Record of Expert Professional Practice (REPP) form

**Instructions for use**

This form is to be filled in by the **Faculty Assessor(s)** conducting the **REPP**. All sections must be completed.

|  |
| --- |
| Assessment Details  |
| **Name of practitioner**:       |
| **Practitioner RPS Membership Number**:       |
| **Name of Assessor 1:** |
| **Assessor 1 RPS Membership Number**:       |
| **Name of Assessor 2 (if applicable):** |
| **Assessor 2 RPS Membership Number**:       |
| **Date of review:** |
| **Period covered: ……………………to………………………..** |
| **Practitioner’s Area of Expert Professional Practice:**  |
| **Training Centre/ group /organisation responsible for assessment:**  |

|  |
| --- |
| Please provide brief summary of practitioner’s experience to date: |
| *(to include sector, area of expert professional practice – including length of experience):*  |
| Assessment requirements for practitioner during the assessment period: |
| *(As specified by the relevant affiliate group, accredited training provider or centre including employers*,)  |
| **Have the specified assessment requirements been met? Y/N ? Tick the appropriate box** | **Y** | **N** |
|  |  |

**For Assessor(s) to Complete:**

| Clinical learning episodes undertaken during assessment period |
| --- |
| TYPE OF LEARNING EPISODE (e.g. clinical module, clinical study day, assessment) | TOPIC/TITLE | ORGANISATION / PROVIDER | DATE COMPLETED | HOW HAS THE LEARNING BEEN USED i.e. impact or outcome of learning |
| *To be completed by assessor(s)* |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

|  |
| --- |
| Summary of Assessment |
| ***Guidance notes:****Role(s) of the member in the practice based assessments presented? Focus of interventions? Degree of complexity of issues involved? Degree of risks involved and how they were managed? Extent of professional knowledge demonstrated? Level of accountability and responsibility? Extent of influence e.g. within team or organisation; regional or national/international; multidisciplinary or cross sector? Extent of outcomes or impact of learning or activities undertaken?* |

Please indicate how you feel the practitioner demonstrated they have demonstrated advanced practice against the Expert Professional Practice and Collaborative Working Relationships Clusters of the APF for the following competencies. The judgement you make relates to whether they meet the expectations for advanced practice, staging within advanced practice is not determined during this review but forms part of the overall Faculty submission for assessment.

|  |  |  |  |
| --- | --- | --- | --- |
| **Competency** | **Demonstrated** | **Not****demonstrated** | **Unable to****comment** |
| 1.1 Expert Skills and Knowledge |
| Demonstrates general pharmaceutical skills and knowledge in core areas |  |  |  |
| For patient facing roles: Is able to plan, manage, monitor advise and review general pharmaceutical care programmes for patients in core areas  |  |  |  |
| 1.2 Delivery of Professional Expertise |
| Demonstrates accountability for delivering professional expertise and direct service provision as an individual |  |  |  |
| 1.3 Reasoning and Judgement |
| Demonstrates ability to use skills in a range of routine situations requiring analysis or comparison of a range of options |  |  |  |
| Recognises priorities when problem solving and identifies deviations from the normal pattern |  |  |  |
| 1.4 Professional Autonomy |
| Follows legal, ethical, professional and organisational policies/procedures and codes of conduct |   |   |   |
| 1. **Expert Professional Practice overall**
 |   |   |   |
| 2.1 Communication |
| Demonstrates use of appropriate communication to gain co-operation of relevant stakeholders (patients, senior and peer colleagues, other professionals etc.) e.g. Persuade, Motivate, Negotiate, Empathise, Reassure, Listen, Influence, Also Networking and Presentation skills  |  |  |  |
| 2..2 Teamwork and Consultation |
| Demonstrates ability to work as a team. Recognises personal limitations and refers to more appropriate colleagues when necessary |  |  |  |
| 1. **Collaborative Working Relationships overall**
 |   |   |   |

General Descriptive Feedback on Progress

|  |
| --- |
| **Anything especially good**? |
| ***Guidance notes:****The assessment is supportive and developmental. It’s important to feedback areas where the member did well and where such examples could be used as examples (role modelling) for others. This is an opportunity for the Assessor to provide feedback of areas which were extremely positive and innovative.* *Where possible or applicable, management of complex cases or situations will involve many competencies that sit across other clusters of the APF. This is an opportunity for the Assessors to provide some narrative to this end, for example, collaborating with others, mentoring or supervising a team, managing risks or a budget. For portfolio entries, list the entries and competencies to which they relate.* |
| **Suggestions for development**:  |
| ***Guidance notes:****Whilst the assessment is supportive and developmental. It’s important to feedback areas where the member can improve, develop further, and seek opportunities to stretch their professional practice and expertise. The Faculty journey is one of constant improvement and advancement, not just of peer recognition. What complex case would be the next challenge for the member? Where next for their professional development or professional impact? This is an opportunity for the Assessor to provide feedback of areas for future and further development.* |

FINAL DECLARATION

| Summary of REPP | Yes | No |
| --- | --- | --- |
| Have the required assessments been completed? |  |  |
| Reviewing the discussion and evidence provided, do you feel the practitioner is at a stage of practice beyond that of Foundation? |  |  |
| Declaration by assessor(s): |
| **If both of the above answers are YES:** The evidence provided during this assessment suggests that this practitioner demonstrates advanced practice against the Expert Professional Practice and Collaborative Working Relationships clusters of the APF | **If either of the above answers are NO:**The evidence provided during this assessment suggests thatthis practitioner requires further support / time (circle which are appropriate) to develop their Expert Professional Practice and Collaborative Working Relationships to an advanced stage |
| **Assessor 1****Signature:** | **Assessor 1****Signature:** |
| **Assessor 2 (if applicable)****Signature:** | **Assessor 2 (if applicable)Signature:** |