Induction meeting with Clinical Supervisor								
Date of meeting								
Foundation doctor								
Name of Foundation Doctor GMC No								
Training period from								
Training period to					=			
Local education provider								
Specialty					-			
Supervisor's role	l.							
0	Clinical supervisor only							
0	Joint educational and clinical sup	ervisor - please complete the "	Combined Initial and	d Induction Meeting"	form instead			
Give a brief description of the placement; for example general practice in a rural setting; haematology in university teaching hospital: *								
]				
information only - It is				Only appears when	n the tooltip is hovered over/clicked on:			
HLO 1. An accountable, capable and compassionate d		Tooltip 1	a quoobor	Tooltip 1	Clinical Assessment	Tooltip 3 Ethics and Law		
HLO 2. A valuable member of the healthcare workforce		Tooltip 2			Clinical Prioritisation	Continuing Professional Development		
HLO 3. A professional responsible for their own practic	e and portfolio development	Tooltip 3			Holistic Planning	Understanding Medicine		
					Communication and Care			
					Continuity of Care			
Particular opportunities / areas of focus during this pla	cement are:					7		
				Tooltip 2	Sharing the Vision Fitness to Practice			
				1	Upholding Values Quality Improvement			
					Teaching the Teacher			
					reaching the reacher			
Placement Supervision Group (PSG)	Tooltip 5	7		Tooltip 5	Within any placement, an individual healthcare professional is unlikely to build up a coherent picture of the	1		
r lacement dupervision croup (1 00)	TOORD 5			TOORID S	overall performance of an individual foundation doctor. Whenever possible, the named clinical supervisor will			
NOTE: A Placement Supervision Group assessmen	nt (PSG) is required in at least or	ne placement at F1 and one a	t F2. Please compl	ete the separate	seek information from senior healthcare professionals who will work with the foundation doctor during the			
PSG request form towards the end of the placemen		•		•	piacement.			
					These colleagues will function as a placement supervision group, commenting on whether the foundation			
Are you able to identify the likely members of the PSG	for this placement at this point? *				doctor's clinical and professional practice is expected to meet or exceed the minimum levels performance			
0	Yes	Question below appears if "Y	'es" selected.		required for sign off.			
0	No	Question below doesn't appe	ar if "No" selected.					
The following colleagues are likely to work with the tra	ainee, be a member of the PSG and	d provide written feedback for t	he trainee for this pla	acement:				
NOTE: This does not start the PSG request process	s - Please complete the separate	PSG request form towards t	he end of the place	ement.	Mandatory question if 'Yes' selected above - at least one entry required.			
Name	Job Title			Grade				
	1							
			. = = = .					
NOTE: A Placement Supervision Group assessmen	it (PSG) is required in at least or	ne placement at F1 and one a	t F2. Please compl	ete the separate P	SG request form towards the end of the placement.			
1. Have you been advised take your educational super-	dear is and given centest detaile?							
1. Have you been advised who your educational supervisor is and given contact details? * O Yes								
0 No								
2. Are you aware of the requirements for satisfactory completion of your foundation year (including the benefits of assessments and supervised learning events (SLEs) etc)?								
2. As a surface of the Sanatanacary and Information of Control of								
0 No								
·								
3. Are there any practical procedures you feel you need	d extra support with in this placeme	ent? *	Tootip 6	Tooltip 6	(GMC's Outcomes for graduates - Practical skills and procedures)[https://www.gmc-uk.org/-	7		
0	Yes	Question below appears if "Y	'es" selected.		/media/documents/practical-skills-and-procedures-a4 pdf-			
0	No				78058950.pdf?la=en&hash=9585CB5CA3DA386B768F70DAD3F62170C2E987E5]			
	_					-		
If yes, explain below. *		Mandatory question if 'Yes' s	elected above.	_				
				1				
]				

4. Have you been given clear advice as to what is expect	
0	Yes
0	No .
5. Do you know how to use the e-portfolio? *	
	Yes
0	No .
	self-development to achieve your curriculum outcomes (for personal and career development) and portfolio completion?
0	Yes
0	No
7. Have you been given training and access to the nece	econ IT quetame for you to fulfil your workload? *
	saary in systems on you to tuliii your workidad? Yes
	No
U U	NO.
8 Do you know what your work schedule and work inter	nsity are and how to contact the trust's quardian of safe working?
	Yes
	No
9. Have you been told how to book leave (including stud	ty leave if appropriate)? *
	Yes
0	No.
10. Are you familiar with your new place of work? *	
0	Yes
0	No No
 Do you feel competent to use any essential equipment 	
	Yes
0	No .
12. Have you been told who to contact for clinical advice	
	Yes
0	No .
13.Have you been told who to contact for clinical advice	
	Yes
0	No.
14. Do you know how to order investigations and access	s their results in and out of hours, if appropriate to your role? *
	s trien results in and dut of notice, it appropriate to your fore: Yes
	No
U U	NO.
15. Do you know how to access guidelines which may be	e heloful to vou? *
	Yes
	No
-	
16. Do you know who to contact if you have personal co	oncerns? *
	Yes
	No.
Note to supervisor: By signing this form you are agr	eeing to follow the GMC standards for trainers (https://www.gmc-uk.org/-/media/documents/promoting-excellence-standards-for-medical-education-and-training-0715_pdf-61939165.pdf).
Ol-mark	
Signatures	
O	
Supervisor:	