

A guide to the workplace-based assessments

Pharmaceutical Medicine Specialty Training
2021 Curriculum
Version 1



Faculty of
Pharmaceutical Medicine



1. Introduction

- 1.1** The workplace-based assessments (WPBAs) evaluate the trainee's progress in areas of professional practice that are best assessed in the workplace and:
- looks at the trainee's performance in their day-to-day practice to provide evidence for learning and reflection based on real experiences;
 - supports and drives learning in important areas of competence with an underlying theme of patient safety;
 - provides constructive feedback on areas of strength and developmental needs, identifying trainees who may be in difficulty and need additional support;
 - evaluates aspects of professional behaviour that are difficult to assess through other assessment methods; and
 - determines fitness to progress towards completion of training.
- 1.2** Evidence of WPBAs, as approved by the General Medical Council (GMC), includes the completion of specific assessments and reports and the documentation of naturally occurring evidence.
- 1.3** Trainees following the 2021 curriculum for the Pharmaceutical Medicine Specialty Training (PMST) programme are required to use a range of WPBAs, which are available on their trainee e-portfolios.

The WPBAs for pharmaceutical medicine are:

- Multi-source feedback tool (MSF)
- Observation assessment Tool (OAT)
- Patient feedback (PF) if applicable
- Pharmaceutical medicine assessment tool (PMAT)
- Quality improvement project assessment tool (QIPAT)

2. Multi-source feedback

(also known as 360° feedback)

- 2.1** MSF is an assessment involving systematic collection and feedback of performance data on a trainee derived from multiple observers (respondents) of her/his performance and behaviour. MSF for the PMST programme is a method of assessing both generic skills, such as verbal communication, leadership, team-working, diligence and reliability. It also serves as a form of assessment of attitudes and behaviours, such as problem solving, planning and prioritisation, maintaining high standards, flexibility and open mindedness, and receptiveness to feedback.
- 2.2** This provides objective anonymous systematic collection and feedback of performance data on a trainee derived from several colleagues.
- 2.3** The trainee should invite feedback from a wide range of people that they have contact with through the work including peers, administrative staff and other allied professionals. The trainee must receive at least 12 respondents before their educational supervisor (ES) releases the MSF summary report and holds an educational meeting to discuss the feedback with the trainee.
- 2.4** Whilst MSF is said to be an objective assessment of generic difficult-to-measure attributes, they are a collection of retrospective and subjective opinions of professionals based on observations over a period.

3. Observation Assessment Tool (OAT)

- 3.1** The Observation assessment tool (OAT) is designed to provide a framework for assessors to provide structured formative feedback to a trainee on their competency at undertaking teaching, delivering a presentation or chairing or participating in a meeting.
- 3.2** The OAT can be used at any formalised gathering in which the trainee is expected to make a substantial contribution and can be assessed by an observer.
- 3.3** The OAT is designed to assess a trainee's competency to interact effectively in a variety of group and one-to-one tasks and activities.

3.4 This assessment has two main parts:

1. Hard copy form

The observers are given printed forms to complete while they are observing the activity or completed immediately after the activity. The observer can be anybody participating in the activity. This form will then be given to the trainee to scan and upload on to their e-portfolio where it will be linked to the OAT as part of the overall evidence for the activity before it is discussed with the trainee's ES or associate educational supervisor (AES).

This form has multiple questions based on generic skills expected from anyone who undertakes teaching, delivers a presentation or is chairing or participating in a meeting. General questions such as environment readiness (logistics, technology, etc), overall expertise (knowledge of subject, audience engagement, etc) and the logics of contributions (clear statements, highlighting key points, etc).

2. Electronic form

This should be completed by trainee and their ES or AES, using information from the hard copy observer forms.

This form is more in-depth and provides an opportunity for the trainee to reflect on what they did. The form asks the trainee to comment on the following questions:

- What did you do?
- What supporting documents are available (evidence)?
- What have you learnt from this activity?
- How will the learning event lead to changes in your practice?
- How did the learning event inform any future learning needs? Will your PDP change to reflect these needs?
- How does this activity fulfil the requirements (all or partial) of the curricular topics listed?

Neither the ES nor the AES is required to attend the session, however the trainee should submit their comprehensive evidence and hard copy forms to their supervisor to enable the supervisor to provide relevant and practical improvement guidance. It is important that the trainee leave the assessment session with clear suggestions for development and improvements.

4. Patient Feedback

- 4.1** Patient feedback (PF) addresses issues including the behaviour of the trainee. It is intended to assess the trainee's performance in areas such as interpersonal and communication skills and professionalism.
- 4.2** PF should be undertaken by trainees who are patient- or research participant-facing in the course of their work and is also part of the requirements for demonstrating the attributes of 'Good Medical Practice'.
- 4.3** Trainees using the PF should follow the guidance from the Joint Royal Colleges of Physicians Training Board (JRCPTB), which can be accessed by visiting the web address below:

www.jrcptb.org.uk/documents/patient-survey-guidance-trainees-2021

5. Pharmaceutical Medicine Assessment Tool (PMAT)

- 5.1** PMAT assesses the performance of a trainee in the management of a project to provide an indication of competence in areas such as reasoning, decision-making and application of medical knowledge in a pharmaceutical setting in relation to project goals and outcomes.
PMAT serves as a method to document conversations about and presentations of projects by trainees.
- 5.2** PMAT should include discussion about a written record (such as written plans, progress reports, and final reports). A typical encounter might be around the presentation of an interim project update to the project team. It is a structured narrative-based instrument for assessment of areas of application, learning, competency and performance related to standard/non-standard project(s) being undertaken by the trainee.
- 5.3** PMAT enables the trainee to include reflective commentary and self-assessment in relation to such structured questions as:
- What did you do?
 - What evidence/supporting documents are available?
 - What have you learned from this project (so far)?
 - How does this project fulfil the requirements (all or partial) of the curricular topics listed?

- 5.4** PMAT enables the assessor to comment critically on areas of trainee performance on this occasion:
- Summary of what was described and the evidence available to support this.
 - Was the evidence presented satisfactory?
 - Does the project fulfil the requirements (all or partial) of the curricular topics listed?
 - Key points covered by the discussion.
- 5.5** During the discussion, the assessor will be assessing the trainee's following characteristics and provides feedback:
- Understanding of the environment (analytical thinking).
 - Working with others (teamwork, negotiation, communication skills).
 - Personal effectiveness (Initiative and flexibility; building expertise).
 - Delivery (concern for quality; planning and prioritisation; change management).
 - Managing performance (people management; leadership skills).
- 5.6** Ideally, the PMAT is an observation of a trainee's engagement with projects or interactions with colleagues. It involves direct observation by an assessor of a trainee's performance in real work situations and is designed to assess a wide range of competences appropriate for the practising pharmaceutical physician. However, provided the trainee submits adequate supporting documents and can maintain detailed discussion about the project, it is acceptable to consider a project that the assessor has not been directly involved in.
- 5.7** PMAT requires "Agreed actions", this is of particular importance to ensure trainees have been given enough guidance on how to improve their performance in future projects. This tool is not only an assessment tool but is considered an opportunity to have productive discussion in a safe environment about projects and identify development needs.

The final step of PMAT assessment is to score the anchor statements about the satisfactory level of performance for the stage of training.

6. Quality improvement project assessment tool

- 6.1** The Quality Improvement Project Assessment Tool (QIPAT) is designed to assess a trainee's competence in completing a quality improvement project. The QIPAT can be based on a review of quality improvement project documentation or on a presentation of the quality improvement project at a meeting. If possible, the trainee should be assessed on the same quality improvement project by more than one assessor.

The QIPAT requires the trainee to indicate whether the basis of their assessment is a presentation or a report and to enter a short description of the quality improvement project (QIP). The trainee is then required to reflect on what went well with the QIP and what could be improved.

The trainee should have an educational meeting with their ES or AES to discuss the information entered on the QIPAT before rating the level of overall QIP shown (see table below) before each individual signs the tool as complete.

Table 1

Rating	Description
Below expected standard for QIP	Significant guidance required throughout the QIP process. Inappropriate QIP topic or poor methodology resulting in inappropriate conclusions or conclusions of limited practical use. Inadequate consideration of future direction of QIP.
Expected standard for QIP	Limited guidance required throughout QIP process. Sound QIP methodology in a relevant topic, resulting in conclusions with practical importance. Plans for future direction of QIP highlighted.
Exemplary standard for QIP	QIP topic related to an important problem in pharmaceutical medicine; detailed and exhaustive methodology applied; appropriate presentation of results with correct interpretation and comprehensive conclusions. Plans for future direction of QIP highlighted. An exemplary QIP.

Trainees are reminded that quality improvement activity is one of the six types of supporting information for revalidation¹, so trainees will be expected to include evidence of this as set out in the 2021 curriculum for PMST. Please see the ARCP decision aid and blueprint mapping to the WPBAs in the curriculum for more information.

¹See GMC's 'Guidance on supporting information for appraisal and revalidation'.