemption statement may be accepted but the patient will be at risk.

Polio vaccine - the live oral vaccine must not be given.

Killed inactivated vaccine can be given but may need to be obtained from abroad so adequate notice must be given.

Typhoid - the live form should not be given. Killed vaccine

is available but only 70% protective.

Inactive viruses can be given e.g. Rabies, Anthrax, Cholera Nague.

Learning



Evaluation of evidence: The assessment criteria

- 1. Adequacy of evidence (coverage of all learning outcomes/content and quantity) Is the blueprint adequately covered?
- 2. Reflective ability

 Are the stages of the reflective cycle addressed at a descriptive, analytical or evaluative level?
- 3. Quality of evidence Is the submitted evidence for learning of expected quality?



Tool to assess criteria

	Very poor	Poor	Average	Good	Very good
Coverage	Single LO/ content area	Few LOs/ content areas	Adequate LOs/content areas	Many LOs/ content areas	All possible LOs/content areas
Quality of evidence	No evidence	Inadequate or irrelevant	Adequate & relevant	Adequate & relevant with refs	Adequate & relevant with justification
Reflective ability	All stages of cycle not addressed	All stages addressed, but not linked	At a descriptive level	At an analytical level	At an evaluative level



Thank, you