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REQUIREMENT	NOTES & GUIDANCE	Timeline for Reminders / Audit		
		Placement 1	Placement 2	Placement 3
12 months full time (or equivalent) F1 experience in approved posts, working in the full role to which appointed	FDs must notify and record sick leave/time out of training correctly to the <b>rota office/your department</b> following trust guidelines. <b>FDs must also notify the Foundation Team of any absences (not including annual leave).</b>	Keep records of all absences		
Mandatory Teaching Log	Attendance at a minimum of <b>60hrs</b> teaching of which a min of <b>30hrs</b> must be CORE foundation teaching - The school does not specify any e-learning that can count towards core teaching, furthermore it recommends that no more than 10 hours e-learning be counted towards non-core teaching. This is to ensure FDs experience a range of training opportunities. This is evidenced by the completed <b>Personal Learning Log</b> (Pro rata for LTFT trainees).	Accrue approx. 20 hrs per placement PLL updated □	Accrue approx. 20 hrs per placement PLL updated	Accrue approx. 20 hrs per placement PLL updated
	Evidence of attendance at <b>2</b> x ½ day <b>SIMULATION</b> sessions (SIM 1 and SIM 2) Link your SIM certificates to HLO 1, FPC 2 Certificates must be uploaded to the 'Course / Seminar / other learning attended' section of portfolio – this can be found under More Forms/Additional Achievement	SIM 1 Certificate Uploaded  SIM 1 Certificate Mapped  SIM 2 Certificate Uploaded  SIM 2 Certificate Mapped		
Assessment Requirements:	<b>TAB</b> x 1 (as a min) with satisfactory results – Although you can start your TAB in P1 or P2 the recommended process is to start a tab in your 2 <sup>nd</sup> post (early Jan). You can request feedback from colleagues/peers who you work with in current and past placements. If your TAB is unsatisfactory, you have time to complete another one prior to ARCP. PLEASE NOTE: As a local school we have taken the decision to mandate that you must have started a TAB by end of January at the very latest.	Tab Started Responses Chased TAB finished in time ES released TAB to	_	
	<b>PSG –Minimum 1 per year:</b> Good practice is to have 1 x PSG per placement as the requirement to have 3 PSGs (1 per placement) is likely to become an ARCP requirement. As a local school we recommend that you ensure you have a completed PSG by end of P2.			

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Clinical Supervisor Meetings & Reports	Record of 1 x Induction meeting with clinical supervisor for each post. Although these meetings don't form part of the national ARCP checklist, they are highly recommended, especially as they are a good point to discuss and set up your PSGs=  3 meetings for F1 year			
	1 x Satisfactory End of Placement Clinical Supervisor report for each post  = 3 meetings for F1 year  NB: At least 1 of these reports must make use of PSG feedback (see PSG section)  * All clinical supervisor's end of placement reports must be completed before the ES meetings and before portfolio's close in preparation of the FDs F1 ARCP			
	Initial meeting with ES (first post) - 2 further initial meetings, one for each placement Although these meetings don't form part of the national ARCP checklist, they are highly recommended to build a good relationship with your ES			
	End of placement reviews for 1 <sup>st</sup> and 2 <sup>nd</sup> posts			
Reports Recommended 6 recorded meetings per F1 year	Satisfactory End of Year Report – If the foundation Dr has not satisfactorily completed one placement but has been making good progress in other respects, it may still be appropriate to confirm that the FD has met the requirements for progression.  * The educational supervisor's end of year report must be completed before portfolio's close in preparation of the Dr's F2 ARCP	Get this booked in early as portfolio's close on 1st June and this meeting MUST have taken place and recorded on the F portfolio before this date		

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Supervised learning events (SLE)	The Foundation Dr should provide evidence that they have met the 3 Higher Level Outcomes (13 foundation professional capabilities), recorded in the portfolio.  There is no absolute number of SLEs however NHSE have suggested 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 (including ALS)			
PDP	As Good professional practice you should continue to do these, however they are no longer part of the ARCP requirement, but the onus is on the trainee to be professional.			
Up to date portfolio  To include reflections and summary narratives.	<b>3 x Summary Narratives</b> – 1 per HLO, good practice is to start them in P1, review them in P2, and complete them in P3 – These should demonstrate how the FD has achieved the curriculum outcomes.	Started □	Reviewed and updated □	Reviewed and completed $\square$
For successful ARCP, NHSE will be looking for full & satisfactory engagement with	<b>Evidence of Reflective Practice</b> ; There is an expectation for trainees to use reflections alongside SLEs in the curriculum. You will need to reflect in your summary narrative	Reflections Done?	Reflections Done?	Reflections Done?
the training programme and the portfolio:	Contemporaneously developed portfolio Engagement with feedback on training programme Study leave/teaching record uploaded to portfolio under 'Extra Curricular Activity' (to include ALS, ALL study leave taken including GP set learning AND any Study Leave	Review the portfolio during each placement to ensure you have engaged with feedback and teaching and your portfolio is up to date.  Study Leave Record uploaded		
Mandatory Training	that was borrowed from your F2 allowance when in F1)  Evidence of successfully completing <b>ALS</b> (by way of Certificates) – You may need to re-upload your ALS certificate from F1.  Certificates must be uploaded to the 'Course / Seminar / other learning attended' section of portfolio – this can be found under More Forms/Additional Achievement – and mapped to FPC2	ALS Certificate Uploaded		

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	The FD should provide evidence that they have met the 13 foundation professional capabilities (FPCs), recorded in the e-portfolio.	
	Evidence to satisfy HLO 1 & 2 must include direct observation of a sufficient variety of clinical encounters in the form of SLEs, and the specific life support capabilities specified in FPC2 (ALS).	Curriculum Mapping Completed
	HLO3 should be evidenced by reflections, feedback, PDP etc.	Max 10 items per FPC
	Maximum of 10 pieces of evidence per FPC	·
	Each piece of evidence can be mapped to a maximum of 3 FPCs	ALS Linked
Evidence of curriculum outcomes	Satisfactory completion of (and appropriate evidence provided for) all foundation doctor capabilities linked according to the foundation school guidance. <b>Rated as competent by Educational Supervisor.</b>	SIM Linked
	Links must include:	QIP Linked
	<ul> <li>ALS certificate linked to FPC2.</li> <li>Evidence of a full QIP (e.g. full presentation given of QIP) linked to FPC9.</li> <li>Evidence of delivering a teaching session linked to FC10.</li> <li>FPC 11 Evidence of engagement with quality assurance activity (e.g. completion of GMC survey, end of post survey, or participant in Foundation Quality panel</li> </ul>	ES checked Curriculum and rating given
Statement of Health and Probity	Signed by trainee – this should be signed when you first log into Horus at the beginning of each training year.	Signed
Form R & Record of Absences	Required for revalidation purposes. All Time Out of Training (TOOT) e.g. Compassionate Leave, Parental Leave, Sickness Absence, Jury Service, Industrial Action and any other statutory reason should be recorded on the Form R.  The maximum permitted absence from training (other than annual leave) is 20 days (when the doctor would normally be at work) within each 12-month period of the foundation programme. Information on this form will be matched to the information provided to the foundation school/health roster and confirmed to the panel.	Form R Completed

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PLEASE NOTE – EACH PLACEMENT ON YOUR PORTFOLIO CLOSES EXACTLY 90 DAYS (3M) AFTER PLACEMENT END DATE SO YOU MUST ENSURE YOU HAVE UPLOADED EVERYTHING FOR THAT PLACEMENT BEFORE THE PORTFOLIO CLOSES – WE CANNOT RE-OPEN ANY PLACEMENT ON YOUR PORTFOLIO FOR LATE ENTRY

For more information regarding your ARCP requirements please contact the Foundation Team on 38046/30501; <a href="mailto:plh-tr.pgmcfoundation@nhs.net">plh-tr.pgmcfoundation@nhs.net</a> or pop in to speak to either Emily Drew (Foundation Programme Coordinator) or Nicky Latham (Foundation Programme Administrator).

More information can also be found on our website: https://www.pgmeplymouth.com/ under our FOUNDATION tab.

ES Educational Supervisor
CS Clinical Supervisor
FD Foundation Dr
SIM Simulation Training

**ARCP** Annual Review of Competence Progression

TAB Team Assessment of Behaviour – Trainee identifies responders and sets it up on their own portfolio in HORUS

PSG Placement Supervision Group – Clinical Supervisor identifies responders and sets it up on your portfolio in HORUS - see website for more details

Mini CEX Mini Clinical evaluation exercise

DOPS Direct observation of procedural skills

CBD Case Based Discussion
PDP Personal Development Plan
ALS Advanced Life Support

**SL** Study Leave

**Rotation** The whole of your foundation Year 1 or Year 2

**Placement** 

**Or post** One of the three 4month posts in a particular department

**HORUS** The name of the electronic portfolio software that all foundation Drs use

**CORE teaching** Any foundation teaching provided by the foundation team and generally held at the Postgrad Centre (this includes F2 regional teaching) and is targeted, available and mandatory to all of the foundation Yr

trainees.

NON CORE Any planned, organised teaching within your department or provided by the foundation school which is not available to every foundation trainee such as GP set learning days, department teaching, grand

rounds etc. Please refer to: https://www.pgmeplymouth.com/foundation-teaching-policy for further information and clarification