

HEE Foundation Year Assessment Strategy





Trainee Pharmacist Foundation Training Year 2021/22



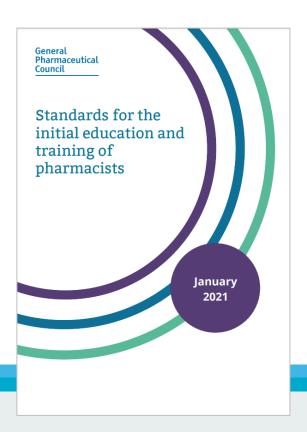
IETP: New Learning Outcomes

There are 55 Learning Outcomes, which are organised into 4 domains:

- Person-centred care and collaboration
- Professional practice
- Leadership and management
- Education and research

These replace the performance standards

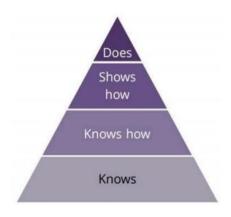








- Foundation Training Year Assessments:
 - The GPhC Registration Assessment
 - Required number of weeks in training
 - Sign-off against all of the Learning Outcomes by the Designated Supervisor
- The attainment of the Learning Outcomes is differentiated between the MPharm and the Foundation Training Year by the **level** at which the learning outcome must be demonstrated by the student/trainee pharmacist, and the context in which the Learning Outcomes are demonstrated.
- These levels are described by a competence and assessment hierarchy known as 'Miller's Triangle'. For the Foundation Training Year the majority of the learning outcomes must be demonstrated at the 'Does' level of Miller's Triangle, that is in an everyday situation *repeatedly and reliably*.



NHSHealth Education England

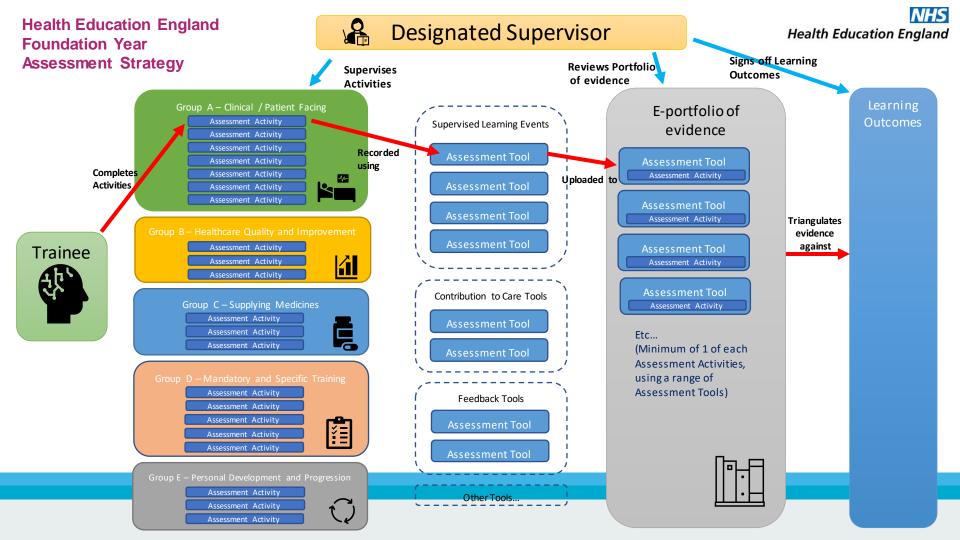
The HEE Foundation Year offer

- An overarching practice-based Assessment Strategy, which describes a range of Assessment Activities to be completed that are mapped to the Learning Outcomes for the year
- The Health Education England Foundation Training **Year e-portfolio**, which the completed Assessments are uploaded into
- Guidance and training materials for Designated Supervisors on how to apply the Assessment Strategy and e-portfolio
- A range of web-based learning materials for Trainee Pharmacists



The HEE Trainee Pharmacist Foundation Training Year Assessment Strategy

- The Trainee Pharmacist completes a range of defined practice-based Assessment Activities.
- These **Assessment Activities** are mapped to the **Learning Outcomes**, and as a whole support the provision of evidence that the **Trainee Pharmacist** demonstrates all of the **Learning Outcomes**.
- Records of these practice-based Assessment Activities are uploaded by the trainee into an e-portfolio. The Designated Supervisor oversees the Assessment Activities and reviews the evidence provided by them within the e-portfolio.
- This process allows the **Designated Supervisor** to determine when each **Learning Outcome** has been satisfactorily demonstrated, supporting and assuring the final sign-off of the **Learning Outcomes** by the **Designated Supervisor**.



Assessment Activity	Description			
Group				
Group A: Clinical and	· · · · · · · · · · · · · · · · · · ·			
patient facing activities	directly 'patient facing' (e.g. involve a consultation with a patient), and others involve supporting the care of a patient through an interaction with another healthcare professional or at distance (e.g. providing a response to a medicines related enquiry).			
Group B: Healthcare	These activities are related to improving healthcare quality through broader actions such as:			
quality and improvement	 A quality improvement project An audit Supporting the education and training of other members of the healthcare team 			
	As part of these activities, trainees are required to include a focus on public health and health inequalities.			
Group C: Supplying medicines activities	These activities relate to the safe and effective supply of medicines. These activities are typically more related to technical skills and processes such as dispensing and accuracy checking, but also ensuring the legality and technical accuracy of prescriptions or other medicines-supply processes.			
	It is expected that the training site will have their own local procedure for assessing some components of this (e.g. dispensing accuracy and accuracy checking), so for some activities, the trainee should include evidence of completion of these local assessments, rather than needing to produce specific separate evidence.			
Group D: Mandatory and Specific Training	These activities relate to learning outcomes that can be demonstrated through the completion of local training, including mandatory training and locally identified first-aid training.			
Group E: Personal	These activities support the planning of learning during the Foundation Training Year (including the Learning Needs			
Developmentand	Analysis and Personal Development Plan cycles), and also the opportunity to provide specific evidence for learning			
Progression	outcomes that may have been more difficult to meet through other activities.			

Activity Group	Activities	Specific Examples	Information	Example Assessment Tool / Ev idence?
Group A: Clinical and Patient Facing Activities		Secondary care to primary care (discharge from hospital) Primary care to secondary care (admission into hospital) Discharge Medicines Service (community pharmacy service)	patient when they move from one sector of healthcare to another	Mini-CEX, Contribution to Care log DOPS, MiniCEX, Contribution to care log
	Patient consultation: Medicines use	Counselling on a new medicine in any sector Discharge Medicines Service (community pharmacy service) New medicines service (community pharmacy service)	Conducting a consultation with a patient on how to use a medicine or device that has been prescribed for them	MRCF
	3. Patient consultation: Diagnose / assess / recommend	Responding to symptoms consultation Using a patient group direction Community Pharmacy Consultation Service (community pharmacy service) Physical examination skills: Pulse, respiratory rate, oxygen saturation, temperature, blood pressure. Prescribing consultation	presenting with a condition or symptoms. The patient is assessed, diagnostic reasoning is used and a decision / recommendation is made	Mini-CEX, MRCF, Contribution to Care log, DOPsfor physical assessments carried out Mini-CEX, Contribution to Care log, DOPS
	4. Medicines Optimisation	Identify a clinical problem, generate solutions and implement to resolve Therapeutic drug monitoring Medication Review	Clinical Screening of a prescription/the medicines of a patient, identification of one or more clinical issues, clinical reasoning supporting the generation/implementation of a recommendation to optimise medicines. This recommendation is made to a	Mini-CEX, Contribution to Care
	5. Patient focussed public health Intervention	NHS Health Check (community pharmacy or general practice) Antimicrobial stewardship intervention Smoking cessation intervention	Conducting a consultation with a patient resulting in a public health intervention. This may include but is not limited to, smoking cessation, weight loss, infection prevention and control, use of antimicrobials.	
	6. Medicines safety activity	MRHA Central Alerting System – medicine recall, notifications and patient safety alerts Yellow card MHRA report Incident report Error report	Completion of an activity in relation to medicines safety. This may be related to a specific patient (e.g. completion of a Yellow Card report) or a broader activity relating to a patient safety alert or actioning a	DOPS DOPS DOPS
	7. Responding to a medicines query	Enquiry from a patient, carer, etc Enquiry from a healthcare professional	Receiving and responding effectively to a medicines related enquiry relating to a specific patient. The enquiry may come from a healthcare professional or the patient/carer etc.	Care log,

The Assessment Tools



Supervised Learning Events

Mini clinical evaluation exercise (Mini-CEX)

Direct observation of practice (DOPS)

Case-based discussion (CBD)

Medicines related consultation framework (MRCF)

Contribution to Care Tools

Contributions to care logs

Reflective summaries

Feedback Tools

360 feedback tools

Patient Satisfaction
Questionnaire

Other Evidence

Learning Needs
Analysis

Pharmacy Peer Assessment

Competency Logs

CPD record

Miscellaneous: E.g. Projects Local Training



Any Questions?

https://www.hee.nhs.uk/our-work/pharmacy/trainee-pharmacist-foundation-year-programme