NI Centre for Pharmacy Learning & Development

FP1 Assessment Preparation

RPL Pathway 2

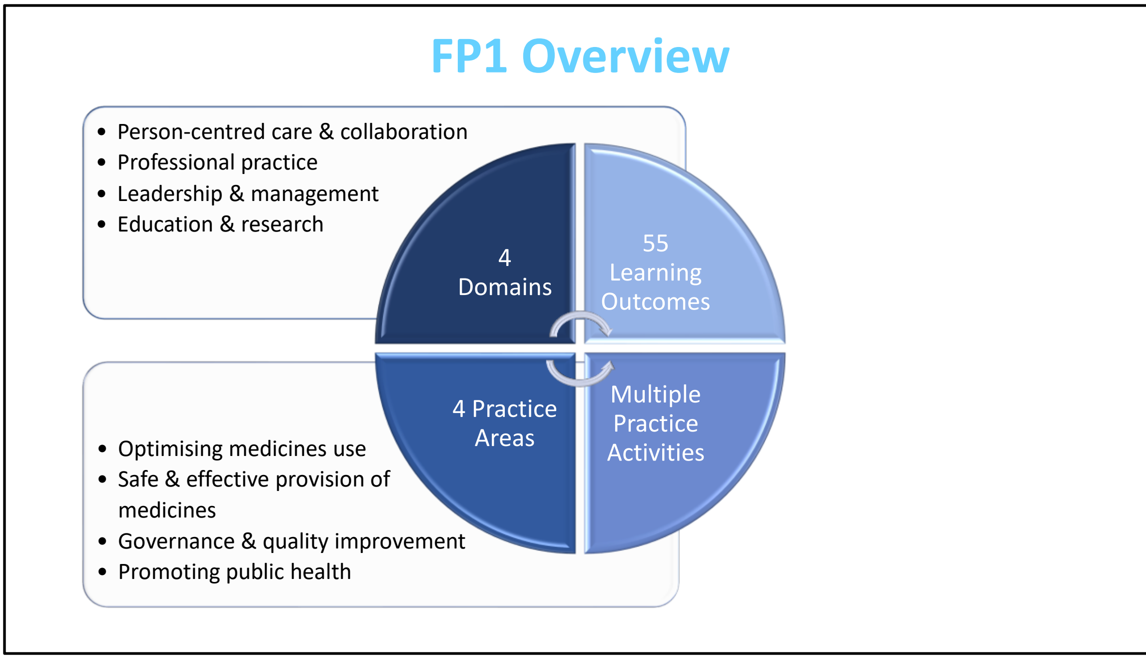
During this webinar, we will cover a number of key aspects of the portfolio and we will try our best to answer any queries you may have.

Hopefully at this stage, most of you have the majority of practice activities covered and are getting ready to map your evidence to the particular learning outcomes.

We can also arrange to have a Q&A for 30 minutes closer to submission date. This is not mandatory but will really help if you have any last minute queries.

Intended Outcomes

- Understand the learning outcomes to be met and practice activities to be undertaken within each area
- Discuss the Recognition of Prior Learning pathway 2 – summary of professional experience
- Know how to navigate the ePortfolio and map evidence to the learning outcomes
- Know how to submit your ePortfolio for assessment and the assessment process



This pie chart provides an overview of FP1. 4 domains and 55 learning outcomes. We will now go through the domains, practice areas, learning outcomes and practice activities associated with the programme.

Optimising Medicines Use

Practice Activity	Description	Evidence Reqd
Medication reviews*	The pharmacist should record 4 patient-facing medication reviews demonstrating a range of patient types. Patients should be typical patients with multi-morbidities and polypharmacy.	4 x medication reviews
Observed medication reviews	The pharmacist should be observed undertaking 2 of the patient-facing medication reviews.	2 x observed medication reviews
Medication record*	The pharmacist should reflect on their experience of ensuring that patients' health/medication records/documents (inc. those used for transfer of care between clinical settings) are completed accurately and in accordance with GDPR.	1 x reflective account
Provision of person-centred information*	The pharmacist should provide accurate, timely, evidence-based information to patients/carers +/or healthcare professionals (in response to queries relating to medicines or symptoms).	6 x examples in total (6 x query response templates)
NICPLD elearning courses - Electrolytes, liver & kidney function - Erythrocytes	Complete each of the elearning courses and complete a CPD cycle for each elearning course (include your MCQ score).	CPD cycle

Firstly a summary of the practice activities required to be uploaded to the portfolio.

For the medications reviews – these do not need to be on any specific condition. They can be anything as long there is a variety – 4 different ones. They don't specifically have to be cardiovascular, diabetes, respiratory or antimicrobials.

If you are considering doing a SPE for this practice area, observed medication reviews do NOT need to be included.

Just to clarify, you have to do 4 medication reviews in total, 2 of which are observed; but if your 2 observed medication reviews were as a FTY, you will need 4 further medication reviews.

The * refers to the 4 practice activities which must be completed as a REGISTERED PHARMACIST.

If you are not newly qualified, you could do a SPE in full for OMU. In this case you would need to include at least 2 examples of a medication review with clear detail as there would be no observed medication reviews. As long as you have included enough detail in the SPE, that is fine. SPEs are for people with loads of experience.

If doing a SPE for this practice area, you don't need to complete a CPD cycle – just include the MCQ score in the SPE.

2 examples of person-centred information is sufficient in a SPE.

Anyone in hospital pharmacy can use the clinical induction passport as evidence in lieu of the OMU section if completed

Clinical Induction Passport

- Used in place of the following practice activities (OMU)
  - Medication reviews
  - Observed medication reviews
  - Medication record
  - Provision of person centred information
- MUST be fully signed off partial or missing signatures wont be accepted
- It is in place of PA's, not the strongest evidence in terms of LO's

The clinical inductions passport must be fully completed and signed off , it can be uploaded and used in lieu of these practice activities

Queries

In terms of the CPD cycles for the eLearning, do they need to be mapped to any particular learning outcome as couldn't see this in the handbook or slides?

No the elearning CPD cycles don't need to be mapped to any learning outcomes, just upload them to the ePortfolio but don't map them.

Queries

WRT the 4 practice activities that must be completed as a REGISTERED pharmacist, does this only apply to those who were in the FTY programme and were not qualified at the time of carrying out the activity? Can I write a SPE for 'Optimising Medicines Use' if I have been qualified for 6 years?

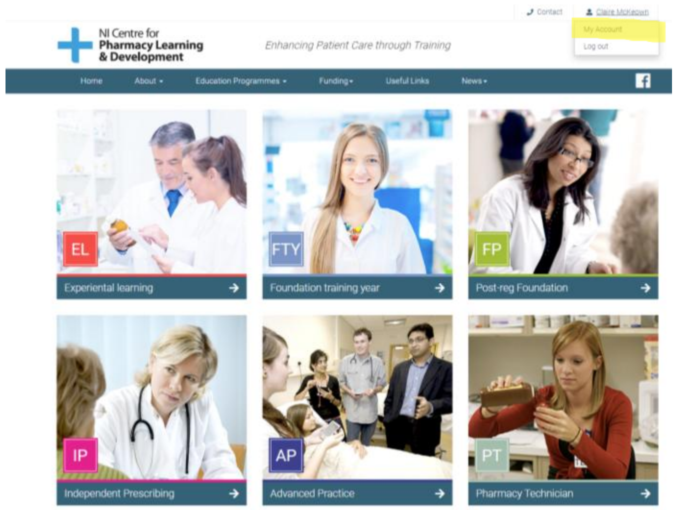
The 4 practice activities that must be completed as a registered pharmacist apply to everyone but if you haven't completed your pre reg/FTY within the last 5 years then obviously the experience you are referring to will have been as a registered pharmacist so an SPE is adequate.

Optimising Medicines Use

- If referencing local/national guidelines: be specific, state source (e.g. NICE/Trust), Title and date
- Guidelines do not need to be uploaded to the portfolio
- Supportive evidence such as a copy of the Kardex is not required
- elearning course: ensure you include MCQ score and date of completion (see next slides)

Just a few pointers regarding this practice area. Its extremely important to include the dates of guidelines you have used as guidelines and recommendations can change significantly between updates

Optimising Medicines Use: elearning evidence

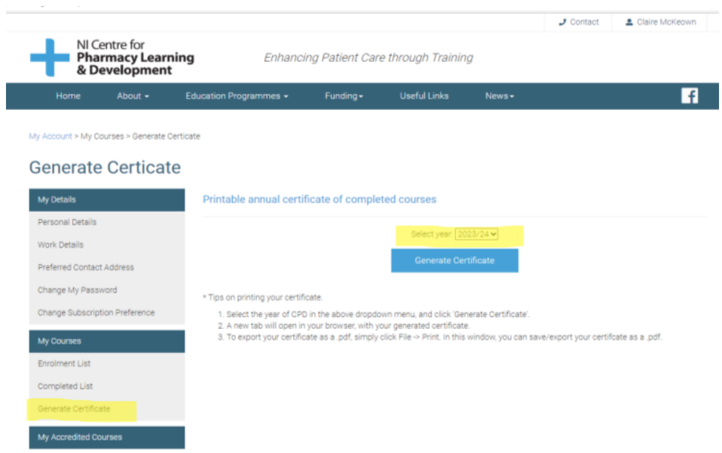


So if you have done the elearning and MCQ's previously but can't remember the details, you can access these via the NICPLD website- make sure you log in.

If you have your score, please include this in your CPD cycle.

If you do not know your score, please upload the certificate of completion which you can generate on the NICPLD website.

Optimising Medicines Use: elearning evidence



The details of completed courses are listed here and you can generate a certificate then (you will have retrieved the date from the "completed list" menu)

Medication review – top tips!

- Please state:
  - Dates of bloods or other relevant tests
  - Doses of drugs
  - Whether a diary entry has been set e.g. for a pill check (GP)
  - Plans to review with a time scale or ask primary care to follow up
  - If drug overuse has been identified e.g. Salbutamol inhaler
  - If dates have been set to review a patient face-to-face/ has a referral to ongoing service been made
  - If discussing inhaler technique in a piece of evidence, please state the steps discussed.
  - If you provided a patient with advice, please state the leaflets you provided or the websites you signposted the patient to.

Having reviewed a number of pieces of evidence, I have summarised some of my top tips for medication reviews.

I found that a number of things were not stated on the medication review forms e.g. dates of bloods e.g. June 2025, doses of drugs, diary entries and plans to review so please include these.

Also if you have identified drug overuse, arranged a face-to-face review, discussed inhaler technique or signposted patients to certain websites or provided them with leaflets, please include detail on this.

Safe & Effective Provision of Medicines

Practice Activity	Description	Evidence Reqd
Checking accuracy	Complete a **100-item log** demonstrating your ability to accuracy check items dispensed by others against a range of prescription types AND reflect on your accuracy checking experience.	Completed 100 item log & 1 x reflective account
Clinical screening*	Complete a **100-item log** demonstrating your ability to clinically screen medicines prescribed for a range of patient types AND reflect on your clinical screening experience.	Completed 100 item log & 1 x reflective account
Procurement activity	Reflect on a procurement activity you have been involved in (e.g. sourcing and supplying a pharmacy special/unlicensed medicine).	1 x reflective account
Managing workflow	Reflect on your experience of managing the workflow in your workplace.	1 x reflective account
Disposal of medicines	Reflect on your experience of disposing of a range of different medicine types, such as returned/unused patient medicines, controlled drugs, expired medicines.	1 x reflective account

These are the practice activities that need to be completed for the practice area – Safe and Effective Provision of Medicines.

Just a reminder that the Clinical screening practice activity must be completed as a registered pharmacist.

Some of you are probably wondering how could you cover checking accuracy and clinical screening as SPE?

e.g. I worked in a busy pharmacy and checked and dispensed 1000 items a day and dispensed a range of drugs e.g. controlled drugs, borderline substances and advised on OTC.

If you choose to write up this area in your SPE, if you have access to your previous logs this would be helpful but not necessary, you can provide examples and a summary of your accuracy checking and clinical screening.

If writing a SPE for this practice area, 1 example for each practice activity is sufficient.

Queries

For the clinical screening, does this need to be a wide range of items or can it be a narrow range? I am based in aseptics and we clinically check a narrower range of items.

If you are based in aseptics/similar area we will accept a narrower range for clinical screening.

Governance & Quality Improvement

Practice Activity	Description	Evidence Reqd
Undertake an audit	Undertake an audit in practice. This includes setting the audit standard, defining the methodology, collecting data, reviewing the data with reference to the audit standard and making appropriate recommendations.	1 x audit template
Recording of near misses and incidents	You should routinely report near misses and incidents in accordance with the established procedures within your workplace.	1 x reflective account
Yellow card reporting	You should appreciate the range of problems/incidents to be reported via the yellow card reporting system. If you don't experience a problem/incident to be reported, you should discuss a theoretical incident and how it would be reported in practice.	1 x reflective account
Using technology to enhance patient care	You should reflect on your experience of using technology to enhance patient care.	1 x reflective account
Teaching activity	You should develop a teaching session and deliver this to others. This can relate to a range of different activities inc. medicines use, reporting back on medicines incidents, reporting back on findings of audit etc.	1 x reflective account & 1 x teaching observation
Collaborative working	You should provide an example of how you have worked collaboratively as part of a multi-disciplinary team (MDT) to optimise patient outcomes.	1 x reflective account

1 audit required - whether in a SPE or not

1 Yellow card required - whether in a SPE or not

1 example of each in a SPE.

Using technology to enhance patient care - Suggestions for this would be if you use technology for warfarin monitoring/glucose monitoring/NIECR/GP electronic systems/labcentre/GP equivalent. These are just some suggestions, there will be other examples in your practice that you will have come across that I have not specified here. I am aware the LOs 22, 23 have been tagged as routinely mapping to this PA, you may be able to link these instead to your medication reviews/procurement activity if you are unable to map to this PA.

Audit – top tips!

- Choose something that is useful for your practice
- Set standards which relate to local and national standards
- Involve the multidisciplinary team – admin staff, nurses, doctors, dieticians, physiotherapists etc.
- Collect data and compare it to the standards set
- Ensure changes are SMART
- Plans to re-audit

❖Evidence required: 1 x completed audit template

We ask you to undertake an audit and recommend a plan for improvement.

It is important from the outset that you choose a good topic to audit – something that needs changed in your practice.

Consider which members of the MDT you will need to involve.

Changes should be specific, measurable, achievable, realistic and time-bound (SMART)

Reaudit is essential so that any areas which are improving/ maintained/ deteriorating can be identified. You do not have to reaudit during the timeframe of the programme or include results from a reaudit in your portfolio.

The audit should be presented to your colleagues.

Queries

Should the audit be a full cycle including reaudit?

Can you use a previous audit?

Can you use an Audit for the teaching activity?

Do we need to complete a reflective account for our audit?

Is there a minimum number or patients to be used within the audit?

We often get a number of queries re the audit so I have put this slide together to hopefully address most issues.

We do not expect you to reaudit within the timeframe of the programme. It is sufficient to state that you plan to reaudit e.g. 1 year

The audit does not need to be a clinical audit and you can use experience you have gained within the last 5 years, therefore if you have completed an audit within the previous 5 years you can use this for your evidence.

Please see the audit PA descriptor taken from the handbook:

Undertake an audit: The pharmacist should undertake an audit in practice. This includes setting the audit standard, defining the methodology, collecting data, reviewing the data with reference to the audit standard, and making appropriate recommendations.

Yes you can use an audit against the teaching activity but ensure it has an evidence base.

No you do not need to complete a reflective account, however if you do not have access to a previous audit you have completed you can complete a reflective account to cover this, just ensure you include enough detail to ensure the assessor can see you clearly meet the relevant learning outcomes (understand all aspects of the audit process, you've done it before and you did something with the information).

No, your audit can be small or large depending on the nature of it, just make sure it is clear that you know what the process is and you have undertaken it appropriately.

Promoting Public Health

Practice Activity	Description	Evidence
Promoting the health of individuals	You should record a case-based discussion that evidences EITHER your support of a patient through a behavioural change OR how you applied antimicrobial stewardship to optimise an individual patient's treatment.	1 x case based discussion (Behavioural change CbD template OR antimicrobial stewardship CbD template)
Safeguarding activities	You should record case-based discussions regarding 3 safeguarding cases (provided by NICPLD).	3 x case based discussions (3 x Safeguarding CbD templates)
Minimising the misuse of medicines	You should reflect on your experience of minimising the misuse of medicines such as opioids or beta-2-agonists.	1 x reflective account
Promoting the health of the public	You should reflect on your experience of promoting the health of the public (eg in a health promotion/awareness day/campaign, or an activity to reduce antimicrobial resistance).	1 x reflective account

Behavioural change or antimicrobial stewardship – you can do an example of either of these if you decide to write an SPE for this practice area.

Safeguarding – 1 example in a SPE, OR complete declaration from FTY OR complete 3 cases (available on the website).

Minimising misuse of medicines and promoting public health – 1 example required in SPE or else do the practice activities.

Health promotion – 1 example required in SPE.

Queries

If using the 3 examples given for safeguarding, does your ES/PS still have to complete the feedback form on the template?

If you decide to use the 3 safeguarding examples to write up using the templates, your ES or PS must discuss these cases with you and complete page 2 of the template before you upload it to your portfolio as each completed template must be uploaded as one document.

Learning outcomes

22. Demonstrate how the science behind pharmacy is applied in the discovery, design, development and safety testing of medicines and devices

23. Recognise the technologies that are behind developing advanced therapeutic medicinal products and precision medicines, including the formulation, supply and quality assurance of these therapeutic agents

24. Keep abreast of new technologies and use data and digital technologies to improve clinical outcomes and patient safety, keeping to information governance principles

We always get lots of queries re these 3 learning outcomes as people are unsure of what examples to use. We are going to put you into breakout rooms for 5 minutes to discuss examples you could use for these and then we will give you some ideas.

22 – blood glucose monitors being calibrated, yellow card reporting, using unlicenced medicines in pregnancy for recurrent miscarriage

23 – Advanced therapy drugs – pharmacogenomics, someone getting a particular blood test to determine a treatment, letter for a red list drug, looking at science of why they pick one drug over another, someone not getting first line treatment as they are intolerant, HRT supply issues – having to use different formulations, blood test - calprotectin for IBD, freestyle libre – using the app to read blood sugar levels

24 – Encompass, Accurx – send PILs to patient; Vaccine management system – CP

You will probably be able to use the same piece of evidence to cover all 3 of these learning outcomes.

If you have certificates from FTY for learning outcomes 22 and 23 – you can use these certificates and upload a reflective account to show how you used the information from the courses.

Learning outcomes which do not require evidence

15. Demonstrates the values, attitudes and behaviours expected of a pharmacy professional at all times

37. Prescribe effectively within the relevant systems and frameworks for medicines use

53. Reflect upon, identify, and proactively address their learning needs

* Highlighted within the eportfolio for each of these learning outcomes*

There are 3 LOs that evidence is not required for – 15, 37 and 53.

To be admitted onto the register you must be able to demonstrate LOs 15 and 53, and LO 37 but these will be covered in the IP course.

Evidence for learning outcomes which are not routinely covered by the practice activities

Two examples of accurately performing calculations in practice (LO 32)

- This can be included as part of your medication review evidence if applicable or upload a separate document
- Your examples must be complex calculations e.g. Creatinine clearance, infusion rate

First Aid certificate or equivalent (LO 44)

- If you do not have a first aid certificate, upload some form of evidence a course was completed e.g. a testimonial or statement from previous workplace.

There are 2 LOs that aren't routinely covered by the practice activities - 32 and 44.

Although 32 is not routinely covered, you must include 2 examples of accurately performing calculations in practice. This could be included within your medication review.

No one is trying to trick you, the calculations just need to be included, something like CrCl, opioid conversions, those types of things. There are so many different calculations we do every day so just pick a couple. Do not put something really simple in though, it has to be reasonably complex. Try to use 2 different examples to show your breadth of knowledge. Over the last few assessment sessions, we have found that the biggest area for concern is the calculations. Please double check your calculations and make sure you have included the units.

Not everyone will have a certificate for their first aid so just provide a testimonial.

If you completed first aid training during flu vaccine training, this is acceptable.

If when you are uploading the practice activities and you think you are struggling to meet specific learning outcomes then you can write up a reflective record on something to meet the particular learning outcome and attach it instead.

You can use your First Aid training from FTY/Pre-reg as long as it is within the last 5 years. If stuck there are free online first aid course available.

Queries

I completed first aid training 3 years ago with my previous employer. I don’t have a certificate that I can access but I do have the emails with information about what was covered and confirmation from my then line manager about my attendance. Would it be possible to forward these to someone to see if they would cover evidence of having completed first aid training?

You just need to write a testimonial regarding your First aid training - extra evidence won't be required. We trust you as a professional signing the documents that what you say is true.

Summary of Professional Experience (SPE)

- Write an SPE in the relevant practice area
- Previous 5 years experience (including pre-reg year)
- Upload as a piece/pieces of evidence to the ePortfolio and map against the relevant learning outcomes
- Ensure you provide enough detail to demonstrate the relevant LOs
- It must be clear within the text of your SPE(s) how you have met the associated learning outcomes
- SPE templates are provided on the Post Reg Foundation Programme webpages.

Some people may want to provide 1 or more SPE's to show how they have met the learning outcomes, that is absolutely fine but please make sure that you have stated obviously how you meet the learning outcome in the body of the text.

Please note that the SPE in a summary of your PREVIOUS experience so it must be evidence of experience that you completed before starting the FP1

If the evidence required for the practice activity is more than one, please include 2 good examples to support your evidence, but if only one piece is required for the practice activity e.g. audit, please include one example in the SPE. You can include more if you wish to make it very clear but you don't need to provide reams of information.

There are templates available to download from the NICPLD website. Experience must be within the last 5 years. We don't expect essays here - just be clear and concise and make it obvious to the marker how you have met the LO in the body of the text.

Summary of Professional Experience (SPE)

- The following practice activities must be demonstrated as a registered pharmacist:
  - Medication reviews (OMU)
  - Accurate completion of medication records (OMU)
  - Accurate provision of person-centred information (OMU)
  - Clinical screening (SEPM)
- Supportive evidence is not required, however may be requested by the assessor if necessary.
- SPE templates are provided on the Post Reg Foundation Programme webpages.

These 4 practice activities have to be shown as a registered pharmacist and so experience from your pre reg or FTY year cannot be used.

If doing a SPE, provide info on 2 medication reviews you completed. I will show you an example of this on the next slide.

Discuss the different types of prescriptions you have previously screened and different patient conditions. Give 2 examples of queries you have dealt with.

SPE

NI Centre for **Pharmacy Learning & Development**

Post-reg Foundation Programme – FP1

SPE – Optimising Medicines Use (OMU)

Name of pharmacist:	
PSNI registration number:	

Please provide a brief description of your relevant professional experience (with examples) to demonstrate that you have covered the practice activities (PAs) listed.
Please state the learning outcomes demonstrated within the description of your relevant professional experience.

These practice activities below must be demonstrated as a **registered pharmacist**.

PA	*Brief description of relevant professional experience (with examples)*
Medication reviews (*demonstrating a range of patient types with multi-morbidities and polypharmacy)*	
Accurate completion of health / medication records (*in accordance with GDPR)*	
Accurate provision of person-centred information	

This slide shows the SPE template which can be completed for the practice area: Optimising Medicines Use.

For example:
For the description of the first practice activity: Medication reviews, you could state: Throughout my time working as a GPP, one of my key tasks was to perform medication reviews. When completing medication reviews I always follow the 7 step guidance and highlight my top priorities to managing the patient. Using a patient-centred approach, I go through each of the patient's medications and indications and start the review by ascertaining what matters to the patient….. It is important to provide examples. This would cover learning outcome number 1 which is…

Learning outcome 1: Demonstrate empathy and keep the person at the centre of their approach to care at all times.

Queries

Can I use my SPE for a particular practice area and map it to multiple learning outcomes or do I need to write reflective records to map to the learning outcomes?

If you write a SPE for a particular practice area e.g. SEPM you can use it as a piece of evidence to map to a number of learning outcomes that you feel it meets. You do not have to write up additional reflective records.

The SPE can be written instead of completing and uploading the practice activities for that section.

This can then be used as a piece of evidence against the learning outcomes.

Please be mindful that it is actually relevant to the learning outcomes you map it to and proves your competence and be realistic about how many it covers.

Queries

What is the timeframe of evidence for the SPE?

You can use evidence for your SPE from over the past 5 years up until the induction date of FP1 i.e. for this cohort you can use any evidence before September 2024 as long as it is within the last 5 years.

Queries

If I complete a SPE for a particular practice area, do I need my previous employer to write a statement to confirm that I have carried out the practice activities?

SPE’s can be used for any areas you feel competent in and you do not need any verification from previous employers to confirm this. When you sign at the bottom of the template, you are taking responsibility that it is an honest reflection of your experience.

Please ensure it is clear in your SPE what you did and it is a good summary of your experience. We appreciate that is difficult because we are not wanting essays, but we do need a certain amount of detail, as it is a summary of your professional experience.

Queries

If uploading only one piece of info on SPE for a learning outcome should the T1-T4 be 4 across the full time?

If completing 4 SPEs do I have to rate my competence at T1, T2 and T3?

Yes if you are saying that you have previous experience of undertaking something and essentially you have met that LO before commencing FP1 then your assessment rating should be 4 all across T1-T4 times.

If you decide to complete 4 SPEs, you do not need to rate your competence at T1, T2 and T3 but if you are mapping a piece of evidence to a LO that is not part of a SPE, you must rate your competence at all 4 time intervals for that particular learning outcome. ADD TO FAQs.

Queries

If including accuracy checking/clinical checking etc. in the SPE

do I have to provide logs or other evidence to confirm this?

If you choose to write up this area in your SPE, if you have access to your previous logs this would be helpful but not necessary, you can provide examples and a summary of your accuracy checking and clinical screening.

Queries

Is there a minimum number of examples that should be given for each practice point in SPE for those wishing to demonstrate prior learning?

We would expect 1-2 examples for each practice point in the SPE, except the ones we have mentioned – 1 audit, 1 yellow card, 1 safeguarding incident.

NI Centre for
Pharmacy Learning
& Development

SPE

PHARMACIST DECLARATION:	
I declare that the information I have provided in my SPE is a true and accurate reflection of my professional experience and meets the quality criteria for validity and authenticity.	
Signed (pharmacist):	Date:

At the bottom of the SPE template, we ask you to confirm that the information you have provided in your SPE is a true and accurate reflection of your professional experiences.

At any point in the SPE assessment review process, NICPLD may contact you for clarification regarding a piece or pieces of evidence.

Share GQI SPE

Queries

If I use evidence found in practice can I write it up on a template to record what happened to explain reasoning behind assigning it to different LOs?

Yes you can- lots of people write extra reflective records to explain how they feel they meet a specific learning outcome.

Queries

Can I clarify that by remote prescribing you mean talking to patients by telephone or zoom when undertaking medication reviews or having discussions about their medicines?

Yes for remote prescribing it would be great if you could include some examples of OR in your SPE of you undertaking medication reviews, discussions etc. regarding medicines via telephone or zoom. These examples could also include discussions with other healthcare professionals across interfaces.

Queries

In FTY, 3 pieces of evidence were needed per learning outcome – is it correct that only 1 piece of evidence is required per learning outcome for FP1?

Yes, we understand that FTY and FP1 are very similar on purpose as we are trying to ensure everyone is up to the same standard and it can be confusing especially if you have recently completed FTY.

But for FP1, only one piece of evidence is required per learning outcome and one piece of evidence can be mapped to multiple learning outcomes. Just be mindful not to map a piece of evidence to too many learning outcomes - it must be realistic how much 1 piece of evidence can cover.

Templates

- Help structure your evidence
- Certain information does not have to be in specific sections of the form
- There may be duplication
- Be clear and concise
- Use different examples

I feel the templates help structure your evidence really well. If you are using evidence from FTY, it is fine to upload the FTY templates – you don't have to move across.

As long as it is clear to the assessors what actually happened, the information doesn't have to be in the specific sections of the form and the information can also be duplicated in a number of sections to make this very clear e.g. medication reviews.

The portfolio really isn't there to trip anyone up and you won't be penalised over a write up issue. So long as everything is clinically sound and the necessary information is there, you will be fine. You may feel that you are repeating yourself over and over and the reviews have become very long but some of the role is repetitive!

Try to use different examples/morbidities to show your breath of knowledge and experience.

So long as the assessor is clear that you are meeting the level required by the end of it, that's the priority.

You can bullet point your evidence if this is easier for you – as long as all the information is there, the assessor will be happy.

Queries

Is the comments section at the bottom of the templates where the student lists the learning outcomes they are claiming?

Yes, in this section you should write which LOs you feel the evidence meets and why. It's good practice to include it in the body of the text also.

You don't necessarily have to map it to every LO you state though. Each LO must have at least 1 piece of evidence mapped to it on the portfolio.

If you are writing a SPE for a specific practice area, please include your learning outcomes in the body of the text.

Mapping

- Leave until the end
- Choose the best piece of evidence to map
- Reference the learning outcome at the bottom of the template/within body of text (SPE)
- Be very explicit and clear
- Easier for the assessors to mark
- Map at least 1 piece of evidence to each learning outcome

So the final stage once you have your evidence uploaded is mapping it to the particular learning outcome. I would leave this to the end so you can choose the best piece of evidence to map to the learning outcome.

Each piece of evidence that you are going to map to a learning outcome must be stated at the bottom of the template but it must be clear in the piece of evidence how it meets the particular learning outcome – this needs to be really clear for the assessors. At the bottom of the template, you do not have to state again how it means the particular learning outcome – just list them. As already stated, please include the learning outcome within the body of the text in a SPE.

It is important that all pieces of evidence are uploaded to the portfolio, but not every piece has to be mapped to a learning outcome.

It is important that you choose the best piece of evidence to map to the learning outcome (there will be pieces of evidence that won't be mapped). However, the pieces of evidence (practice activities) that are not mapped will still be assessed.

Each learning outcome should be evidenced by at least 1 piece of evidence. We would advise including two examples for each learning outcome in case the first one isn't great to save the assessor coming back to you.

Queries

What do we not map?

As we recommend only mapping one (or two) piece(s) of evidence to each learning outcome, the other pieces of evidence/supporting evidence will be left under files e.g. observed medication reviews

Please upload your checklist of evidence and name files appropriately so its very obvious what it is at a quick glance e.g. medication review 1, not doc 1

Don’t Over-map

We are looking for quality, NOT quantity!

This is why we advise that you only map 1 piece of evidence to each learning outcome.

Assessor feedback

- Include more detail
- Make it really clear how to meet a particular learning outcome (include text from the learning outcome)
- Double check calculations – include context and don't forget units
- SPE – evidence BEFORE you started the programme
- Don't over-map – don't map one piece of evidence to more than 5 learning outcomes
- Double check you have uploaded ALL documents

As this is now cohort 4 of the programme, we see the same feedback from the assessors each time and we thought it would be useful to share some of their top tips.

Firstly, a lot of assessors find there is just a lack of detail in some of the pieces of evidence. Try to make it really clear to the assessor how you meet a particular learning outcome. Even use some text from the learning outcome in the writing to really stress it.

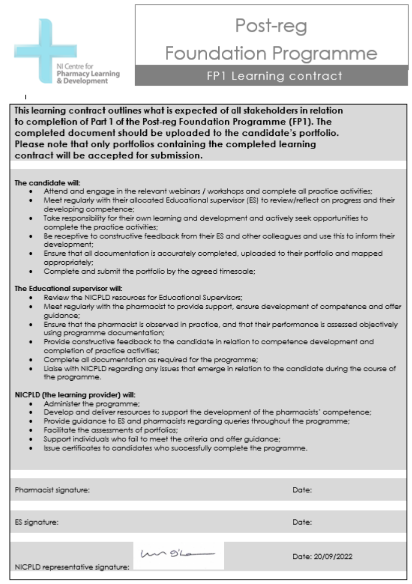
Calculations – the assessors have came back to us with a number of calculation errors. Please double check them. Also ensure you have included context around the calculation e.g. if CrCl – state male/female, age, serum creatinine and add the units to the answer. Making a calculation error could be a patient safety issue so please double check these as that would be an automatic fail.

SPEs – you must only include evidence from before you started the programme. As already mentioned please include examples in your SPE.

Try not to overmap – only map a piece of evidence to a learning outcome if it is very clear how it meets a particular learning outcome. Don't map for the sake of it.

Make sure you have uploaded ALL your pieces of evidence and the checklist of evidence. Every submission people have certain pieces of evidence missing and we have to go back to the pharmacist to request it which just pushes the assessment process back.

Learning Contract



Post-reg

Foundation Programme

FP1 Learning contract

This learning contract outlines what is expected of all stakeholders in relation to completion of Part 1 of the Post-reg Foundation Programme (FP1). The completed document should be uploaded to the candidate's portfolio. Please note that only portfolios containing the completed learning contract will be accepted for submission.

The candidate will:

- Attend and engage in the relevant webinars / workshops and complete all practice activities;
- Meet regularly with their allocated Educational supervisor (ES) to review/reflect on progress and their developing competence;
- Take responsibility for their own learning and development and actively seek opportunities to complete the practice activities;
- Be receptive to constructive feedback from their ES and other colleagues and use this to inform their development;
- Ensure that all documentation is accurately completed, uploaded to their portfolio and mapped appropriately;
- Complete and submit the portfolio by the agreed timescale;

The Educational supervisor will:

- Review the NICPLD resources for Educational Supervisors;
- Meet regularly with the pharmacist to provide support, ensure development of competence and offer guidance;
- Ensure that the pharmacist is observed in practice, and that their performance is assessed objectively using programme documentation;
- Provide constructive feedback to the candidate in relation to competence development and completion of practice activities;
- Complete all documentation as required for the programme;
- Liaise with NICPLD regarding any issues that emerge in relation to the candidate during the course of the programme.

NICPLD (the learning provider) will:

- Administer the programme;
- Develop and deliver resources to support the development of the pharmacists' competence;
- Provide guidance to ES and pharmacists regarding queries throughout the programme;
- Facilitate the assessments of portfolios;
- Support individuals who fail to meet the criteria and offer guidance;
- Issue certificates to candidates who successfully complete the programme.

Pharmacist signature: Date:

ES signature: Date:

NICPLD representative signature: Date: 20/09/2022

Please remember to upload your signed learning contract to your portfolio if you have not already done so.

ePortfolio

- **Contains all learning outcomes for you to map your evidence to**
- **Upload evidence from completed practice activities**
- 1 piece of evidence may be mapped to more than one learning outcome (LO); **do not over map your evidence**
- **We ask you to assess your competence for each learning outcome at the start of the programme (T1) using the following assessment ratings:**

Assessment rating		Definition
0	I have yet to encounter an opportunity	I have not yet met the standard
1	I rarely meet the standard expected	I meet the standard approximately 0-24% of the time
2	I sometimes demonstrate the standard expected	I meet the standard approximately 25-50% of the time
3	I usually demonstrate the standard expected	I meet the standard approximately 51-84% of the time
4	I consistently demonstrate the standard expected (repeatedly and reliably)	I meet the standard approximately 85-100% of the time

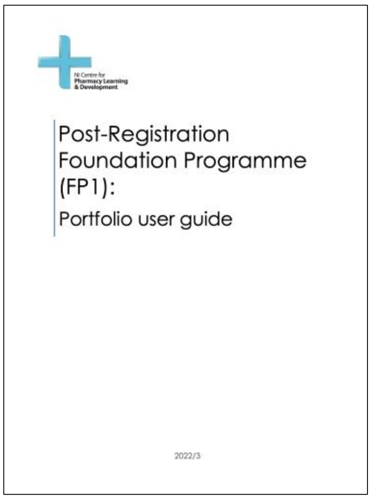
Just to remind you all re the ePortfolio…

The online practice portfolio contains 4 domains based on the 4 practice areas including all 55 learning outcomes and this is where you upload and map your evidence to the different learning outcomes. 1 piece of evidence may be mapped to more than one learning outcome.

We asked you to complete T1 at the start of the programme and then you discussed with your ES/PS when it was best to complete T2, T3 and T4. See table above with the assessment ratings. At this stage hopefully everyone has completed T1, T2 and T3 and are starting to complete T4.

Each domain on the portfolio will be complete when each learning outcome has a T4 assessment rating of 4 and there is at least 1 piece of evidence mapped to each learning outcome.

FP1: Portfolio user guide


NI Centre for Pharmacy Learning & Development

Post-Registration Foundation Programme (FP1):

Portfolio user guide

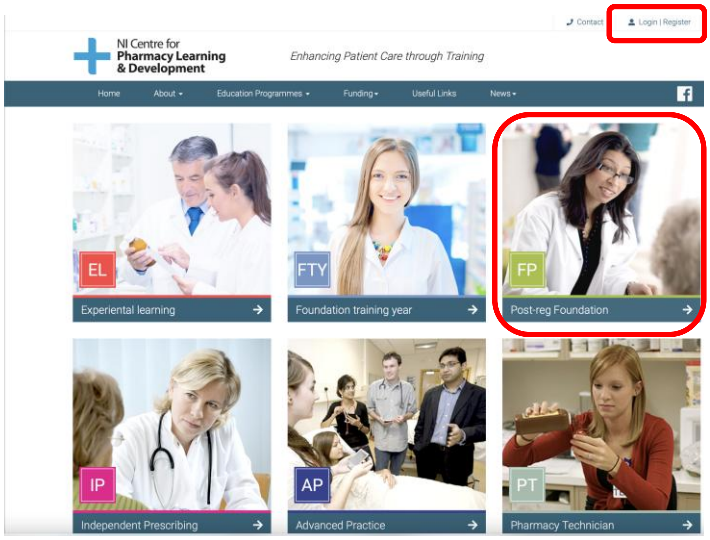
2022/3

- Accessed and downloaded at

  https://www.nicpld.org

There is an in depth step by step guide how to use the portfolio on the website.

FP1: Log into the NICPLD website



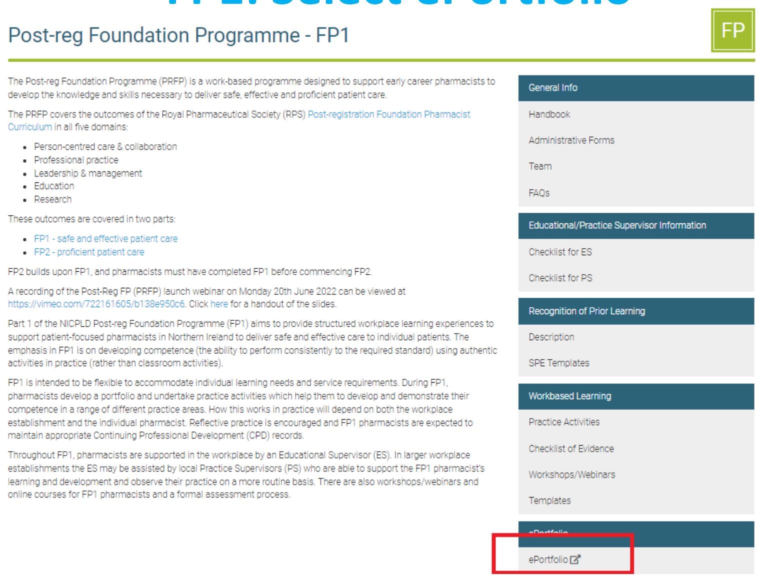
To access the portfolio system, go to the NICPLD website (http://www.nicpld.org) and log in as you would normally.

Click on Post-reg Foundation Programme.

PRFP: Select FP1

You then select FP1

FP1: Select ePortfolio



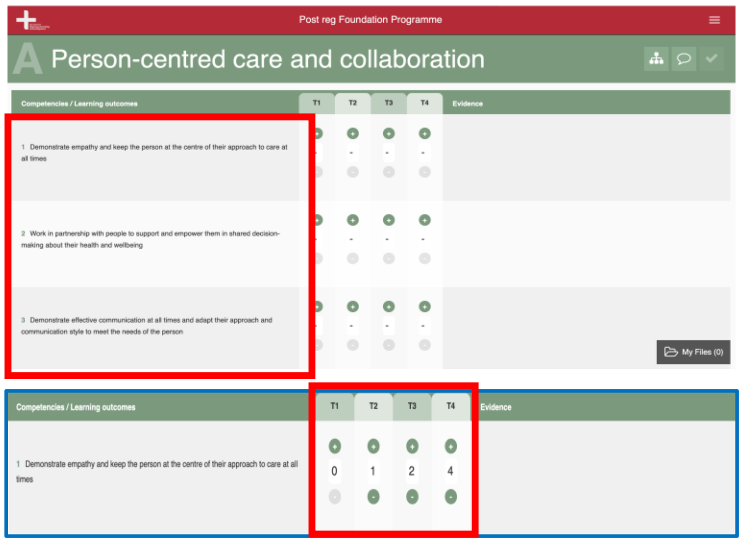
When the Post-reg foundation icon is selected, a sub-menu will appear on the right hand side. The portfolio is the last link on this sub-menu as shown.

Please note you must be logged into the NICPLD website before you can access the online portfolio.

FP1: Navigate between 4 competency clusters / domains

When you initially enter the portfolio system, you will see a set of four **Domains**, presented as coloured boxes across the top of the screen. These four **Domains** represent each of the four practice areas within the RPS Post-Registration Foundation Pharmacy Framework (Person-centred care and collaboration, Professional Practice, Leadership and management and Education and research. Simply click to access each of the **Domains**.

FP1: Rating your competency



Within each Domain, you will be presented with the **Learning outcomes** relevant to that **Domain or practice area.**

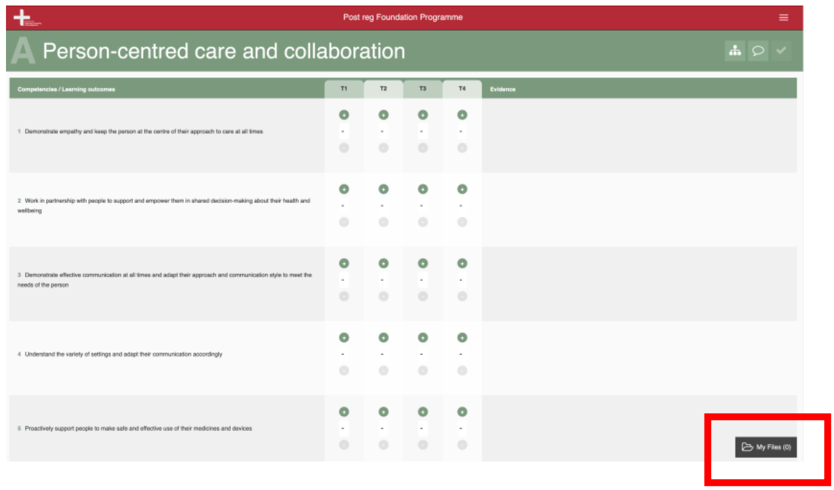
For example, in the screen shot shown **Domain** Patient-centred care and collaboration contains 3 **learning outcomes:**

1. Demonstrate empathy and keep the person at the centre of their approach to care at all times.
2. Work in partnership with people to support and empower them in shared decision-making about their health and wellbeing.
3. Demonstrate effective communication at all times and adapt their approach and communication style to meet the needs of the person.

To the right hand side of the **learning outcomes,** you will see a self-assessment ratings panel. As previously discussed, this panel allows you to self-assess your competence level at four time intervals during the course. These time intervals (T) are designated as T1 (start of course), T2, T3 and T4 (end of course).

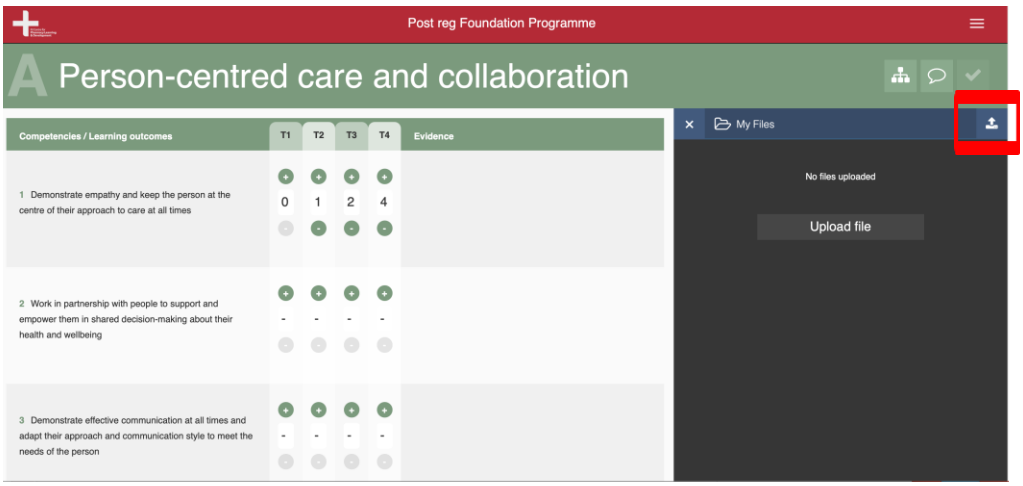
Using the + button increases the self-assessment rating and using the – button decreases the self-assessment rating. Your Educational supervisor/ Practice Supervisor will assist you in assessing your competence in relation to each of the 55 post-reg foundation pharmacy framework learning outcomes.

FP1: Uploading evidence to the portfolio



To upload evidence to the portfolio, open the file manager. To do this, select the button entitled "My files" which is located at the bottom right-hand corner.

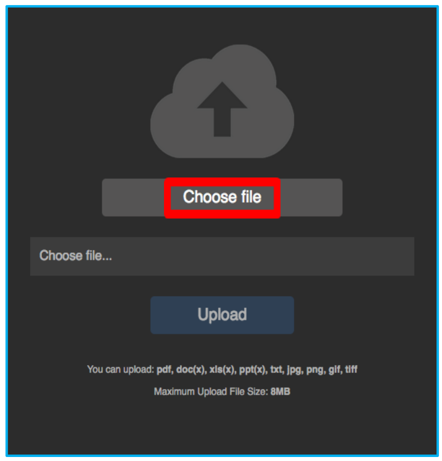
FP1: Uploading evidence to the portfolio



When the file manager is open, a list of files that have been uploaded will appear. If this is the first time the file manager has been opened, the list will be empty as files have yet to be uploaded.

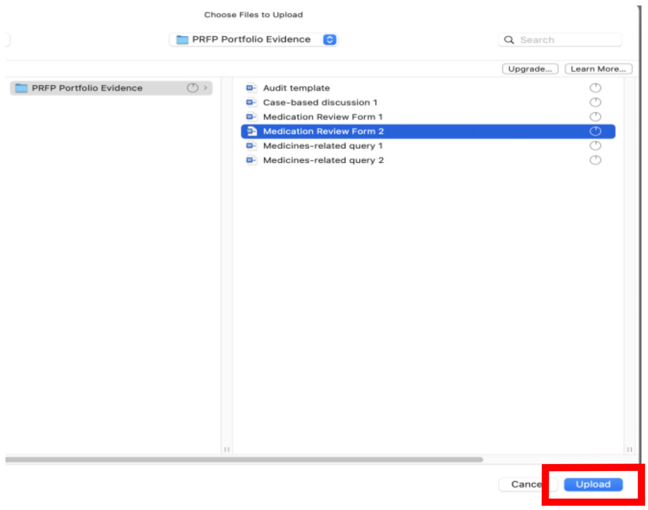
To the top right-hand side of the file manager there is an upload button, clicking this will open the file upload form.

FP1: Uploading evidence to the portfolio



To upload a new file, click on the “Choose file to Upload” button.

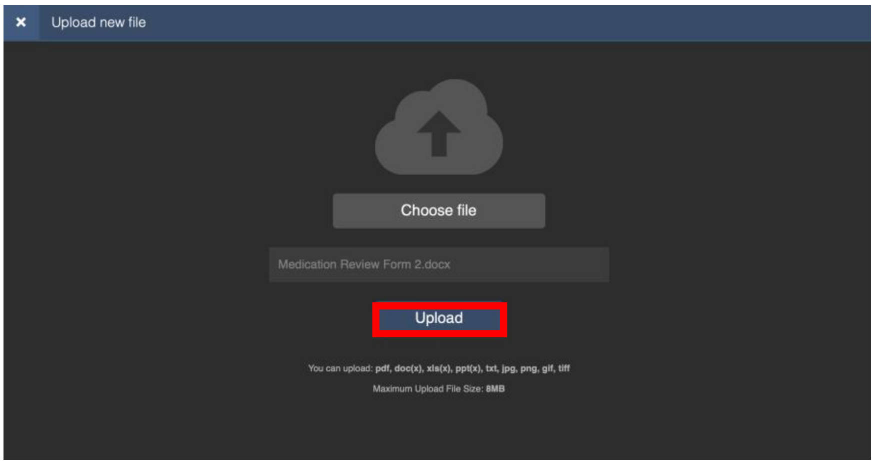
FP1: Uploading evidence to the portfolio



The browser file finder window will now open. Use this to navigate to the file that you wish to upload and click open.

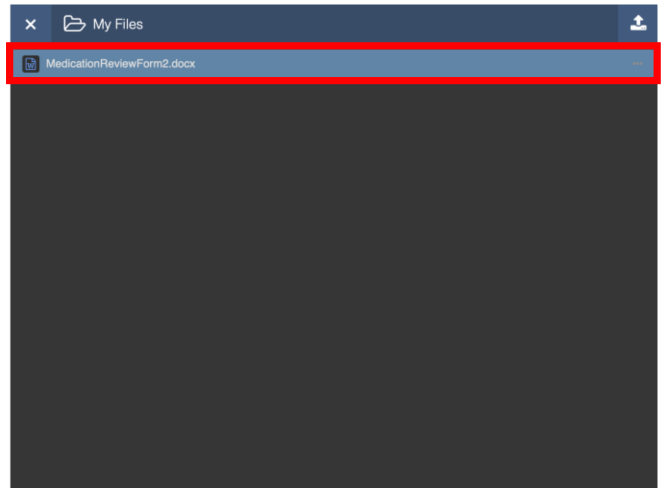
The file will now be selected and ready for upload.

FP1: Uploading evidence to the portfolio



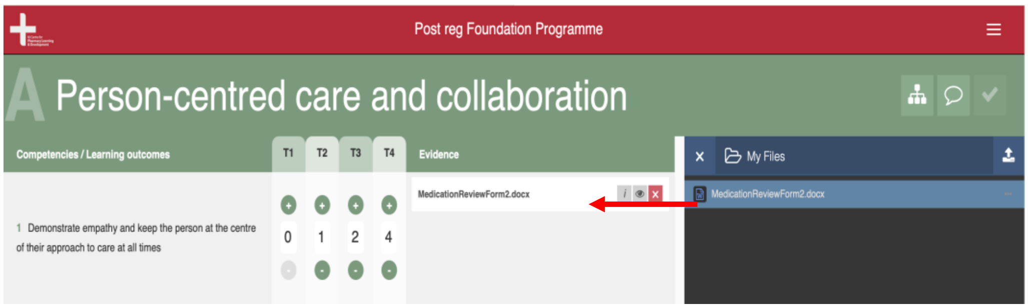
Click the ‘Upload’ button as highlighted to complete the upload of the file into the Portfolio.

FP1: Uploading evidence to the portfolio



The newly uploaded file will now be visible in the file manager window in the Portfolio.

FP1: Mapping evidence to a learning outcome



Once a piece of evidence has been uploaded into the portfolio, it then becomes available to provide evidence against one or more **learning outcomes.**

In order to link an uploaded file to a particular **learning outcome**, drag the file to the 'Evidence' column (right hand side of the self-assessment ratings panel) of that **learning outcome**.

You may use one piece of evidence (uploaded file) against multiple **learning outcomes** by repeating this process in each of the relevant **learning outcomes.** For example, if the file labelled 'MedicationReviewForm2.doc' provides evidence against learning outcomes 1 and 2, then drag 'MedicationReviewForm2.doc' from the right-hand side to learning outcome 1, and then repeat this procedure dragging 'MedicationReviewForm2.doc' again from the right-hand side to learning outcome 2.

Please upload your 'Checklist of evidence' – makes it easier for the assessor to review if a piece of evidence is missing.

FP1: ePortfolio Domains Completed

Blue ticks demonstrate that the domains are completed i.e. self assessment rating of 4 for each LO and at least one piece of evidence is mapped to each LO.

NI Centre for Pharmacy Learning & Development

Intention form

NI Centre for Pharmacy Learning & Development

Post-reg Foundation Programme – FP1

Cohort 4 - FPR intention

Section 1 - to be completed by the FP1 pharmacist:

Name of FP1 pharmacist:
PSNI registration number:
Work establishment:

FP1 PHARMACIST DECLARATION:

I intend to submit my FP1 portfolio for a Foundation Portfolio Review (FPR) by:	Wednesday 16th October 2024 (12pm)	Y / N
	Wednesday 19th March 2025 (12pm) *(please move me into FP1 Cohort 5)*	Y / N
	OTHER:	

OR

I DO NOT intend to submit my FP1 portfolio for a Foundation Portfolio Review (FPR), and do not require an FP1 Certificate of Achievement. I have completed FP1 for my own CPD only, because I have recently:	CHANGED my sector of practice	Y / N
	RETURNED to practice *(following a period of extended leave)*	Y / N
	OTHER:	

Signed (FP1 pharmacist):	Date:

Section 2 - to be completed by the Educational Supervisor (ES):

Name of ES:
PSNI registration number:
Work establishment:

ES DECLARATION:

I support this FP1 pharmacist's Foundation Portfolio Review (FPR) intention.

Signed (ES):	Date:

Please email completed form to nicpld-postreg@qub.ac.uk **by Wednesday 11th September 2024.**

You will have not have received this form yet. We will send it out in the new year. If you don't plan to submit your portfolio for review and want to defer to the next submission date with the next cohort you can just let us know.

Portfolio Submission

- **Foundation Portfolio Review ONLY**
- All 4 domains must be complete within the ePortfolio (demonstrated by a blue tick in each domain box)
  - at least one piece of evidence is mapped to each LO
  - Self assessment rating at T4 = 4 for each LO
- All practice activities must be completed and the associated templates uploaded to the portfolio, even if they are not mapped to a specific learning outcome.
- Complete a FP1 portfolio submission form (available on the PRFP webpage) and email to NICPLD-PostReg@qub.ac.uk (section for ES to complete also).
- See your handbook for portfolio submission dates for:

The programme is assessed via submission of a portfolio.

The portfolio is complete when at least one piece of evidence is mapped to each learning outcome and the self-assessment rating is 4 at T4 for each learning outcome.

All practice activities must be completed and the associated templates uploaded to the portfolio, even if they are not mapped to a specific learning outcome.

Portfolio submissions are accepted twice a year. See dates above. The closing time is 12noon.

A 2-week extension for portfolio submissions may be given in Exceptional circumstances by completing a portfolio extension request form 1 week before the specified submission date. This form can be downloaded on the website – www.nicpld.org.

Submitted portfolios will be assessed by experienced pharmacists. We will ask assessors to declare any conflict of interest before proceeding with assessment. The assessor must verify that sufficient relevant evidence has been provided to demonstrate competence for each learning outcome.

ES Role in Assessment of the ePortfolio

- Confirm the portfolio contains all completed FP1 practice activities (see evidence checklist) or SPE
- Confirm there is at least one piece of evidence for each LO in the portfolio
- Self assessment rating at T4 = 4 for each LO
- Confirm the evidence provided meets the quality criteria for validity, authenticity, currency and sufficiency
- Sign the ES section of the portfolio submission form confirming all the above

Your ES will review your portfolio and confirm whether your evidence is:

- Valid – relates to the LOs which you have mapped to
- Authentic – your own work
- Current – evidence that has originated within the last 5 years
- Sufficient – at least 1 piece of evidence for each LO.

Note: ES is not making a decision re pass/fail

The ES does not have to check every piece of evidence – they can review a couple to ensure you are on the right track.

FPR Assessment

Each domain will be assessed according to the grade descriptors outlined below.

Pass	Borderline Pass	Fail
Demonstrates that >70% of the learning outcomes have been met	Demonstrates that 50-70% of the learning outcomes have been met	Demonstrates an insufficient amount of the learning outcomes have been met (<50%)
Shows that patient safety is never jeopardised	Shows that patient safety is never jeopardised	Shows that patient safety is jeopardised*

*If patient safety is compromised by the candidate, they will automatically be awarded a 'Fail' for the domain

This table is to demonstrate and remind students to focus on the learning outcomes not the practice activities, the practice activities are the tools used to demonstrate the learning outcomes have been met and that is how you pass the programme.

FPR Assessment

- The FPR process will have two outcomes:

PASS - The candidate achieves a minimum of two pass marks and two borderline marks across the four domains to achieve an overall global pass of the portfolio. Two of the pass marks must be in the person-centred care & collaboration and professional practice domains.

FAIL – The candidate will fail the FPR in any of the following circumstances:

- They achieve one or more fail marks across the four domains
- They achieve only one pass mark across the four domains
- They achieve three or more borderline marks across the four domains
- They achieve a mark of borderline or fail in the person-centred care & collaboration and/or professional practice domains.

All portfolios assessed as a 'FAIL' in the first round of assessment will be double marked by a second assessor. If the first and second assessors do not agree on the assessment outcome for the portfolio, they will discuss the portfolio to reach a consensus about the final outcome. In the unlikely event that consensus cannot be reached, a third assessor will be asked to review the portfolio.

If necessary, and at any point in the FPR process, NICPLD will contact the candidate for clarification regarding a piece or pieces of evidence.

The same assessment criteria applies to SPE submissions.

All candidates whose portfolio is assessed as having reached the 'PASS' standard and have demonstrated their ability to deliver safe and effective patient care, will be issued with an FP1 Certificate of Achievement. Those candidates whose portfolio has been assessed as 'FAIL' will be provided with feedback on the remedial work required before they can resubmit their portfolio at the next portfolio submission date (6 months time)

Top tips!

- Arrange a meeting with your Educational Supervisor to review evidence
- Continue documenting
- Plan how you will complete the rest of your portfolio before submission date

It is up to you to document your evidence as you go along. Your portfolio is an ongoing activity.

Your ES is there to help. They are all so busy, so it is your responsibility to contact them to arrange a meeting. Reach out to your ES in a timely fashion. Don't leave it to the last minute. It would be good to get feedback from your ES on a few pieces of evidence.

Please send us through evidence for feedback to ensure you are on the right track. We are here to help! 1-2 pieces of evidence each maximum.

nicpld-postreg@qub.ac.uk

Evaluation form

Thank you all for taking part in the programme. We really hope you have found it useful to your practice. Best of luck completing and submitting your portfolio!