



Factors Influencing GPSTP Engagement with E-portfolio

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HEEoE

 **Col du Tourmalet**
2115 m
Altitude : 840 m
Sommet à : 16.9 km

Moyenne de la pente : 4.5%



Aims

- To understand the roles of e-portfolios in medical education
- To identify barriers to trainee engagement
- Develop strategies for overcoming these barriers

What is NOT Covered

- Nuts and bolts of using e-portfolio
- How to conduct WPBA
- How to write reflective log entries

What is a Portfolio?

- Collection of evidence for a specific purpose
- Showcasing of abilities
- Repository for future reference
- Assessment Document
- Accreditation Document
- Appraisal and Revalidation Folder
- Job Application
- Evidence of Personal and Professional Development

Portfolio Definition (RCGP, 2016)

- the modality for recording all workplace-based assessment (WPBA) and the “glue which binds the curriculum, learning and assessment

Defining Engagement

- Quantitative
 - Targets, minimum standards, amount of activity, etc.
- Qualitative
 - Motivation, commitment, connection, sense of belonging (London *et al*, 2007)

Background

- E-portfolio and tripos assessment for MRCGP
- Formative aspects – Reflective practice
- Increasing resistance reported by trainees
- Validity as a summative tool and engagement
- Normative reflection

Home

Personal Details

Messages (0)

Enquiries

Download

Summary

You have 0 unread messages

Summary

Learning Logs

Date of Last Log: 13/08/2018

You have 11 Unread logs

Log Summary

PDP

Date of Last PDP: 22/05/2018

PDP Summary

Home

Summary

Learning Log

PDP

Review Preparation

Evidence

Posts

Skills Log

Curriculum Coverage

Educators' Notes

Competence Areas

Progress to Certification

Downloads

Review Preparation

Current Review: ST3-1

End of Review: 30/11/2018

Evidence Summary

Posts

End of current post: 31/07/2019

Educational Supervisor:

Trainer(s) / Clinical Supervisor(s):

Summary

Skills Log

Date of Last:

Skills Log Summary

Curriculum Coverage

Summary

Educators' Notes

Date of Last Note: 18/07/2018

Summary

Competence Areas

Summary

Progress to Certification

Literature Review

- 13 Full papers reviewed
- Mixture of speciality and stage of qualification
- No studies of RCGP e-portfolio
- Thematic analysis
 - Learners
 - Supervisors
 - Environment
 - Portfolio

Learners

- Perceived value of portfolios
- Autonomy
- Competence

Supervisors



- Expertise
- Support

Environment

A close-up photograph of a white, fluffy dandelion seed head, which is the central focus of the image. The seed head is composed of numerous fine, white, feathery structures radiating from a central point. The background is a soft-focus field of green grass and leaves, creating a natural and serene atmosphere. The overall color palette is dominated by greens and whites, with a slight yellowish tint from the sunlight.

- Educational Setting
- Culture

Portfolio



- Structure
- Assessment

Identified Gaps

- Peer Influences
- Summative Assessment
- Quality vs Quantity
- Managerialism

Methods

- Social constructivist grounded theory study
- Interviewed 12 “low engaging” GPSTs
- Interviews transcribed
- >1000 initial codes revised and raised to focus codes
- 3 Theoretical categories developed through comparing data and sorting and diagramming memos

Theoretical Categories

- Deciding upon investment worth
- Developing and maintaining trust
- Conceptualising the e-portfolio

Deciding Upon Investment Worth

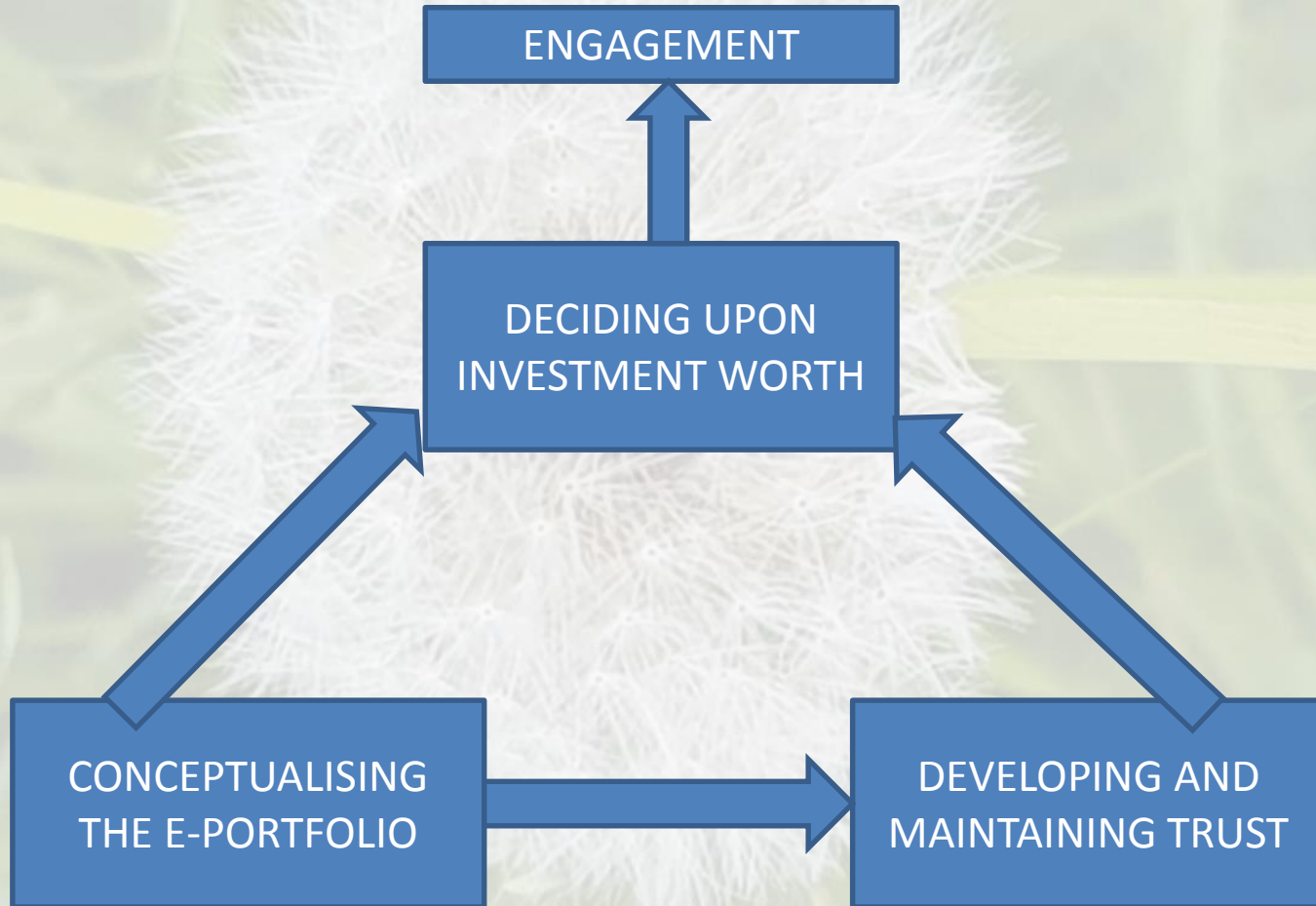
- Influence of socio-culturally dependent, cost-benefit decisions
- Costs
 - Time
 - Personal sacrifice
- Benefits
 - Perceived role
 - Educational methods utilised

Developing and Maintaining Trust

- Portfolio and wider environment
- Credibility of learning and assessment methods
- Variance between conceptualisation and experience

Conceptualising the E-portfolio

- Knowledge
 - Supervisors and trainees
 - Procedural, systematic, contextual
- Understanding
 - Purpose (Developmental, pastoral, managerial)
 - Ownership (Physical, intellectual)



Factors Enhancing Engagement

- Perception as a learning and development tool
- Supervisors who provide formative rather than evaluative feedback
- Supervisors who have good knowledge and understanding of e-portfolio and can identify opportunities for WPBA
- Peer organised informal learning groups utilising social media

Factors Hindering Engagement

- Perceived managerialism
- Incongruence of learning style and pedagogy
- Lack of trust, loss of ownership and loss of control
- Perceived value and investment required for reflective writing
- Varying expectations of different supervisors
- Focusing on quantity rather than quality
- Time, competing demands and AKT/CSA
- Portfolio rigidity
- Summative assessment

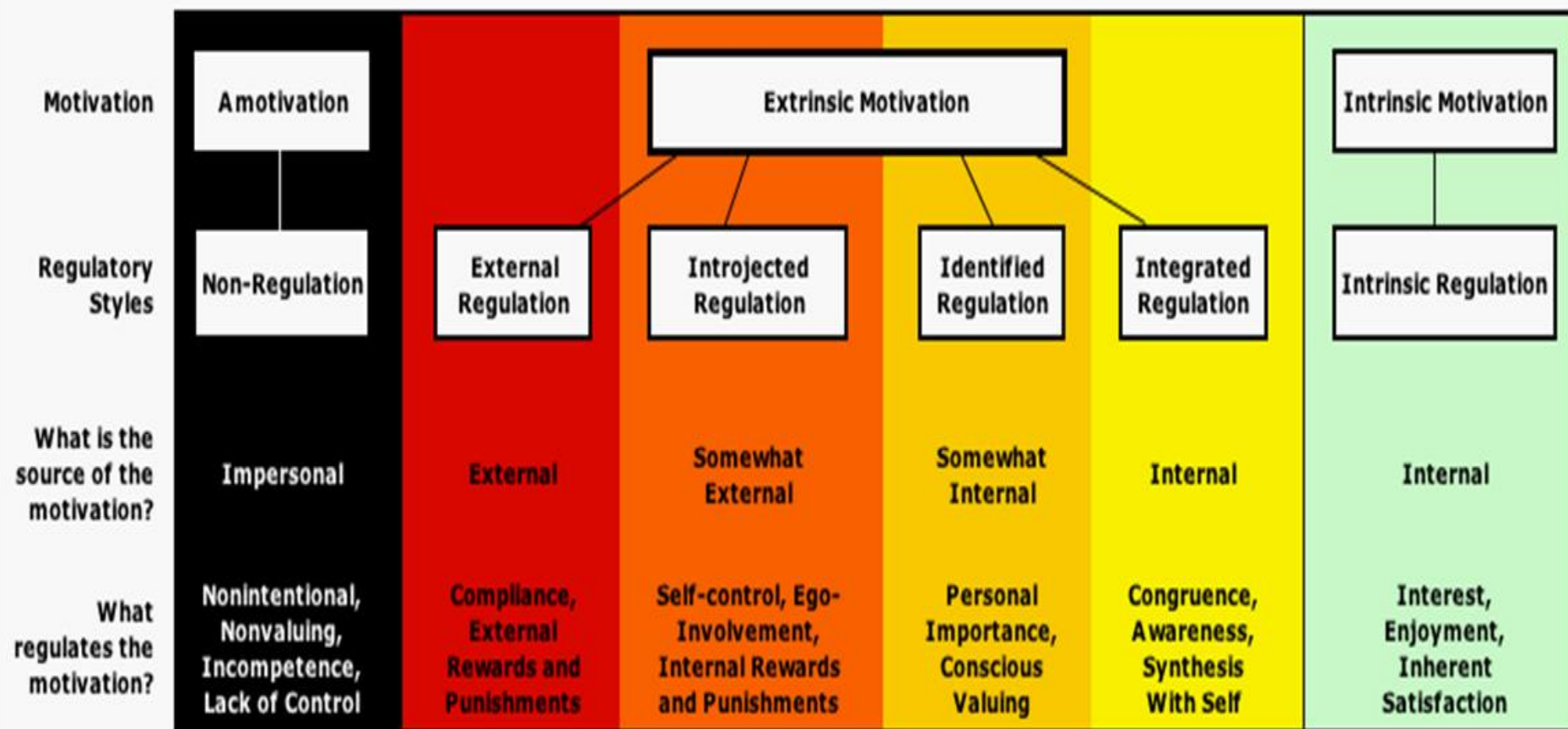
Motivation and Engagement

- Increasing one does not necessarily improve the other
- Both multi-faceted and context-dependent
- Engagement should be viewed qualitatively rather than quantitatively

The Self-Determination Continuum

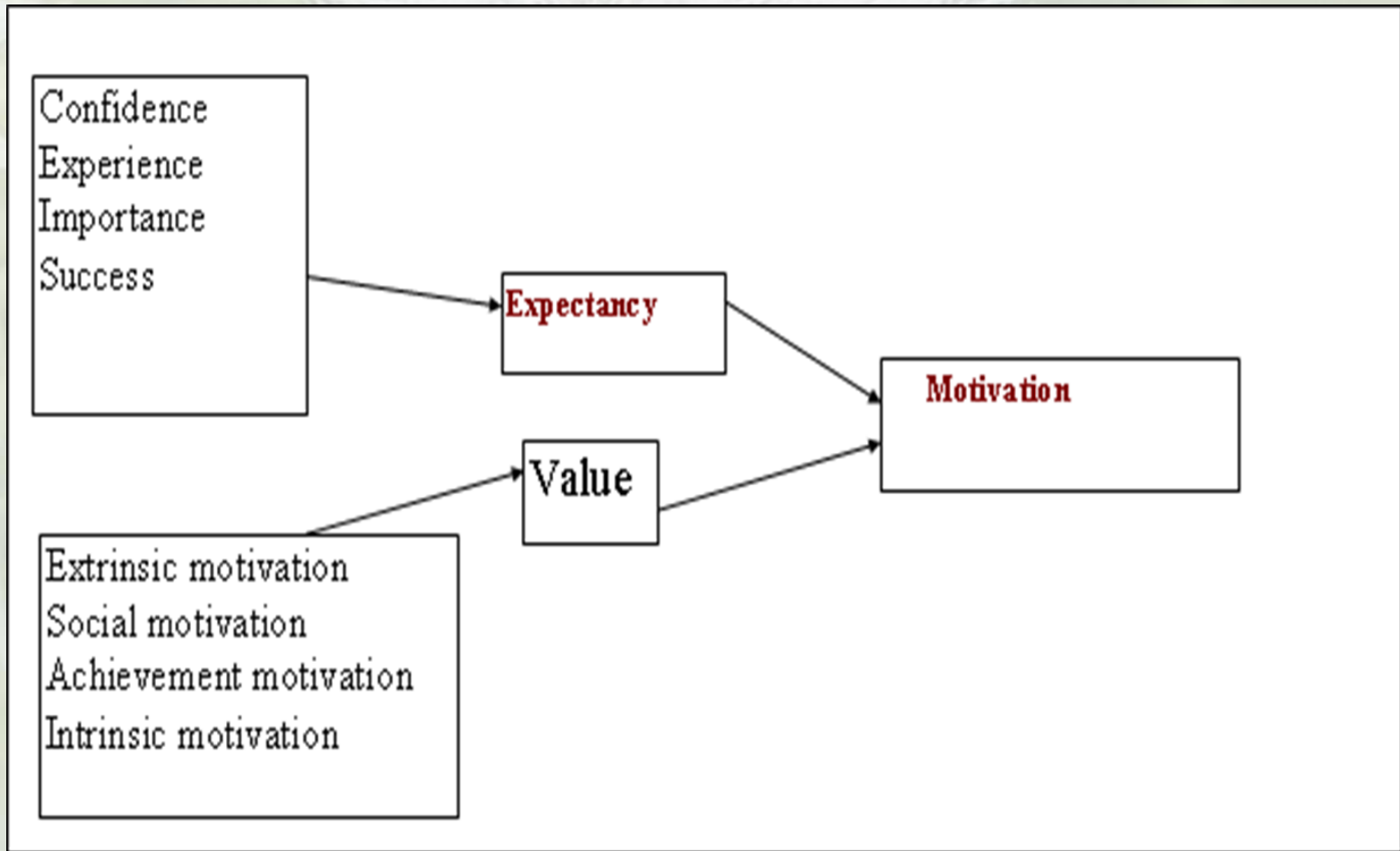
Nonself-Determined

Self-Determined



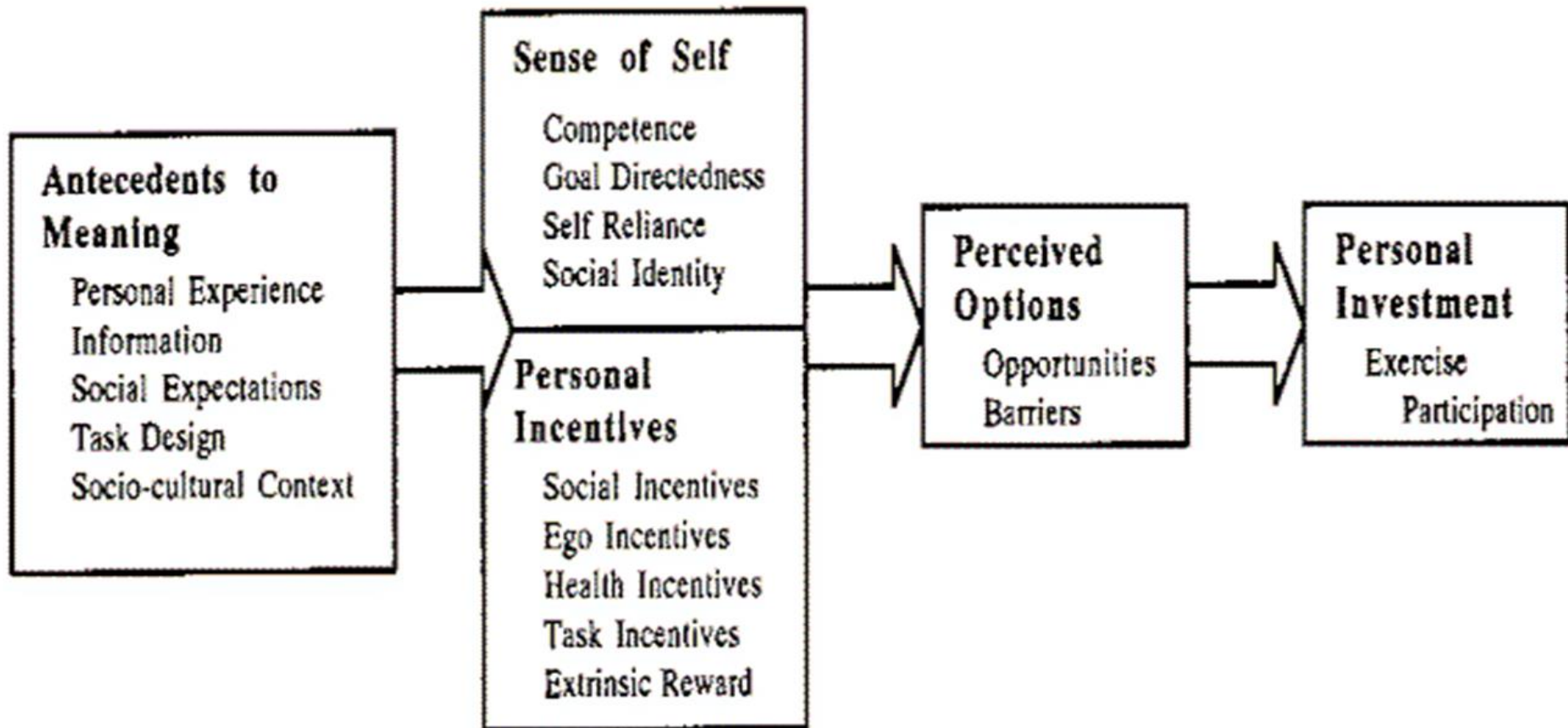
(Based on Ryan, R.M. & Deci, E.L. (2000). Self-Determination Theory and the Facilitation of Intrinsic Motivation, Social Development, and Well-Being. American Psychologist. 55(1), 68-78.)

Expectancy-Value Theory (Wigfield and Eccles, 2000)

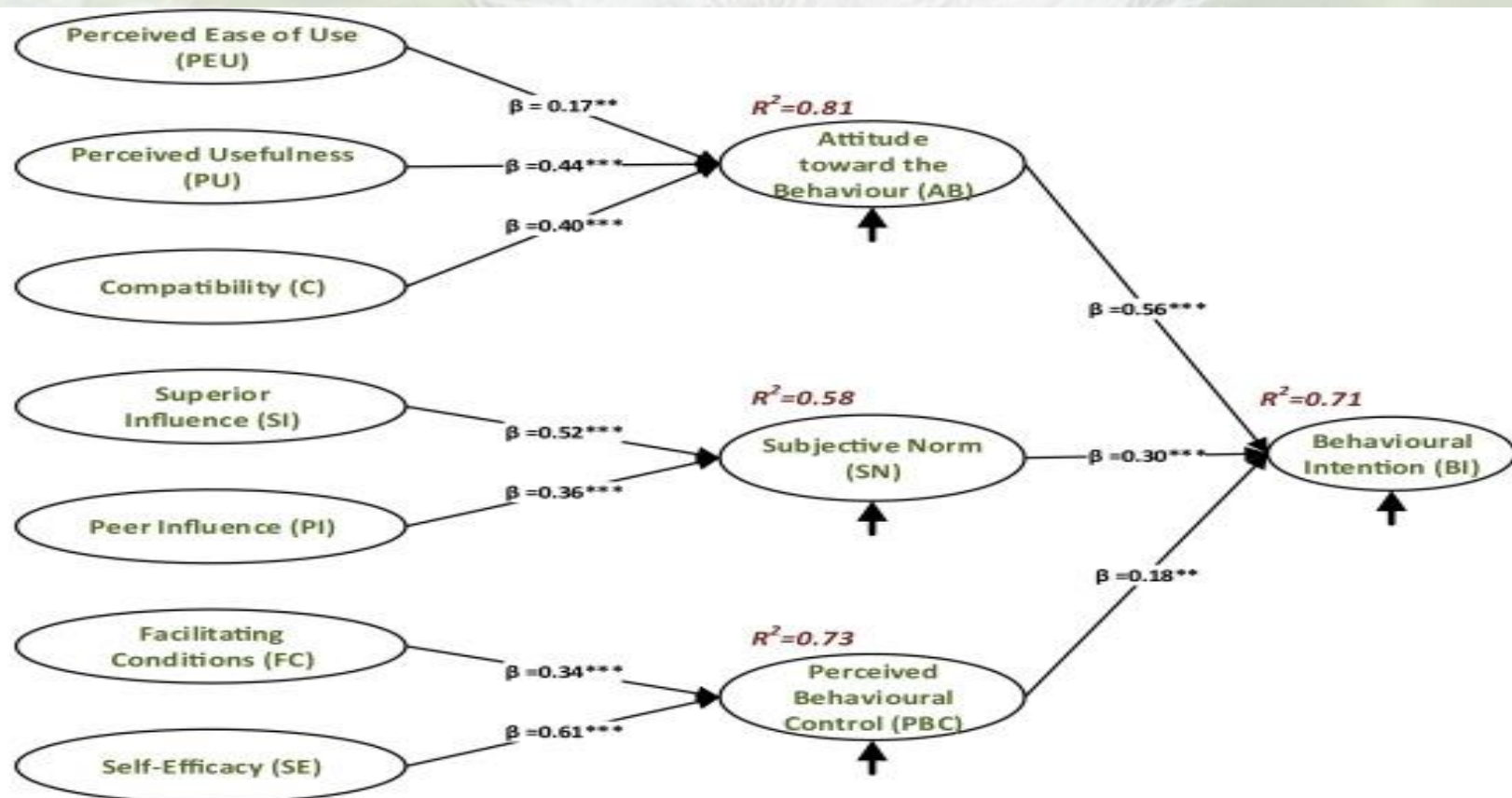


Personal Investment Theory (Braskamp, 1986)

FIGURE 1
Personal Investment Theory Framework and Constructs



Theory of Planned Behaviour (Ahmed and Ward, 2016)



Note: oval shapes represent a latent variables, arrows with β values represents direct effects, the bold errors pointing toward endogenous latent constructs represents error terms
 β = standardised coefficients, R^2 = squared correlations

** $p < .05$. ** $p < .01$. *** $p < .001$.*

For simplicity, the observed variables and their corresponding paths and errors have been removed from the figure

	Hospital Clinical Supervisors	Educational Supervisors	Training Programme	LETB	RCGP
Conceptualising the E-portfolio	Provide e-portfolio training at faculty group meetings.		Increase time at induction and throughout the programme spent on e-portfolio Harness peer support by providing formal sessions and encouraging social networking		
Developing and Maintaining Trust	Highlight importance of positive attitudes towards e-portfolio.	Calibration during trainers' workshop		Uncovering reasons for differing regional expectations and transparency of this.	
Deciding Upon Investment Worth	Practice assigning professional competencies at faculty group meetings	Encourage formative feedback rather than evaluative			Discussion regarding making the e-portfolio more flexible

Challenging Situations : Patient with an agenda

- We discussed this case in detail and the difficulties when dealing with a parent who is clearly very worried about his child. As discussed suggested trying to reassure dad that a throat examination wouldn't add anything or change your management plan would perhaps have been reassuring, and also taking a bit of time to look at the family dynamics in a bit more detail. We have looked at this child's notes together, and he is right to be worried about the number of consultations the child has had with respiratory illness. As suggested looking at the notes in detail during the consultation, reassures the patient/ parent that you are serious about the complaint and a shared plan for future can be more straightforward.

Hematospermia

- We dont always know and the issue of Patients's unmet needs and DRs educational needs comes in (PUNs and DENs)
The age of this patient is not reflected in this entry ? How did you then manage him ?

Subject title: Mental State Examination and Risk Assessment

- How will you risk assess a patient for suicidal risk in general practice?

Drug induced diabetes mellitus

- We are all struggling to keep up with the side effects of all these new immunotherapies. A simple way to remember is they cause itis's. So pretty much any organ can get inflamed which resolves when the drug is stopped.

If it sounds like it is, is it one?

- Adding more detail on what specific examination was performed and what was the diagnosis may be helpful to reflect effective on such topics, it is important to rethink if patient re presents with symptoms and consider more differentials including less common ones which may be worth while ruling out through further examinations as in this case and investigations.

PAU - Gastro-Oesophageal Reflux Disease

- This is a good entry for a very common problem in infants.
I am very pleased that you have read the NICE guidelines which addresses the differences between mild reflux and GORD in terms of clinical presentation and prognosis.

Reflection (WPBA Standards Group)

Not acceptable	Acceptable	Excellent (in addition to acceptable)
Information provided		
Entirely descriptive e.g. lists of learning events/ certificates of attendance with no evidence of reflection.	Limited use of other sources of information to put the event into context.	Uses a range of sources to clarify thoughts and feelings. Demonstrates well-developed analysis and critical thinking e.g. using the evidence base to justify or change behaviour.

Reflection (WPBA Standards Group)

Not acceptable	Acceptable	Excellent (in addition to acceptable)
Critical analysis		
No evidence of analysis (i.e. an attempt to make sense of thoughts, perceptions and emotions).	Some evidence of critical thinking and analysis, describing own thought processes.	Shows insight, seeing performance in relation to what might be expected of general practitioners.

Not acceptable

Acceptable

**Excellent
(in addition to acceptable)**

Self-awareness

No self-awareness.

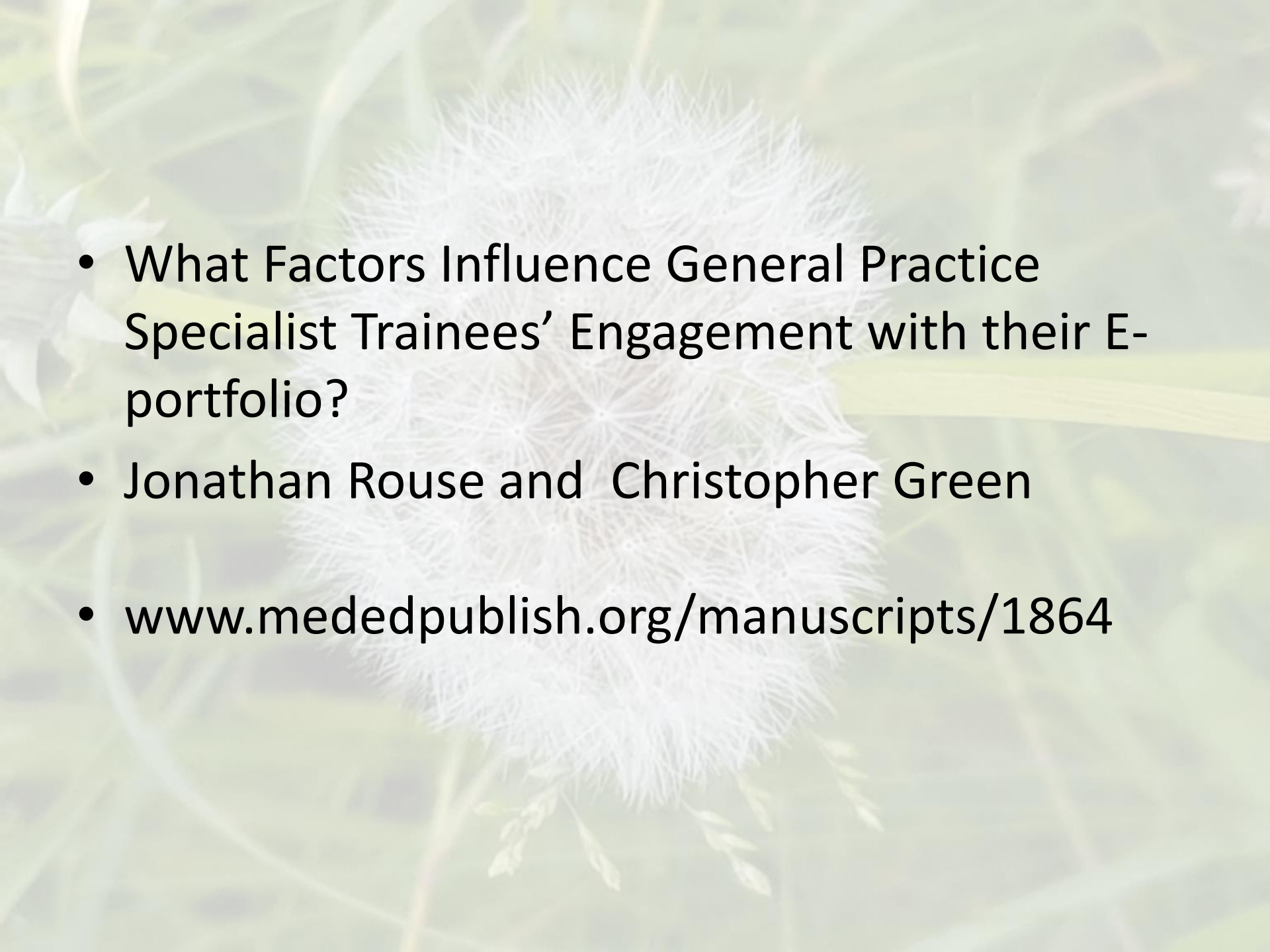
Some self-awareness, demonstrating openness and honesty about performance and some consideration of feelings generated.

Consideration of the thoughts and feelings of others as well as him/herself.

Not acceptable	Acceptable	Excellent (in addition to acceptable)
Evidence of learning		
No evidence of learning (i.e. clarification of what needs to be learned and why).	Some evidence of learning, appropriately describing what needs to be learned, why and how.	Good evidence of learning, with critical assessment, prioritisation and planning of learning.

Key Points

- Portfolio engagement is variable
- Engagement may be viewed as an investment decision
- Investment of personal resources depends on conceptualisation and trust
- Clinical and educational supervisors have a key role in influencing engagement
- Work is already underway to address regional variation

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- What Factors Influence General Practice Specialist Trainees' Engagement with their E-portfolio?
 - Jonathan Rouse and Christopher Green
 - www.mededpublish.org/manuscripts/1864

Questions?

