Combined Induction Meeting with Clinical Supervisor & Initial Meeting with Educational 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

Joint educational and clinical supervisor
Educational supervisor only - please complete the "Initial Meeting with Educational Supervisor" form instead
Clinical supervisor only - please complete the "Induction Meeting with Clinical Supervisor" form instead

Educational Responsibilites

It is important that the educational supervisor and the foundation doctor agree a personal development plan (PDP) as part of their initial meeting.

Have you agreed a personal development plan for this placement?*:			
If you have not agreed a PDP, please complete the following:	< Only appears if "No" selecte	d above	
When will the PDP be agreed?:	< Only appears if "No" selecte < Date widget	d above	
Do you want to generate a PDP following completion of this meeting form?*: Yes No	< Only appears if "No" selecte < If "Yes" selected, submission		n a new PDP form.
Please record any comments or notes as discussed and agreed during the meeting:			
Clinical Responsibilites			
Give a brief description of the placement; for example general practice in a rural setting	; haematology in university teaching	g hospital: *	
During this placement, the foundation doctor will be able to achieve a number of the F	informati	on only - it is	rs when the tooltip is hovered over/clicked on:
Section 1: Professional behaviour and trust	Tooltip 1	ot a question Tooltip 1	Acts professionally
Section 2: Communication, teamworking and leadership	Tooltip 2		Delivers patient centred care and maintains trust
Section 3: Clinical care Section 4: Safety & quality	Tooltip 3 Tooltip 4		Behaves in accordance with ethical and legal requirements Keeps practice up to date through learning and teaching
Occion 4. Darcy & quality	Toolap 4		Demonstrates engagement in career planning
Particular opportunities / areas of focus during this placement are:			
		Tooltip 2	Communicates clearly in a variety of settings

	Te	ooltip 2	Communicates clearly in a variety of settings Works effectively as a team member Demonstrates landership skills	Is trained and manages cardiae and respiratory arrest Demonstrates understanding of the principles of health promotion and illness prevention Manages pallative and end of life care
Placement Supervision Group (PSG) Tooltip 5 Are you able to identify the likely members of the PSG for this placement at this point? * £ £ Yes £ No	T Question below appears if "Yes" selected. Question below doesn't appear if "No" selec	cted.	[Extract from Foundation Programme Curriculum 2016 p.23] Within any placement, an individual healthcare professional is unlikely to build up a coherent picture of the overall performance of an individual foundation doctor. Whenever possible, the named cinical supervisor will see information from serior healthcare professionals who will work with the foundation doctor during the placement. These colleagues will functions as a placement supervision group, commenting on whether the foundation doctor's clinical and professional profescional sprace to meat or exceed the minimum levels performance required for sign off in each of the 20 foundation professional capabilities at the end of the year.	Recognises and works within limits of personal competence Makes patient safety a priority in clinical practice Contributes to quality improvement

Toolity 3 Recognises, assesses and initiates management of the acutely ill patient Recognises, assesses and manages patients with long term conditions Obtains history, performs clinical examination, formulates differential diagnosis and management plan

Requests relevant investigations and acts upon results

Prescribes safely Performs procedures safely

The following individuals may form the PSG for this placement: Note that this will not start the PSG feedback request process - this needs to be done Mandatory question if 'Yes' selected above - at least one entry required. separately near the end of the placement.

Name	Job Title	Grade)

1. Have you been advised who your educatio					
	Yes No				
	110				
2. Are you aware of the requirements for satis	sfactory completion of your foundation year	(including the benefits and re	equired number o	of assessmen	nts and supervised learning events (SLEs) etc)? *
	Yes				
	No				
3. Are there any practical procedures you fee	luceu a cod cutro cumo est with in this places	ent? * Toot		Fooltip 6	The GMC Core Procedures are: 1. Venepuncture, 2. IV cannulation, 3. Prepare and administer IV medications an
3. Are there any practical procedures you ree	Yes	Question below appears if		ooitip 6	injections, 4. Arterial puncture in an adult, 5. Blood culture from peripheral sites, 6. Intravenous infusion including
	No	Question below appears in	163 36/66/64.		the prescription of fluids, 7. Intravenous infusion of blood and blood products, 8. Injection of local anaesthetic to skin, 9. Injection - subcutaneous (e.g. insulin or LMW heparin), 10. Injection - intramuscular, 11. Perform and
					interpret an ECG, 12. Perform and interpret peak flow, 13. Urethral catheterisation (male), 14. Urethral
If yes, explain below. *		Mandatory question if 'Yes	selected above		catheterisation (female), 15. Airway care including simple adjuncts (e.g. Guedel airway or laryngeal masks).
4. Have you been given clear advice as to wh	at is expected of you in your position? *				
	Yes				
	No				
5. Do you know how to use the e-portfolio? *					
	Yes				
	No				
Have you been given training and access t		our workload? *			
	Yes				
	No				
7. Do you know what your work schedule and	d work intensity are and how to contact the	rust's quardian of safe worki	na?		
	Yes	5	5		
	No				
8. Have you been told how to book leave (inc	luding study loove if enpropriate)? *				
	Yes				
	No				
9. Are you familiar with your new place of wor					
	Yes No				
10. Do you feel competent to use any essent		perate? *			
	Yes				
U	140				
11. Have you been told who to contact for cli	nical advice in hours? *				
	Yes				
	No				
12. Have you been told who to contact for clin	nical advice out of hours? *				
	Yes				
	No				
13. Do you know how to order investigations	and access their results in and out of hours Yes	, if appropriate to your role? *			
	No				
14. Do you know how to access guidelines w					
	Yes				
L	NO				
15. Do you know who to contact if you have	personal concerns? *				
	Yes				
	No				
Note: By signing this form you are agreei	ing to follow the GMC standards for train	ers (http://www.amc-uk.or	rg/education/sta	andards.asn	a.
			<u>"</u>		
Supervisor details					
News		1			
Name GMC Number		4			
Email		1			
		-			

Signatures

Educational Supervisor signature:	
Date signed by Educational Supervisor:	
Foundation Doctor signature:	
Date signed by Foundation Doctor:	

* Celiately testes and the second se