

New Foundation Curriculum August 2021

Headline Changes

- **3 Higher Learning Outcomes (HLOs) with 13 Foundation Professional Capabilities (FPCs)** - reduced from 20.

HLO1: THE CLINICIAN	HLO2: THE HEALTHCARE WORKER	HLO3: THE PROFESSIONAL
An accountable, capable and compassionate clinician	A valuable member of the healthcare workforce	A professional, responsible for their own practice and portfolio development

- All capabilities to be demonstrated in 3 settings across the 2 years of training: acute / community / mental health.
- Contemporaneous portfolio activity written into the capabilities; HLO3.
- Increased emphasis on Mental Health – curriculum evidence requirement and in core teaching.
- Increased emphasis on developing the professional.
- Increased emphasis on ensuring equity and awareness of differential attainment.
- Self Development Time mandatory; 2 hours per week for all FDs to facilitate activity related to the foundation portfolio.
- ILS / ALS removed as a required course. Replaced by specific requirements in FPC2.

Assessment / ARCP requirements

- Suggestion of 5 links per capability (Horus portfolio will allow a maximum of 10).
- Maximum use of one piece of evidence 3 times.
- No absolute numbers of SLEs – progress focuses on curriculum requirements rather than specific numbers of assessments.
- Recommendation of 5-10 SLEs per placement.
- At least 5 direct clinical observations of clinical encounters in SLEs to be linked to FPCs 1-5 with specific life support competencies evidence in FPC2.
- No core procedures – replaced by capability in common procedures in FPC4. Expectation is that this is covered in medical school. Specific competency demonstration may be required by a small number only e.g., IMG.
- Involvement in audit and QI activities remains.

Supervisor meetings etc

- CS meetings remain the same; Initial and end of placement X3. Mid placement meetings encouraged.
- Minimum one satisfactory PSG supported CSR. Encouraged to support all 3.
- ES meetings **regularly** through the year, tailored to the needs of individual trainee. Reports remain unchanged; 3 initial, 2 x end of placement and 1 x end of year.
- Minimum one satisfactory TAB per year.
- **Summary narrative** required for each HLO – Sets out the rationale for selecting the evidence linked to the capabilities. Should be written and edited as the year progresses. Provides a detailed reflection on progress through training and is guided by the ES through the year. The process will identify areas for personal development and will inform PDPs.
- Introduces concept of hierarchy of evidence: capabilities should be evidenced with “Does” as much as possible.

Does is best e.g., SLEs.

Shows next e.g., simulation.

Knows least e.g., eLearning / teaching / reflection.

- When assessing the portfolio and curriculum evidence, the ES should consider:
Majority of links to HLO 1 should be SLEs.
Significant number of links to HLO2 will be SLEs.
Lowest evidence will be the main form of links to HLO3.
- Most learning will be experiential during clinical placements (used to be called service-based learning).
- Supplemented with direct learning – core teaching 30hours.
- Supplemented with self-directed learning – record of other learning to develop areas of practice or other learning of value to the trainee e.g., e learning, department teaching. (Not to be confused with self-development time).

HORUS

- HORUS ePortfolio will be updated to reflect the new Curriculum.
- To see all the evidence required and descriptors for each HLO please click the grey Guidance and Descriptors buttons at the top right of the curriculum overview as shown below:

Curriculum Overview

[Show all](#) | [Hide all](#)

Show me: [Guidance](#) | [Mapped evidence](#) | [Descriptors](#) | [e-LfH](#)

HLO 1. An accountable, capable and compassionate doctor

Resources List

[Peninsula Foundation School SharePoint site](#)

(You will be provided access to this site via an email).

[UKFPO](#)

Contact email for queries curriculum2021@foundationprogramme.nhs.uk