

**JPB CONTENT & ASSESSMENT REVIEW GROUP MEETING
MINUTES**

Date and Time: 1.00pm on Thursday 29th March 2012

Venue: RS3, JPB Offices
21 Russell Square, WC1B 5EA

CARG Membership:

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| Graham Davies | JPB – Chair | GD |
| Karen Hong | Kings College London | KH |
| Lindsay Morgan | University of East Anglia | LM |
| Andrew Staples | University of East Anglia | AS |
| Ian Bates | UCL SoP | IB |
| Jane Portlock | UCL SoP | JP |
| Rosemary Dempsey | University of Portsmouth & Southampton University Hospitals NHS Trust, | RD |
| Linda Dodds | Specialist Clinical Pharmacy Services, East and South East England | LD |
| Chris Cairns | Kingston University | CC |
| Chetan Shah | University of Hertfordshire | CS |
| Richard Bateman | Quality assurance | RB |
| Paul Forsey | Technical Services | PF |
| Bridget Rankin | Medicines Information | BR |
| Roisin Kavanagh | UCL SoP | RK |
| Alison Innes | UCL SoP | AI |
| Shivaun Gammie | Medway School of Pharmacy | SG |
| Barry Jubraj | UCL SoP | BJ |
| Satinderjit Kaur Bhandal | Reading University | SB |
| Elaine Sharp | University of Brighton | ES |
| Nikkie Opara | University of Hertfordshire | NO |
| Helena Herrera | University of Portsmouth | HH |
| Neil Haribhai | UCL SoP | NH |

| | Actions |
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| <p>1) Apologies</p> <p>Neil Haribhai</p> <p>Present: Graham Davies (GD, UCL and KCL), Alison Innes (AI, UCL), Roisin Kavanagh (RK, UCL), Barry Jubraj(BJ, UCL), Alicia Gaze (UCL – note taker), Andrew Staples (AS - UEA), Bridget Rankin (BR, Regional MI), Chetan Shah (CS, Herts), Elaine Sharp (ES, Brighton), Richard Bateman (RB, Regional QA), Satinderjit Bhandal (SB, Reading), Shivaun Gammie (SG, Medway), Sue Ladds (Clinical Pharmacy Group SEC).</p> | |

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| <p>2) Minutes of previous meeting (17th November 2011)</p> <ul style="list-style-type: none"> • South East Coast plans to move to a 2 DAP system ‘due to start in March 2013’ as confirmed by SG • Neil to confirm contact with Emma Wright regarding outstanding item from minutes and report to next meeting. | <p>NH to confirm contact with Emma Wright</p> |
| <p>3) Matters Arising</p> <p>a) Review of action points from 17th November 2011</p> <p>b) JPB Partners Website Update</p> <ul style="list-style-type: none"> • RK hopeful to have a new mini-PAT system by September. Needs to meet with David and to discuss; it is likely to be a system available for everyone at SoP not just the Diploma. E-portfolio could be another option and input from other sites would be appreciated where possible • JPB website – spelling/grammar mistake on one of the pages (CS to confirm where). No direct link to Reading Pharmacy course from homepage. GD suggested something more professional needs to be put in place. • List of accredited centres – it is challenging to keep it up to date (SG); discussion whether it is absolutely necessary to have. | <p>RK to meet with David West (UCL SoP) regarding mini-PAT access for September 2012.</p> <p>Errors to be corrected on the JPB website. GD and NH to meet with WW & GF (South East Coast) to discuss hosting JPB webpage</p> |
| <p>4) Acute Sector Programme Parity</p> <p>a) Curriculum –Review</p> <ul style="list-style-type: none"> • Technical Pharmacy curriculum guide – recently reviewed and thoroughly updated, no further fundamental changes needed and no major issues to address. The support pack is helpful; however it may be useful to make DOPS part of the experience either as an additional element or as a replacement in the agreed list of workplace based assessments (portfolio list). • MI – several issues; reduction in MI services in certain Trusts has affected MI specific rotations and practitioners struggle to meet all criteria, especially as there is a lack of observation and structured rotation. DOPS is being developed to streamline assessment and perhaps changing the name of the MI curriculum may help to present this as a core element requiring assessment in clinical as well as MI areas. MICAL is currently available to practitioners and tutors. An online programme which involves dummy assessments and tutorials accessible from the Trust sites. The group agreed that consideration should be given to establishing a central MI study day to support trusts that have no MI service. | <p>MI education sub-group to consider re-badging of curriculum title and DOPS development.</p> <p>JPB interested in purchasing MICAL, BR to find out if HEIs are eligible and the cost of purchase</p> |

- Patient services – no issues raised or major changes needed; the global learning objectives appear to be the same as in the Clinical Services curriculum guide, it may be useful to add a more patient services defined set of objectives at the end of the current global objectives.
- Clinical Services – reviewed and improved last year; no issues reported.

Other Issues

Highlighting and introduction of Clinical Trials learning outcomes were discussed (BJ). Original idea was to make it into a DAP until the generic DAP idea arose. Feedback from CARG for BJ/TE: a lot of undergraduate aspects of clinical trials involved and a sense of unnecessary duplication of information; it could be divided into core curriculums or DAPs instead.

DOPS; discussion took place about developing a training video for DOPS, it may not be clear what situation DOPS should be used and exactly how to use it. Proposal that DOPS should be a compulsory part of portfolio however it was agreed that DOPS could be used where appropriate by HEIs to establish whether (in the future) it should form part of the core JPB assessment requirement.

- Generic DAP (BJ) – currently on the final draft consisting of the best pharmacy outcomes and generic topics which makes it more flexible and easier to use for all Trusts. The aim is to re-focus on skills and development of students rather than emphasis on each specialisation. Suggestion that (perhaps in the future) MI & Technical Pharmacy consider a series of generic DAPS.

b) Assessment Design Group

- ADG (AI) – meeting recently held focused on approving new exam questions; roughly 20 new MCQ questions to be added to the pool for this year.
- GLF – issue of being used as summative assessments; the NHS may misuse it as an imposition not aspiration tool. Need to make others understand that it is formative and should be used as intended.
 - Terminology and descriptiveness – to be reviewed, it is about personal development not performance management, may be useful to put it forward for feedback from others
 - UEA mapping to the GLF at the competency level and have made the tutor sign off at the end of each level optional for Trusts.
 - Medway & Brighton: both use the GLF and request it to be signed off by tutors
 - The Summary Matrix document – seen as a ‘mapping form’ it may be useful to integrate and streamline some of the boxes to allow practitioners more manoeuvre in how they document the evidence they provide (less boxes to tick)

RK to review associated documentation.

BJ to feed back to TE (Northwick Park) with regards to clinical trials curriculum guide

All to reinforce formative nature of GLF.

RK/AI to review GLF matrix document to allow easier mapping of evidence.

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| <p>5) Tutor Support</p> <p>a) General Update</p> <ul style="list-style-type: none"> • There has been a change in terminology, focus on ‘Supervisor’ rather than ‘Tutor’ • BJ to create online support for Induction and Refresher content to aid understanding of key aspects. Also to add FAQs to further support supervisors new to the role. • Training for EPDs – BJ feels it would be appropriate to have something in place to aid EPDs in Hospitals | <p>BJ to organise online training supported by audio document(s).</p> |
| <p>6) Update from partner sites</p> <ul style="list-style-type: none"> • Brighton and Medway: a few minor issues with learning sets for hospital programme but overall going well and developing. For the community programme (Medway SoP) 3 out of 4 practitioners not interested in continuing beyond the certificate level partly due to funding and pressures of studying and working. • UEA: Started part 2 of community Diploma which is progressing well. Exploring future funding of part 1 to secure long term future of programme. • UCL SoP: PG DipGPP assessments held Feb/March and Exam Board to be held on 30th March 2012; 30 new students to join programme from March 2012. • Reading: Relatively new to the Diploma and would like to thank for all the support they have received from other sites; the first assessments were held and the Exam Board is due on the 24th May 2012; generally moving forward and initiating DAPs for the first time. • Hertfordshire: Programme Management meeting held in January; practitioners don’t seem to be focusing on learning outcomes therefore they are being motivated to do so by sitting extra assessment (probably in the form of MCQs) at the end of the 2years. • King’s College: currently have 12 community pharmacists but 2 have withdrawn due to workload pressures; overall the standard of clinical work produced by students is generally good. | |
| <p>7) A.O.B</p> <ul style="list-style-type: none"> • Electronic portfolios were discussed – various types tried but none seem flexible enough or practical for what is needed; RK to meet with contact (via Tess Fenn at GSTT) to discuss a programme they use for NVQ. • LETBs (local education and training boards) – GD confirmed that this will be the future approach to commission programmes so that both employers and providers need to be aware of contacts and to try and influence process to ensure that the needs of pharmacy are considered. | <p>RK to meet with contact about online portfolio system</p> |

8) Date of Next Meeting

12th July 2012, 1pm – 3pm

15th November 2012, 1pm – 3pm