REGISTRATION PORTFOLIOS IS THE EVIDENCE GOOD ENOUGH?

Mike Carter, former Scientific Education and Training Manager for Public Health England, gives a nuts-and-bolts guide to completing a portfolio.

n any discussion of portfolio verification, the starting point must be the IBMS guidance document. Everything one needs to know is in this document. Yet still, myths abound, evidence is misused and candidates for verification get

confused. Since 2004, I have read over 400 portfolios and verified over 50. I would like to share some experiences that I hope will help when completing a portfolio.



Knowledge or competence? The portfolio is based on

the Health and Care Professions Council's

Standards of Proficiency (standards). It has standards for knowledge – "what a biomedical scientist must know" and competence – "what a biomedical scientist must be able to do". Knowledge is theoretical and competence is practical. It may be possible to use evidence that demonstrates competence to demonstrate knowledge as well, but the reverse is not possible. To illustrate this, Bill submits an essay on the use of enzyme immunoassay (EIA) in patients suffering from hepatitis B, comprising a description of the virus, its clinical manifestations and diagnosis using various EIAs. This demonstrates only knowledge of the subject. Freda submits a similar essay but includes photographs of her performing an EIA, copies of her worksheet, her results and interpretation. This is competence evidence and, depending on the content, may also be used for evidence in appropriate knowledge standards.

The difference between knowledge and competence is often misunderstood when providing observations of audits, procedures, or health and safety incidents dealt with by others. These observations are not competence evidence. The candidate must undertake them, otherwise they are knowledge evidence only.



Thirty pieces

It is mandatory to submit three pieces of evidence per module, 30 in total – no more and no less. One



cannot use the same evidence in multiple modules. It is not necessary to evidence every standard within a module, however, there is no reason why this cannot be done, given a little thought. Take care if multiple types of evidence are submitted as one piece as the different items need to be linked to form a whole or they will be deemed to be separate pieces of evidence.

How to "fail" instantly

It is not easy! There are two clear instances when a verification will

be halted. First, breach of confidentiality by inclusion of patient-identifiable information or colleague-identifiable information, unless evidence is included showing that the colleague has agreed to use of their information. Second, DO NOT submit a portfolio for verification until it is fully completed. This sounds obvious, but I have seen placement students submit their portfolio with gaps that they intend to fill later. Incomplete portfolios cannot be verified.





Timeliness

All evidence must be no older than three years, unless supported by evidence showing that

it is still current and valid.

Types of evidence

Training certificates gained by e-learning demonstrate knowledge only, not competence.

Most candidates will have knowledge of local fire procedures; very few will have experience of using an extinguisher on a fire. University certificates are acceptable only if an overview of what was learnt is provided. Again, remember the three-year rule. The training records generated within a UKAS-accredited laboratory, signing off an individual's ability to carry out a specific procedure, demonstrate knowledge and competence. The candidate's competence record needs to be supported by the raw data that established competence.

Personal and witness statements

should be used with care. They should be supported by other evidence where possible. For example, a witness statement as to the correct use of PPE can be supported by a photograph of the candidate (NOT their colleague!) wearing appropriate PPE correctly. The example given above using a fire extinguisher is one where a witness statement may be the only evidence available. I believe that witness statements should be reserved for "out-of-the-norm" events like this and should give specific examples.

Reflective statements need to include the candidate's thoughts of, feelings on and learning from an activity. They should show how the candidate has developed and, in some cases, what would be done differently as a result. The mandatory evidence in Section 1 Module 5: "The candidate must produce a reflective statement on how the engagement with service users and learning with and from professionals and learners in other relevant professions has contributed positively to their professional development (HCPC SoP 9.3, 12.2)" should capture this.



Use of annotation Copying and pasting, or use of a highlighter,

require annotation of the relevant information to

demonstrate the knowledge or competence being evidenced. UKNEQAS results, for example, provide excellent evidence for the quality module if annotated to explain what the graphs and tables mean for the candidate's laboratory. On their own, the UKNEQAS results only show ability to "copy and paste".

PowerPoint is only acceptable if the slides have annotation, e.g. showing what was learnt, changed, or edited for next time, otherwise they are considered as copying and pasting. If a presentation is used as evidence, excellent

supplementary evidence would be written feedback from the audience, as this can be used to evidence the candidate's verbal and non-verbal communication.

Photographs provide excellent evidence of the candidate "doing stuff" but must be of the candidate, NOT a colleague, and must be annotated to explain what is happening. They are used to supplement written evidence and must be clearly linked.

Final points



Microsoft Excel is not a statistics package. Unless specific statistics, such as standard

deviation, coefficient of variance, t-test etc. are included within the spreadsheet, it cannot be used as evidence of statistical knowledge or competence.

Ensure navigation of the portfolio and evidence is as easy as possible for the verifier – keep them happy!

Scans of portfolios and evidence are enabling verifications to be done remotely. To do the work justice, please ensure all scanned work is of sufficient quality and size to be read by the verifier and photographs and images are in colour.

Conclusion

This brief description of some of the issues encountered when completing a portfolio should help navigate these pitfalls. The safety net to help avoid the pit is provided by the IBMS Education Department, where help, advice, and answers to portfolio dilemmas are always available.

Mike Carter retired as the Scientific Education and Training Manager for Public Health England (PHE) Colindale in August 2019. He retained registration with the HCPC as a biomedical scientist and is currently bank staff with PHE assisting with recruitment for COVID-19 testing. For links to the documents mentioned, read this article online at **thebiomedicalscientist.net**