An European e-portfolio:

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Asking whether learning portfolios are good for learning or assessment is a bit like asking whether drugs are good for treating disease.

Portfolios were introduced with the aim of improving the learning and assessment of doctors. Erik Driessen believes that they work well when used correctly, but Geoff Norman remains unconvinced.

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**Evidence of reliability and validity is quite sparse**

Portfolio was introduced with the aim of improving the learning and assessment of doctors. Erik Driessen believes that they work well when used correctly, but Geoff Norman remains unconvinced.
Introducing portfolios is like buying new shoes: one size doesn’t fit all. Careful fitting is essential.

Are learning portfolios worth the effort?
Portfolios: one size doesn’t fit all

**Overviews**
Monitoring and planning

- Log book
- Work place pf
- The original
- Year 1 pf

**Assessment Material**

**Guiding Reflections**
### Portfolios for work place based learning

**Dental Evaluation of Performance (D-EP)**

<table>
<thead>
<tr>
<th>Foundation Dentist (FD) Name</th>
<th>GDC No.</th>
<th>Description of case / encounter</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Learning Objective(s) Identified**

<table>
<thead>
<tr>
<th>Learning Objective(s) Identified</th>
<th>Date identified</th>
<th>Identified by...</th>
<th>How will the learning objectives be addressed, and by when?</th>
<th>Learning Objective achieved...</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Assessment</td>
<td>Reflection</td>
<td>Other (please specify)</td>
</tr>
<tr>
<td>Better communication with DCP</td>
<td>3 Sept 09</td>
<td>✓</td>
<td>✓</td>
<td>Feedback from trainer, discuss with DCP.... By Dec 09</td>
</tr>
<tr>
<td>Planning multiple XLAs</td>
<td>7 Oct 09</td>
<td>✓</td>
<td>D-CbD</td>
<td>Tutorial with trainer &amp; further practice By Jan 2010</td>
</tr>
<tr>
<td>Better record keeping</td>
<td>14 Oct 09</td>
<td>✓</td>
<td>D-CbD</td>
<td>Discuss with trainer &amp; Self study – By Jan 2010</td>
</tr>
<tr>
<td>OPG Technique</td>
<td>7 Nov 09</td>
<td>✓</td>
<td>D-CbD</td>
<td>Internal Audit - Tutorial on OPG controls – planned late January</td>
</tr>
<tr>
<td>Identify signs of anxiety in patients at an earlier stage</td>
<td>14 Nov 09</td>
<td>✓</td>
<td>D-EP</td>
<td>Anxiety control study day on Dec 6th</td>
</tr>
<tr>
<td>Management of medical emergencies</td>
<td>16 Nov 09</td>
<td>✓</td>
<td>D-EP</td>
<td>Medical Emergency in practice - CPR Training on 4th Dec</td>
</tr>
</tbody>
</table>

**Areas of good performance**

- [ ] __________________________________________________________________________
- [ ] __________________________________________________________________________

**Areas for development before completion of DFT**

- [ ] __________________________________________________________________________
- [ ] __________________________________________________________________________

**Advice Review at 3 Months: Adviser Comments:** Progress satisfactory? [ ] Yes [ ] No Signature ________________________

**Peri-Periodontal therapy & mgt soft tissues**

<table>
<thead>
<tr>
<th>Simple scale</th>
<th>Complex care</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>1</td>
</tr>
<tr>
<td>8</td>
<td>5</td>
</tr>
</tbody>
</table>

**FD signature ______________________ Date ____________ Trainer signature ______________________ Date ____________**
Welcome Assistant Gynaecology
You are logged in as resident in training Gynecology at Maastricht Universitair Medisch Centrum in Maastricht.
<table>
<thead>
<tr>
<th>Date</th>
<th>Form</th>
<th>Year/Sem</th>
<th>Department</th>
<th>Concerning</th>
<th>Val.</th>
<th>Level</th>
<th>Supervision</th>
<th>View</th>
</tr>
</thead>
<tbody>
<tr>
<td>05-7-11</td>
<td>Mini-CEX-P</td>
<td>1-1</td>
<td>MUMC+/Gyn</td>
<td>Patient contact</td>
<td>yes</td>
<td>Above level</td>
<td>Moderate</td>
<td>View</td>
</tr>
<tr>
<td>30-6-11</td>
<td>Mini-CEX-P</td>
<td>1-1</td>
<td>MUMC+/Gyn</td>
<td></td>
<td>no</td>
<td>At level</td>
<td>Moderate</td>
<td>View</td>
</tr>
<tr>
<td>28-6-11</td>
<td>CAT</td>
<td>1-1</td>
<td>MUMC+/Gyn</td>
<td></td>
<td>no</td>
<td>At level</td>
<td>Moderate</td>
<td>View</td>
</tr>
</tbody>
</table>
EPASS

Assessment instruments

- Mini-cex
- OSATS
- CAT
- Multisource feedback
- Letter assessment
- Activity registration
- Knowledgetests
- Simulationtests
- ...

Score on competency profile
EPASS

• Both Likert-scale items and narrative fields

• Competence development??
EPASS

Rating form

Scores

Longitudinal development

Cohort scores

1.1: 3.5
1.2: 4.2
2.1: 5.0
2.2: 4.3
7.4: 3.4
Competency profile (1)

Monitor progress for each of the seven CanMEDS-competences
Comparison between the score of the resident and the average score of his/her peers.
Competency profile (3)

1: Medical expert

Every blue dot corresponds to an assessment form included in the portfolio.
An European e-Portfolio

• Do it to yourself before others do it to you!
• Create as much ownership over the process as possible

COMMENTARY

National, European licensing examinations or none at all?

C. P. M. VAN DER VLEUTEN
Maastricht University, The Netherlands
An European e-Portfolio

• Agreement on:
  – Where is it used for? (goals)
  – Whom have access?
  – What goes in
    • Competencies
    • Criteria
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- Other specialties interested:
  - Intensive care
  - Gynaecology (fellows)

- Video assessment
More information and reading

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