

Foundation Doctors - Completing Supervised Learning Events

Please see below step by step guidance for Foundation Doctors on **‘Completing Supervised Learning Event (SLE)’** The guidance comprises of edited extracts from the Horus Foundation ePortfolio support site <https://supporthorus.hee.nhs.uk> and additional screen shots.

How do I send a ticket in Horus?

A foundation doctor sends a ticket in Horus by creating a new form and assigning a trainer or assessor to the form.

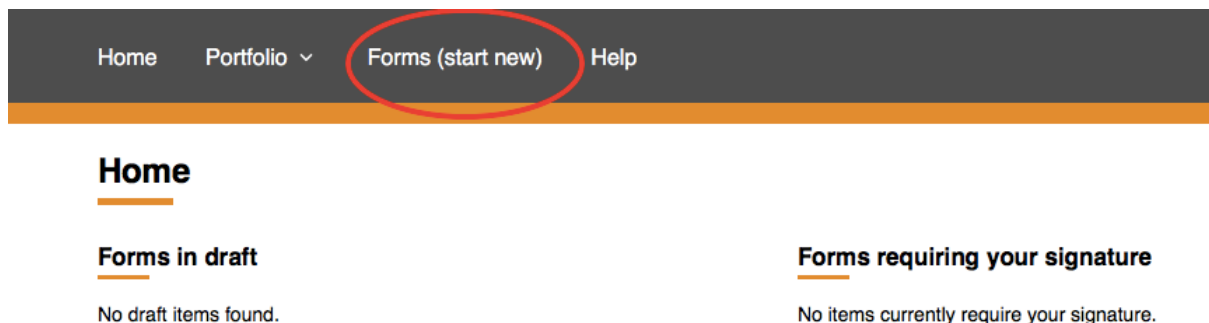
As a foundation doctor, how do I send a form to be signed by a trainer or assessor?

The following Supervised Learning Event (SLE) forms need to be approved that is, checked and signed by a trainer or assessor:

- Case Based Discussion (CBD)
- Core Procedure (CP)
- Developing the Clinical Teacher (DCT)
- Direct Observation of Procedural Skill (DOPS)
- Mini-clinical evaluation exercise (Mini-CEX)

To assign a trainer/assessor to one of the above forms see steps below

1. Go to Forms (start new)



2. Then select the correct form

- CBD, DOPS and Mini-CEX are found in **‘Mandatory forms for each placement’ > ‘Throughout each placement’** section
- Core Procedures and DCT are found in **‘Mandatory forms for each year’** section see below on page 2

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2. (contd)

Create New Forms

Mandatory forms for each placement

At the beginning of each placement

Form	Who	Min.
Initial Meeting	ES	1
Induction Meeting	CS	1
or Combined Initial and Induction	ES	1 *
PDP	FD	1

Throughout each placement

Form	Who	Min.
Mini-Clinical Evaluation Exercise (Mini-CEX)	FD/T	3
Direct observation of procedural skill (DOPS)	FD/T	0
Case-based discussion (CBD)	FD/T	2
Reflection	FD	2 †

* Use this if you are both educational supervisor and clinical supervisor for a foundation doctor

† Local rules may apply, please check with your local Horus ePortfolio/postgraduate centre administrator

^ An educational supervisor's end of placement report is not required for the last placement of F1/F2; see this.

Mandatory forms for each year

Form
Team Assessment of Behaviour (TAB) (usually at end of first placement)
Core Procedures (F1's must complete one of each procedure)
Developing the clinical teacher (DCT)

3. Click on and select the relevant form, (e.g. a Mini-CEX) a window will appear warning to anonymise patient data. Click ok

Mini-Clinical Evaluation Exercise (Mini-CEX)

This form records a "patient/foundation doctor encounter" observed by a trainer for teaching purposes. Topics should be discussed with the patient and trainer to address learning needs. Feedback and actions advised for further learning are recorded solely for the foundation doctor's benefit.

Date of clinical event *
e.g. 01-Jan-2000

Placement *
☐ Geriatric Medicine (02-Aug-2017-05-Dec-2017)

Title/Description of Clinical Event *

Here you can record a brief, anonymous history of the patient's condition.

It is important you anonymise any patient identifiable information. The same applies to any individuals working in the hospital or in the department.

OK

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4. Complete the 'Date of clinical event'. Select placement against which the form should be listed.

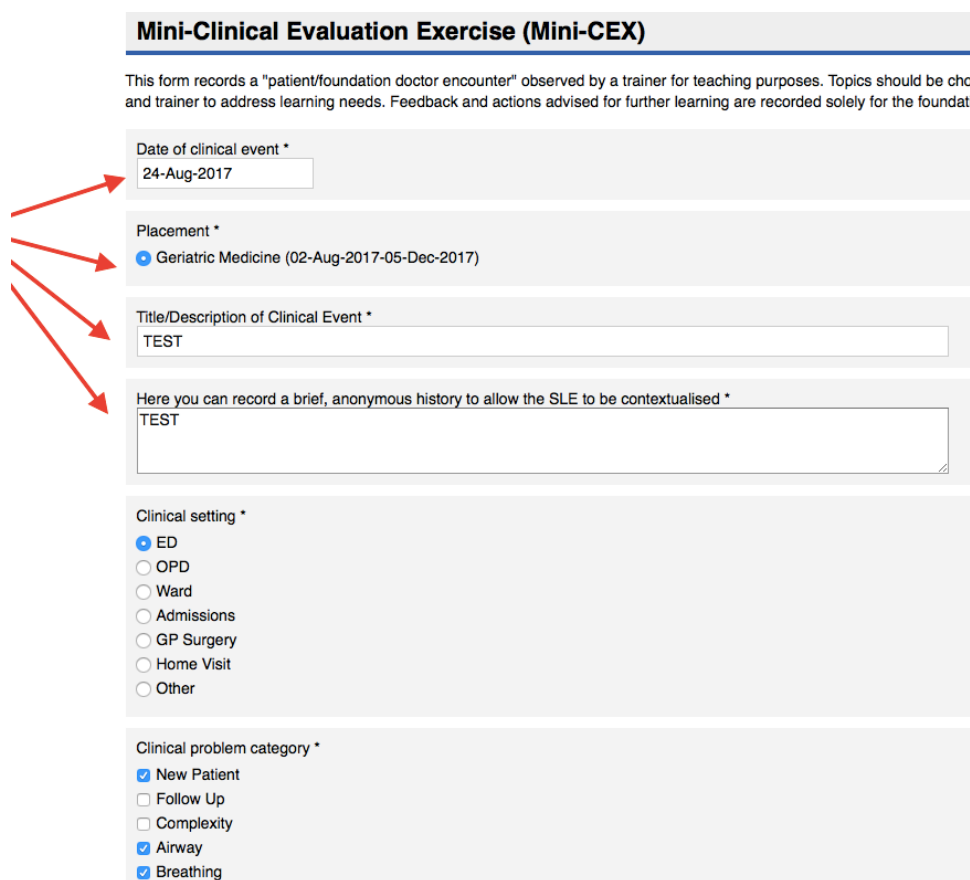
Please Note: At present this is the first placement so there will only be one to select. Next placement both previous and current will appear be sure to select the correct placement

As a foundation doctor, do I have to complete all the fields in an SLE/CP before sending it to a trainer/assessor to approve?

No - you can complete some (The very least you would have to confirm which placement the form needs to be in) or you can complete all of the form before you send it to a trainer/assessor to approve

Please Note: It is in your best interest to complete as much of the form as you can so your trainer/assessor knows exactly which event you would like their written feedback on and what your thoughts about your experience are.

Your trainer/assessor will have access to edit the whole form before they approve it, so you're essentially writing a draft for them to view, edit and approve as they see fit. See screen shot below.



Mini-Clinical Evaluation Exercise (Mini-CEX)

This form records a "patient/foundation doctor encounter" observed by a trainer for teaching purposes. Topics should be chosen and trainer to address learning needs. Feedback and actions advised for further learning are recorded solely for the foundation doctor's use.

Date of clinical event *
24-Aug-2017

Placement *
☒ Geriatric Medicine (02-Aug-2017-05-Dec-2017)

Title/Description of Clinical Event *
TEST

Here you can record a brief, anonymous history to allow the SLE to be contextualised *
TEST

Clinical setting *
☒ ED
☐ OPD
☐ Ward
☐ Admissions
☐ GP Surgery
☐ Home Visit
☐ Other

Clinical problem category *
☒ New Patient
☐ Follow Up
☐ Complexity
☒ Airway
☒ Breathing

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5. Next scroll to the 'Trainer/Assessor details' at the end of the form.

Type in the first 3 or 4 letters of the trainer/assessor, surname or first name or GMC number if applicable (*make sure your spelling of their name is accurate*) Horus search engine will find them if they have an account. Click on their name and it will enter into the 'Nominate trainer' box See screen shot below.

Trainer details

Nominate trainer * ⓘ
bur|
Burton, Angela (angela.burton@hee.nhs.uk) count towards your ARCP)

Trainer's position *

☐ GP
☐ Consultant
☐ ST3 or above/SPR
☐ ST/CT 1-2
☐ Pharmacist
☐ Other

Please Note: If you don't see the relevant trainer/assessor's name in the list, you can add them to Horus yourself. See separate guidance on how a foundation doctor can add a trainer or assessor to Horus.

6. You will now see the email address the trainer/assessor has registered on Horus. *If they have asked you to send the form to a different email address, you can add this by following the instructions 'If you wish to send this form to a different address, please click here' this is below their primary email address:* See red arrow on screen shot below

7. Next Select 'Save (and review before submission)'

Reflective notes can be recorded in the above text box area or a separate, structured R

Trainer details

Nominate trainer * ⓘ
Burton, Angela (angela.burton@hee.nhs.uk)
(N.B. a signatory is required for this form to count towards your ARCP)
Primary trainer email address angela.burton@hee.nhs.uk.
If you wish to send this form to a different address, please [click here](#)

Trainer's position *

☐ GP
☐ Consultant
☐ ST3 or above/SPR
☐ ST/CT 1-2
☐ Pharmacist
☐ Other

Other Registration Number (if not GMC number)

Has the trainer been trained in providing feedback? *

☐ Yes
☐ No

Save (and review before submission) Save (and leave as draft)

angela.burton@hee.nhs.uk FP Director for Portfolio, Northern Foundation School, Health Education England, Working Across North East & North Cumbria

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8. The next screen you will see will be the screen shot below. In the green bar at the top of the form you will see **'Your changes have been saved'**

You can scroll through and read the whole form to check your documentation. You will see the red bar at the end of the form notifying **'Signatures: this form has not been signed yet'**.

8a) If you are happy with your documentation then scroll back up to the top of the form and select **'Send form for approval'**

8b) If you need to edit the form then scroll back up to the top of the form and click on **'Make further changes'** on the purple bar at the top of the form. You can then edit and then click on **'Save (and review before submission)'** then select **'Send form for approval'**

An email will be sent to your selected trainer/assessor and the form will no longer be editable by you.

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9. The next screen you will see is the screen shot below - notifying your SLE form has **'been sent for approval'** (green bar) and is **'Awaiting signature'** (purple bar)

If you suddenly realise you have sent the form to the wrong trainer! You can click on **'Reset trainer/assessor'** (second purple bar) and nominate a new trainer. Once you do this the original approval request link in the original trainer's email will no longer work.

Next click on **'Close'** and close the form and this will return you to your **'Create new forms'** page.

Thanks, this form has now been sent for approval

Awaiting signature. This form will not be completed until all signatures are completed. Please see end of form for full signature details.

Mini-Clinical Evaluation Exercise (F1) Close

Name of Foundation Doctor Melanie Morrison	GMC Number 2000082
Training period from: 02-Aug-2017	Training period to: 05-Dec-2017
Local Education Provider University Hospitals of Leicester NHS Trust	Specialty Geriatric Medicine
Date last updated 24-Aug-2017	

If you need to change the trainer/assessor you can use the button on the right and then nominate a new person. Once you make this selection the original approval request link will no longer work.

Reset trainer/assessor

10. From **'Create new forms'** page click on your **'Portfolio'** and **'Contents'** from your drop-down menu see below

Home **Portfolio** Forms (start new) Help

Portfolio main menu:

- Overview
- Contents**
- Curriculum

Sub-sections:

- PDP
- Reflection
- TAB
- Mandatory Certificates
- e-LfH

×

Create New Forms

Mandatory forms for each placement

angela.burton@hee.nhs.uk FP Director for Portfolio, Northern Foundation School, Health Education England, Working Across North East & North Cumbria

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11. You will then see in your 'Portfolio contents' page the Mini-CEX with a yellow triangle denoting it is waiting for 'an additional signature' as approval from your nominated trainer.

Portfolio contents

Placement: 02-Aug-2017 - 05-Dec-2017

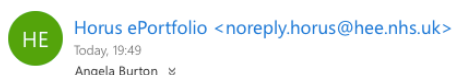
Induction Meeting with Clinical Supervisor	08-Aug-2017
Initial Meeting with Educational Supervisor	10-Aug-2017
Mini-Clinical Evaluation Exercise (Mini-CEX): TEST	24-Aug-2017
Mini-Clinical Evaluation Exercise (Mini-CEX): test	⚠ 24-Aug-2017
Direct Observation Of Procedural Skills (DOPS): TEST created by trainer!	24-Aug-2017
Mini-Clinical Evaluation Exercise (Mini-CEX): TEST	⚠ 24-Aug-2017

12. How does my trainer complete and approve the SLE/Core procedure form? Horus has now sent to your trainer an automatic email.

Please Note: Your trainer/assessor does not need to log in to Horus to sign a supervised learning event (SLE) or core procedure (CP) They do need to have a Horus account, but this can quickly be created by either a foundation doctor or an administrator. See separate guidance document on adding trainers/assessors (step 5 above on page 4).

13. The trainer/assessor receives the following email giving details of the foundation doctor and the SLE/CP they would like to be signed, and a link to follow 'Go to the form'

Horus: Signature request



Horus ePortfolio

For foundation doctors in England.

Dear Angela Burton

Dr Morrison has a form in their ePortfolio which requires your signature.

Form details: Mini-Clinical Evaluation Exercise (Mini-CEX)

[Go to the form](#)

If you prefer not to click links in emails, below is the full url:

<https://horus.hee.nhs.uk/portfolio-item/sign/mini-clinical-evaluation-exercise/2lSo2kb8caiKHlRh>

N.B. This will expire after 7 days when a replacement will be sent. Only the most recent will work.

Thank you for your co-operation.

Horus is the ePortfolio for foundation doctors in England. It has been developed and is maintained by NHS Health Education England.

Please don't reply to this email address as it is not monitored.

For further advice please visit the Horus support site or contact your local Horus ePortfolio/postgraduate centre administrator in the first instance.

Horus support site: <https://supporthorus.hee.nhs.uk>

Horus helpdesk (technical queries): servicedesk.horus@hee.nhs.uk

Horus ePortfolio: <https://horus.hee.nhs.uk/login>

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14. Once the assessor clicks on **'Go to the form'** the link takes them straight to the form in just one click!

They need to check at the bottom of the form their name and email address details are correct. They will see a yellow triangle denoting that the form has not been signed yet by them.

They need to confirm whether they are the named trainer/assessor and click the **Yes** or **No** link at the top of the form in Box 1. See below screen shot

Foundation Training Form Signature

1. Please confirm whether you are the named Trainer (please see signatures section) on the form below.

[Yes](#) | [No](#)

Mini-Clinical Evaluation Exercise (Mini-CEX) (F1)

Name of Foundation Doctor

GMC Number

Training period from:
02-Aug-2017

Training period to:
05-Dec-2017

Local Education Provider
South Tyneside District Hospital

Specialty
Geriatric Medicine

Date last updated
24-Aug-2017

Signatures:

Trainer: Angela Burton

GMC/ID Number:

Email: angela.burton@hee.nhs.uk

Signed: ⚠ Not signed (last reminder sent 24-Aug-2017 19:49)

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15. Once the assessor has clicked 'Yes' a second box appears (box 2.) stating
'the form contains errors or omissions and can't be signed until these are corrected. Please use the 'Make further changes' link below'

This is signposting the assessor to check the form detail is correct and to edit if necessary before signing

The **'Make further changes'** link is found in the purple bar. See screen shot below

Foundation Training Form Signature

1. Please confirm whether you are the named Trainer (please see signatures section) on the form below.

[Yes](#) | [No](#)

2. This form contains errors or omissions. It can't be signed until these are corrected. Please use the "Make further changes" link below.

This form contains errors/omissions. To correct these, please use the "Make further changes" link below.

Mini-Clinical Evaluation Exercise (Mini-CEX) (F1)

Close

Name of Foundation Doctor

GMC Number

Training period from:
02-Aug-2017

Training period to:
05-Dec-2017

Local Education Provider
South Tyneside District Hospital

Specialty
Geriatric Medicine

Date last updated
24-Aug-2017

▲ This form contains errors/omissions.
[Make further changes](#)

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16. The form appears and the trainer can check and edit if necessary and then click on '**Save and review before submission**'

Reflection

The doctor should reflect on this learning event.

TEST

Reflective notes can be recorded in the above text box area or a separate, structured Reflection form linked to this SLE can be created.

Trainer details

Trainer's position *

☐ GP

☐ Consultant

☐ ST3 or above/SPR

☒ ST/CT 1-2

☐ Pharmacist

☐ Other

Other Registration Number (if not GMC number)

Has the trainer been trained in providing feedback? *

☒ Yes

☐ No

Save (and review before submission) Save (and leave as draft)

17. The next screen tells the assessor their changes have been saved and asks again to confirm (Yes or No) they are the named trainer. The trainer clicks on **Yes** see below

Your changes have been saved.

Foundation Training Form Signature

1. Please confirm whether you are the named Trainer (please see signatures section) on the form below.

[Yes](#) | [No](#)

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18. A second box appears (Box 2.) asking if they are 'happy to sign the form now?' If so they click on Yes

Your changes have been saved.

Foundation Training Form Signature

1. Please confirm whether you are the named Trainer (please see signatures section) on the form below.

[Yes](#) | [No](#)

2. Are you happy to sign this form now?

[Yes](#) | [No](#)

Mini-Clinical Evaluation Exercise (Mini-CEX) (F1)

Name of Foundation Doctor

GMC Number

Training period from:

02-Aug-2017

Training period to:

05-Dec-2017

Local Education Provider

South Tyneside District Hospital

Specialty

Geriatric Medicine

Date last updated

24-Aug-2017

19. A third box appears requesting them to sign if they are the named trainer and the form is accurate

Your changes have been saved.

Foundation Training Form Signature

1. Please confirm whether you are the named Trainer (please see signatures section) on the form below.

[Yes](#) | [No](#)

2. Are you happy to sign this form now?

[Yes](#) | [No](#)

3. Please **click the button to sign** that you are the named Trainer, and the form is accurate (an email will be sent to the foundation doctor).

Sign this form

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20. A final screen appears thanking them for signing the form and no further action is required. They click on 'Close'



21. Now when you go to your 'Portfolio content' page you will see the Mini-CEX form in the list of forms. This time there is no yellow triangle on it. This means it has been signed and submitted and no longer editable. Click on the form to read the final result.

Portfolio contents

Placement: 02-Aug-2017 - 05-Dec-2017

Induction Meeting with Clinical Supervisor	08-Aug-2017
Initial Meeting with Educational Supervisor	10-Aug-2017
Mini-Clinical Evaluation Exercise (Mini-CEX): TEST	24-Aug-2017

Acknowledgements

I would like to thank HEE Horus Foundation ePortfolio Team for the use of extracts from their support site and Horus Foundation ePortfolio screen shots in this guidance document.



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angela.burton@hee.nhs.uk FP Director for Portfolio, Northern Foundation School,
Health Education England, Working Across North East & North Cumbria