

A Guide to Completing the e-Portfolio ES Review – Ratings and Comments

Guidance for Programme Directors and Educational Supervisors

Educational Supervisors Review (ESR)

Workplace based assessment (WPBA) is the evaluation of a trainee's performance in 13 capability areas, carried out in the workplace.

The ESR is a formalised process which uses all the information within your trainee's e-Portfolio, including the WPBA evidence, to support a decision on their progression (or lack of).

The purposes of the ESR are to:

- Authenticate the collated evidence within the e-Portfolio
- Summarise progress towards the attainment of capabilities through the programme
- Map out where the trainee is on his or her trajectory of professional development, aiming towards achieving a certificate of completion of training (CCT)
- Provide a summary of strengths and weaknesses and to highlight areas of positive and negative performance
- Document evidence of specific learning needs, including any areas where evidence is lacking
- Provide recommendations for direction of travel – professionally and within the speciality, relating to the stage of the trainee's career
- Provide feedback for the trainee – don't forget the formative element of ESRs, especially earlier on in training

The ESR is carried out on a twice-yearly basis (usually at 6 month and 10/11 month points in training). Reviews are carried out even if they do not coincide exactly with the end of posts. There needs to be an ESR completed within 8 weeks of any ARCP. Less than full-time (LTFT) trainees should still have ESR's at the same rate, but the quantity of evidence required will be proportionately less.

For a satisfactory outcome in the ESR, a trainee needs to demonstrate that there has been appropriate progression in their performance over the course of their training and since their last review. At the end of ST3, prior to gaining CCT, they need to demonstrate that they can work to the standard of an independent General Practitioner in the UK.

The documentation of justifiable evidence-based information validates your trainee's development. It is extremely important for your trainee that it is done correctly.

Recording ratings and comments against the 13 competency areas are required by both the trainee and the Educational Supervisor in preparation for the review.

Before you document your ratings and comments

1. Review the entries from the **learning log** to get a picture of your trainee. Sample from tutorials, reading, OOH entries, Clinical encounters etc. Look at the degree of reflection demonstrated. Of particular interest should be those learning log entries tagged as evidence by the trainee and those that you have previously validated against one or more capability areas. These appear in the potential evidence list during the review process.
2. Look at their **PDP** - there should be a handful of entries. Check that they fulfil the SMART criteria, and do not focus on either the mandatory (e.g. "pass the AKT, pass the CSA") or the trivial (e.g. "find out what the dose of amoxicillin should be"). Have they completed their objectives, and if not, why not? Have they reflected on their PDP objectives and meeting them?
3. "**Evidence**". Check that your trainee has done at least the required number of WPBA assessments (varies if working LTFT). Look at the assessments to determine the accuracy of the grades given by the CS under the competency headings and the quality of formative feedback. Make a judgment of the level of difficulty of the cases seen (if they are all very superficial and it is difficult to judge your trainee's competency, it is worth noting this in your comments at the end).
4. Look at the **CSR** reports-these are often very helpful, and you may want to look back at previous CSR reports to see if there are any ongoing issues, or positive statements. Again, consider the quality of the formative feedback contained within. Simply being rated 'Excellent' in all areas with little commentary may not be that useful to inform your own judgement.
5. Look at the individual **MSF** reports, as these often give very useful information across the various capability areas. The MSF will not be available as a potential piece of 'tagged' evidence when it comes to the review itself so will need to be specifically commented on when appropriate.
6. Look at the **PSQ** if completed in this review period. Another good source of evidence, but like the MSF, this will not appear as an option in the list of potential 'tagged' evidence, so will need to be commented on specifically.
7. Look at the coverage of the Clinical Experience Groups. Are there any obvious gaps? Click your way through their linked learning logs under each heading in order to get an idea of whether their tags are reasonable or very tenuous (these can be amended at the time of reading their learning logs, of course).
8. Ensure the trainee has completed their own **self-assessment** – i.e. ratings and comments against the 13 capabilities. They hopefully will have tagged several pieces of evidence (up to a maximum of 3) already to support their self-rating and added some reflective comments about each area.
9. **Record your own ratings of their competence**, quoting any evidence as appropriate and where you found it. You can choose from the list of evidence and tag additional pieces if you feel they appropriately support the rating / comments. If there is a discrepancy between the trainee's self-ratings and those of the ES, the ES should clarify the reasons for the discrepancy within the capability rating in question, citing further evidence as appropriate. This evidence may come from any area of the e-Portfolio but particularly from educators' notes if there have been concerns about the trainee's performance.

Rating your trainee's Capability Areas

There are 5 possible ratings you can choose from:

- Needs Further Development - Below Expectations

- Needs Further Development - Meets Expectations
- Needs Further Development - Above Expectations
- Competent for Licensing
- Excellent

Trainees are being rated based on their current competence level with the target being overall competence for licensing and successfully gaining CCT. Hence a trainee at ST1/2 level will be expected to be rated as “Needs Further Development...”, but may be below, meeting or above the expectation of trainees at a similar point in their training.

Indicators of Potential Underperformance	Fitness to practise		
<p>Not a level below NFD See Guidance</p> <p>Fails to respect the requirements of the organisation e.g. meeting deadlines, producing documentation, observing contractual obligations</p> <p>Has repeated unexplained or unplanned absences from professional commitments</p> <p>Prioritises his/her own interests above those of the patient</p> <p>Fails to cope adequately with pressure e.g. dealing with stress or managing time</p> <p>Is the subject of multiple complaints</p>	<p>This is about professionalism and the actions expected to protect people from harm. This includes the awareness of when an individual's performance, conduct or health, or that of others, might put patients, themselves or their colleagues at risk.</p>		
	Needs Further Development	Competent	Excellent
	Understands the GMC document, "Duties of a Doctor".	Demonstrates the accepted codes of practice in order to promote patient safety and effective team-working.	Encourages scrutiny of professional behaviour, is open to feedback and demonstrates a willingness to change.
	Attends to their professional duties.	Achieves a balance between their professional and personal demands that meets their work commitments and maintains their health.	Anticipates situations that might damage their work-life balance and seeks to minimise any adverse effects on themselves or their patients.
	Awareness that physical or mental illness, or personal habits, might interfere with the competent delivery of patient care.	Takes effective steps to address any personal health issue or habit that is impacting on their performance as a doctor. Demonstrates insight into any personal health issues.	Takes a proactive approach to promote personal health. Encourages an organisational culture in which the health of its members is valued and supported.
	Identifies and notifies an appropriate person when their own or a colleague's performance, conduct or health might be putting others at risk.	Reacts promptly, discreetly and impartially when there are concerns about self or colleagues. Takes advice from appropriate people and, if necessary, engages in a referral procedure.	Provides positive support to colleagues who have made mistakes or whose performance gives cause for concern.
	Responds to complaints or performance issues appropriately.	Uses mechanisms to reflect on and learn from complaints or performance issues in order to improve patient care.	Actively seeks to anticipate and rectify where systems and practice may require improvement in order to improve patient care.

To help you formulate your rating of the trainee in each Capability Area, word pictures are available to help you make your decision, with suggestions of what a trainee may demonstrate for each rating. These appear at the bottom of the screen when you are undergoing the review process and you edit an individual Capability Area.

An example is shown below for Fitness to Practice:

Agreed Actions

It is expected that when writing the ESR, the ES will add formative suggestions to support the trainee's development across all 13 capabilities. In the final ESR, the ES should suggest how the trainee might be able to maintain these capabilities and develop them further in an unsupervised role when in independent practice after successful completion of GP training.

These suggestions should be included in the 'Agreed actions before next review' section, within 'Competency areas – Educational Supervisor'.

Some of these agreed actions can be transferred straight over to the trainee's PDP, by ticking the 'Link to PDP' box. Of course, the objectives must be discussed with the trainee before being submitted within the final report, since once they are transferred to the PDP, the trainee cannot delete them (though they can be edited).

Quality of the ESR

The RCGP criteria set out what constitutes an acceptable ESR. They are listed below:

Acceptable

- Judgements are generally referenced to a range of the available, relevant evidence, and include interpretation of this evidence
- Judgements appear to be justifiable
- Suggestions for trainee development are routinely made and appear to be appropriate

Needs further development

- The educational supervisor (ES) has not based his/her judgement on appropriate evidence supplied by trainee and/or the ES
- When making their judgement, the ES has failed to show appropriate interpretation of the evidence
- The ES has failed to provide appropriate action plans for future trainee development, including in the final review of GP Training

Resources

Further information and guidance on completing the ESR can be found on the RCGP website :
<https://www.rcgp.org.uk/training-exams/training/mrcgp-workplace-based-assessment-wpba/esr-for-workplace-based-assessment.aspx>

There is also a RCGP eLearning module here:

<https://elearning.rcgp.org.uk/mod/lesson/view.php?id=4529&pageid=15388&startlastseen=no>