Priming a training community for workplace based assessments

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Introduction

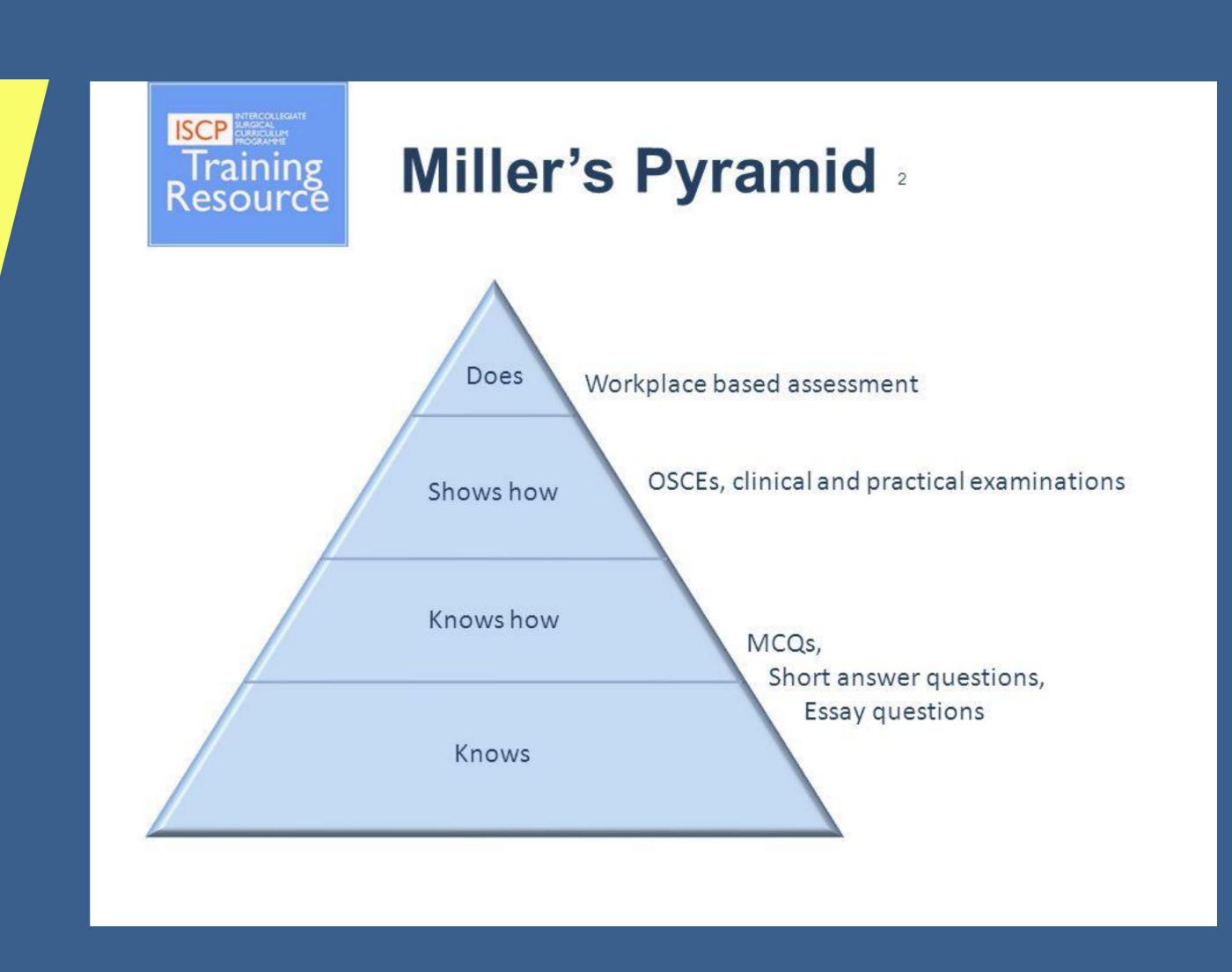
- Medical training programme increasingly based on competency frameworks¹.
- Workplace based
 assessments are the
 foundation of evidence of
 achievements².
- Experience with WBAs consistently expresses disappointment at level of engagement by trainees and trainers^{3,4}.
- Need to focus on tailoring of learning conferred by WBAs.
 Such tailoring only by heavy user input into design.

Methods.

- 1. National Assessment
 Fellow extensive
 consultation with GP
 Training Community
 through workshops
 surveys, focus groups.
 - 2. WBAs subjective and objectively assessed⁵.
 - 3. National policy and agreement by September 2018

Outcome Measures

- National training policy on the use of WBAs
 - 3 nationally agreed
 WBAs in widespread
 use by Trainees by Jan
 2019



References:

1.Schultz K, Griffiths J, Lacasse M. The Application of Entrustable Professional Activities to Inform Competency Decisions in a Family Medicine Residency Program. Acad Med 2015;90(7):888–97.

^{2.}Barrett A, Galvin R, Steinert Y, Scherpbier A, Shaughnessy AO, Walsh G, et al. Profiling postgraduate workplace - based assessment implementation in Ireland: a retrospective cohort study. Springerplus. 2016;5:13.

^{3.}Barrett A, Horgan R. Is the learning value of workplace-based assessment being realised? A qualitative study of trainer and trainee perceptions and experiences. Postgrad Med Educ. 2016;0:1–5.

^{4.}Barrett A, Galvin R, Steinert Y, Scherpbier A, Shaughnessy AO, Horgan M, et al. A BEME (Best Evidence in Medical Education) systematic review of the use of workplace-based assessment in identifying and remediating poor performance among postgraduate medical trainees. Syst Rev. 2015;4(65):1–6.

^{5.} Davis MH, Chandratilake M. Evaluating and designing assessments for medical education: the utility formula. Internet J Med Educ [Internet]. 2010;1(1):1–8.