Draft for consultation: High Level Specifications for E-Portfolio

The AMC has been appointed by the Australian Health Ministers' Advisory Council to develop E-portfolio specifications to support the implementation of a two-year capability and performance framework.

The prevocational E-portfolio is a critical component of the revised Framework. It is intended to provide greater individual accountability for learning and support the assessment processes. It will also facilitate a longitudinal approach to prevocational training, providing a mechanism to support development across the two years and streamline administration of the program. A diagram illustrating the possible functions of the e-portfolio is provided below.



The following draft key functions have been developed by the AMC on the basis of other similar systems (for example the Medical Council of New Zealand's E-Port) and stakeholder feedback to date.

Important note: The 2018 Health Ministers' response to the 2015 Review of Medical Intern Training included a recommendation for national specifications for the e-portfolio with development and implementation at state and territory level. In consultations, the AMC has received strong feedback from stakeholders supporting a national approach to development and implementation of a prevocational e-portfolio. Reasons have included national consistency, efficiency and cost effectiveness. The AMC is engaging in discussions about the possibility of a national system with relevant stakeholders.

Summary of draft key Functions/ Elements

General requirements			
Priority	Functions/ elements	Details	
Critical	Information learner driven and owned	PGY1/PGY2 doctors own and can curate access to information	
	Longitudinal aspect	Supports a longitudinal program and development across terms	
	Accessibility	Web based and smart phone application: Limiting compatibility challenges with hospital data security systems	
	Integration & data transfer	Data transfer with other record systems pre- and post- prevocational years - (medical schools and specialty colleges, AHPRA) - by junior doctor	

		Allow PYG1/PGY2 doctors to share components of their portfolio
	Security	Privacy and security of data
	Levels of access	Different levels of access for different stakeholders with appropriate shields for confidentiality
	Usability	User-friendly an interface that is intuitive to promote ease of use
Desirable	Access while in Medical School	Allow access to limited functions of the e-portfolio while PGY1/ PGY2s are in medical school
	Flexibility/ adaptability	For health services/ PGY1/ PGY2s to add resources
For consideration	Ability to extend beyond the PGY1 and 2 years (e.g. include ongoing CPD for PGY3+ doctors who are not in a training program) – question for MBA	Flexibility and scalability of the product to include role for CPD requirements in PGY3+ (for those not on a training program)
	IMGs (e.g. WBA)	Query if want to raise flexibility/ scalability of product to include role for assessment of IMGs (noting some health services use HPRIME for
	essment: E-portfolio to suppo	interns & WBA) ort the revised two-year Training & Assessment component of the
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Reporting

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Generate quantitative reporting of progress for training providers

CONSULTATION SEPT 2020 – ATTACHMENT E

Desirable	Training	 Place to record 'educational' training (or ability to export/import – acknowledging different states/territories have their own systems) e.g. BLS/ALS and hand hygiene training Flexibility to upload additional training resources Recording personal notes and reflections on learning experience
Training envi	ironment: E-portfolio to suppo	ort the implementation and management of the two-year program
Priority	Functions/ elements	Details
Critical	PGY1/PGY2 doctor information	Record of basic information including registration, qualifications and employer
	Administration	Improve efficiency of administration of prevocational program for health services including:
		Scheduling terms/ programs and assessments
		Prompts e.g. for assessments
		Tracking – ability to view cohort and individual progress
	Supervision	Interface for term supervisor input/ review/ checks
	Reporting	Quantitative reporting for training providers, postgraduate medical councils and other stakeholders
	Certification	 Includes mechanism to certify completion of essential elements in PGY1/PGY2. Ability to allow access or integrate with AHPRA for certificate of completion
Desirable	Accreditation	Flexibility and scalability of the product to include accreditation functions including
		 Reporting functions e.g. Ability to pull number of assessments completed for each PGY1/ PGY2 or cohort
		 Check PGY1/PGY2 in accredited terms
		Support accreditation functions e.g. change requests
	Flexibility	 For health services/ PGY1/ PGY2s to add information and modify resources
	Feedback/ evaluation	Ability for PGY1/ PGY2s to provide anonymous feedback about their educational experience.
		Place to record when the MTS has been completed