SOUTH AFRICAN ACADEMY OF
FAMILY PHYSICIANS

Welcome to your learning portfolio!

Here are some tips that will help you complete your portfolio

1. After you signed in, you will need to create a form set for the study year that you are currently in.

2. Populate this form set with empty forms by inserting a number of various assessment forms.

3. Whenever you have completed an assessment form, you need to invite your supervisor to assess you. This is done via a pre-populated email request.

4. You can give up to 4 supervisors access to your portfolio.

5. If there are other assessors you wish to send a form to, simply email them the form.

6. Your portfolio belongs to you and can only be accessed by the supervisors and program director you gave access to.

7. Your departmental administrator/secretary or program director responsible for the IT management of the portfolios would have set up the registrar-supervisor groups. Inquire from them if you are battling with this. They in turn have access to the secretary at the SA Academy of Family Physicians for higher level access.

8. For every allocation, you need to complete a Learning Plan, and at the end of the allocation, you also need to complete a Registrar Reflection form and invite your supervisor to complete a Periodic Assessment form. This is exactly as it is with the traditional paper-based portfolio.

9. For every new clinical allocation, you complete a learning plan, reflection, and periodic assessment, up to a max of 4 such bundles. The minimum for an academic year is 2 bundles. As long as there are no known gaps, your learning plans should be back to back. To avoid a degree of repetition, try to cluster your learning plans into 2-4 plans for the year.

10. When you write your learning plan, it's best to first discuss with your supervisor to get a clear idea of expectations for yourself, your supervisor, the MMed program, and your local clinical environment and team. Always keep the national programmatic outcomes in mind. For your MMED programme, scan where the structured teaching and learning segments (modules/course, etc.) are scheduled that cover aspects of your learning plan and the outcomes.

11. Once you have completed a learning plan and sent it to your supervisor for validation, your supervisor can add edits and then validate the form. There is no opportunity to send the form back to you for further iterations (unlike previous e-portfolio functions). Therefore, if you want more iterative feedback, send the learning plan by e-mail in a word document first.

12. There are a minimum number (norm) of other assessment forms that must be completed for every academic year. These include Observations (10 DOPS, 8 mini-CEX, and 2 Teaching forms), Educational meetings (24 hours), Assignments (1), and Logbook (twice).

13. If you have empty forms for the Observations and Educational meetings in your portfolio, your supervisor can use the "Push Feedback" function to complete a form without your invitation. Otherwise, your supervisors are dependent on your sending a form to them for every assessment opportunity.

14. For the DOPS forms, which you complete for procedures done, it is important that you are assessed on a variety of procedures and levels of complexity over the year. The same goes for the mini-CEX 2 | P a g e forms, which capture assessments of your consultation skills in various clinical settings by different supervisors.

15. The 2 types of Observation assessment forms for capturing your teaching skills include a 'Teaching Assessment Tool' for group teaching and a 'One minute preceptor' for one-on-one teaching.

16. For the 1st two years, the scoring is not important. More important is the number of times you are observed and assessed in practice, with getting early, focused, feedback from your supervisors, and capturing these assessment events in the various forms in your portfolio.

17. During the last two years, the average scores for the various Observation forms are calculated.

18. The Logbook contains the procedural and other skills agreed upon nationally that are expected from a competent family physician (206). Since you are working as a FM registrar in a district hospital type environment, even if you do not formally 'rotate' through a specific clinical discipline, you should be working and learning across clinical areas, e.g. general wards, the emergency centre, PHC clinics, and the community. Therefore, you need to be assessed by your supervisor on the whole logbook (11 sections), twice a year. Be honest and realistic in the assessments. Even if you are not able to perform a skill at a certain point (assessment level A or B), as you grow within a year or over the years, your entrustment for various skills should move to level C or D.

19. Once a year you need to insert a Multisource Feedback (MSF) form. This is best done in the 2nd half of your academic year. Invite by e-mail 10-15 colleagues, some more senior than yourself, and also 'below your level', who work with you and have seen you in practice, to complete the form. The completion is anonymous. You should get scores and valuable feedback from them.

20. Some forms are included which are not mandatory to complete, but are useful for your assistance and support, including 'Communication Skills Observation Tool' and for a tool for assessing Caesarean sections.

21. The 'Portfolio Assessment Tool' (PAT) form is NOT for you or your supervisor do not complete. You invite the program director/HOD at the end of the academic year to complete this.

22. All the forms have the option to attach files to them. These do not automatically calculate scores, but can be useful as evidence of learning for yourself and your supervisors.

23. You can check your progress over the year by going to your Dashboard and clicking on the headings at the bottom of the screen to scroll through the various areas in your portfolio. You will see a complete overview, including all the feedback from the MSF assessment.

24. While completing the various assessment forms, you will notice that you are expected to grow in all 5 national unit standards of Family Medicine.

25. Your portfolio also has a space to insert Certificates from other learning opportunities.

26. There are also several useful resources, including videos on how to use Scorion, that you can access by going to your 'File manager' –-> 'My shared folders' –-> 'Information documentation'.

27. If you have empty or incorrect forms that you need to delete, the dedicated departmental administrator for the portfolio IT can remove them, but only if they have not yet been validated.

28. Your portfolio is downloadable as a pdf, and can be kept, for future reference.

29. Increasingly the portfolio will become a part of the FCFP exams, as evidence of your entrustable professional activities.

Compiled by Prof Louis Jenkins, 5 March 202