

## JPB CONTENT & ASSESSMENT REVIEW GROUP MEETING MINUTES

**Date and Time:** 10.30am on Thursday 24<sup>th</sup> March 2011

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

**Attended:** Ian Bates (IB), Satinderjit Kaur Bhandal (SB), Graham Davies (GD), Rosemary Dempsey (RD), Shivaugn Gammie (SG), Alison Innes (AI), Barry Jubraj (BJ), Nikkie Opara (NO), Chetan Shah (CS), Emma Wright (EW)

1) **Apologies** - David Wright, Jane Portlock, Rosin Kavanagh

2) **Minutes of previous meeting (18<sup>th</sup> November 2010)**

Minor grammatical changes were made on pages two and three of the minutes.

3) **Matters arising**

Review of Action Points from 18<sup>th</sup> November 2010

GD has had one response from CoDEG founder members to agree to the posting of the new GLF (version 3) onto the CoDEG website. An email will be sent to notify CARG members when it is done – hopefully by early April.

There is a JPB Coordinating Committee meeting on 5<sup>th</sup> April 2011 where CARG NHS representation will be discussed to ensure that the four JPB Boards are represented – either through working with the Specialist Pharmacy Services or some other approach.

**Action:** IB to place new GLF (version 3) on the CoDEG website and also to review the JPB webpage (Alicia and Verona to undertake update) so that a list of IT tasks to be completed is created. There will be a central webpage to redirect those who access it – to the four partners JPBS – and then to the individual HEIs. The central page will contain JPB Co-ordinating Committee and CARG minutes, various curriculum and assessment tool information as well as detail of tutor support.

**Action:** GD to follow up with DF via email to discuss small focus group to review clinical curriculum

GD has put statement of completion of training on the agenda for the JPB coordinating committee.

**Action:** GD to Liaise with Gail.

There has been no progress on the mini-pat licence due to a glitch in the system. Two thirds have filled it in and received data. The others have not been able to receive data. We need to get back with Emelyn.

**Action:** IB to propose move to a licence so that it will be accessible to all. Needs more commercial footing so that any problems can be resolved quickly. IB to organize meeting with RPS to use as a support tool.

**Action:** SG to forward an Excel spreadsheet and forms to members

**Action:** BJ to contact SEMMED group with regards to expectations from core element and clinical trials in order to be compliant.

#### 4) Acute Sector Programme parity

##### a) Core JPB Minimum Requirements

SG: We had discussions with regards to what was core. SG cut and paste learning outcomes for Core and Diploma as well as assessments into a document which was circulated with the minutes.

**Action:** GD to revise introductory paragraph for Core JPB minimum requirement document and AB to circulate the document to members. Members to provide feedback on generic learning outcomes, portfolio requirements, assessments and governance arrangements for quality assurance and accreditation of sites. SG to field comments. To be reviewed again at meeting in July.

##### b) Curriculum

###### Core Update

BJ: The department of health is pulling funding of KSF. Informed that own trust will be dropping KSF all together.

**Action:** Document to be changed to NHS performance framework.

No core updates and no MI updates. MI top up study days will not be needed as there are so few with MIs.

**Action:** AI to contact and ask it would be beneficial to offer something on query answering/taking.

###### DAPs

BJ: Getting queries about other sites that may need DAPs to finish off. At the last meeting LI provided a list of regularly updated DAPs. We have tried to standardise and reduce the number of learning outcomes and duplicates etc. There has been a lot of work to clean up discrepancies and we have updated around 60 percent. We are still in the process of taking all DAPs off of Blackboard and creating revised ones. We are trying to get DAPs on MI, stroke, HIV etc. There has been a good deal of progress made however, it is a bigger task than we envisaged so we have not progressed very far.

##### c) Training Centre Accreditation

GD: The reaccreditation document has not progressed. We will be waiting until autumn for feedback from GPHC.

##### d) Assessment Design Group

AI: Looked at original aims it was a group to review OSCEs and progress tests however would like to ask how we should take it forward.

SG said AI has helped with the quality of assessments and would like to be a member in the future. The information has been useful in OSCEs and sharing assessment resources.

CS found it initially useful but does not think that it fits in with what they are doing now. However, would still like to be cc'd into future AI group emails.

SB said it would be useful to be fully involved in the group.

RD found it useful.

BP would like to keep involved in the group.

**Action:** To arrange to have more frequent AI meetings.

## 5) Tutor Support

BJ: JPB Southeast Group has designed an assessment form that will be sent out at 6 months and 18 months. Students will submit the forms anonymously. SEMMED have volunteered to handle the administrative tasks. It is all online and ready to go. The last page of the form will state, "It is a core requirement please print and put in portfolio". This disclaimer will help to increase completion of the electronic form. Will get student names from the trusts and HEIs to help to catch anyone who may fall through the gaps.

**Action:** To talk to Barbara about access. BJ to send an email to GD to forward.

### a) SEMMED project update

BJ: Last CARG meeting we tabled thoughts about what we have been doing in collaboration with Emma and Gail with regards to terminology and training. We discussed the terms which we had decided to publish in the PJ and circulated them asking everyone to think about the terms.

Emma will give the update at a conference in May regarding terminology and accreditation. We were looking at modernising pharmacy careers programme which has given us national attention. It outlines the terminology. The Developing Educational & Practice Supervisors (DEPS) project is going to the pharmacy conference in New Zealand and we will be presenting the framework. An online course has been designed for practice supervisors. The first cohort is completing module two. Everyone has passed module one.

The Practice Supervisor course is comprised of three parts, educational theory, learning relationships (planning) and review and feedback. Modules are staggered and they have an education supervisor at base. The Education Supervisor takes the course to know what is expected. Material is accessed online but there are activities they do on site. Multiple choice accounts for 25% of the mark. There are two assignments which are worth 50% of their mark and 25% is based on the social construct of learning. They construct knowledge within the group based on practical experience and learning from each other. There are 12 participants going through. Module 1 starts every term. Module 2 and module 3 run concurrently in May.

The Educational Supervisor course is assessed based on the CRIS(sp?) model. We have taken six gold standard educational supervisors. We had a focus group last week which was the conclusion of the pilot. The general consensus was that the way the workplace-based observation fit into framework

was a challenge. It will be interesting to see the feedback from the 12<sup>th</sup> April 2011. It has been linked to the ACLF.

**Action:** Emma to get document that links them explicitly and forward to SG.

BJ: There are bits of overlap with tutor training. They have been more around diploma and facilitating. The face to face tutor training is to see how tutors are getting on. This may be the follow-up.

**Action:** Emma to follow up with SEMMED to find out if it will be available at some point outside of SEMMED and if there will be a cost.

## **b) Terminology – approval of SEC suggestions**

BJ: It will be key to get some commonality with regards to terminology as there will be defined career pathways in the future.

**Action:** Group has agreed to endorse this terminology. GD to take to JPB coordinating committee. Emma to publish mapping as soon as possible.

## **6) GLPC Update**

GD: Student body has been quiet. Tishauna Royson has been representing them and has feedback but has been unable to attend.

**Action:** BJ to follow up with student body rep and provide feedback for the next meeting.

## **7) Community Programme**

a) Assessment tools in primary care – update

BJ: There was a PCT person who asked to adapt one of our tools. The message seemed to get through so the proposal was essentially dropped.

b) Approval of curriculum guide (long term conditions)document

SG: We have not been able to employ enough people; as a result it has not been a top priority. SG to complete, distribute and put on website.

**Action:** List of bullet points to be forwarded to IB. IB to follow up with DW with regards to website.

## **8) Update from partner sites (all)**

GD: We had a JPB local delivery board meeting to discuss fees. All HEIs are being called back on allowances. HEFCE levies are disappearing so it presents a challenge. Either we increase fees or do less to make up for loss of funds. Also to review the length of the programme to see what they wanted. It will be done over the next 12 months. There was a general acceptance that there would be an 18 month certificate. There will be work around that within the next 2-3 months.

## MEE

IB: The health system is facing biggest changes in 60 years. Workforce education and training is the focus. MEE represents med, pharm, dentist and health pharmacists. There are four programme boards. Work stream 2 is based on career pathways and post registration development. JPB and individual partners will be called up to provide written evidence. JPB may get all view from partners and present it this method will be easier and more powerful rather than allowing them to piece it together as the stakeholder list is massive.

### **9) RPS Work-based learning conference**

GD: There will be a work-based learning conference offered by the Royal Pharmaceutical Society at Kings on 11<sup>th</sup> May 2011.

### **10) Date of next meeting**

ADG meeting 10:30 -12:00 26<sup>th</sup> May 2011  
CARG 21<sup>st</sup> July 2011  
CARG 17<sup>th</sup> Nov 2011

### **11) A.O.B.**

There being no other business the meeting concluded at 12:00 pm.