

Introduction to 2021 FP curriculum for educators

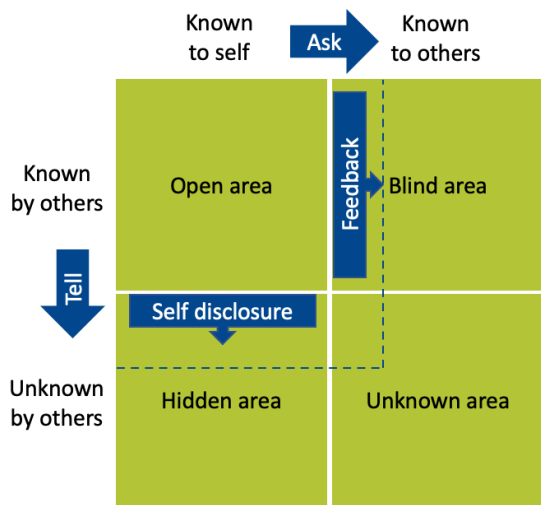
The Foundation Programme is designed to develop generic clinical and professional skills and prepare newly qualified doctors for a medical career by providing an introduction to a number of different healthcare workplace settings within the foundation school through which they rotate as they progress in the programme. This curriculum outlines the requirements of the FP and is approved by the GMC.

Full details of the purpose of the FP can be found in the Purpose section of new FP curriculum. However, this is reflected in the three High Level Outcomes (HLOs) of the programme and the thirteen Foundation Professional Capabilities which the FD is required to demonstrate to successfully complete the programme.

HLO1: THE CLINICIAN	HLO2: THE HEALTHCARE WORKER	HLO3: THE PROFESSIONAL
Direct and indirect patient care: <ol style="list-style-type: none"> 1. Clinical Assessment 2. Clinical Prioritisation 3. Holistic Planning 4. Communication and Care 5. Continuity of Care 	Integrating into the healthcare workforce: <ol style="list-style-type: none"> 6. Sharing the Vision 7. Fitness for Practise 8. Upholding Values 9. Quality Improvement 10. Teaching the Teacher 	Professional requirements and expectations: <ol style="list-style-type: none"> 11. Ethics and Law 12. Continuing Professional Development 13. Understanding Medicine

Many of the FPCs will be demonstrated during the FD's day-to-day work and the curriculum uses the term 'experiential learning' to describe this. This experiential learning will be enhanced by 'core' foundation teaching and by personal study and reflection.

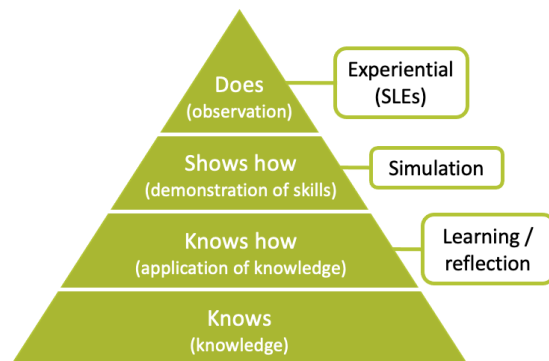
Evidence of progress in and achievement of the FPCs is recorded by the FD in their e-portfolio and each year, usually at the beginning of June for most FDs, the e-portfolio is submitted to the Annual Review of Competence Progression (ARCP) panel, which will decide if they have made sufficient progress to move to the next level of training. Assuming they complete F1 successfully, they will be eligible to apply for full GMC registration and move on to F2. If they fulfil the requirements of F2, they will be awarded the Foundation Programme Certificate of Completion (FPCC) and be eligible to apply for specialty, core or GP training.



As they train, FDs must be given the opportunity to develop their skills and to demonstrate them in the workplace. They must receive feedback on their performance and advice on how to improve it. The curriculum uses a form of the JoHari window to capture this. Although most doctors have good insight into their strengths and weaknesses, like all of us they have 'blind spots' and, as well as reinforcing good practice, the purpose of feedback is to highlight areas of practice that need development to improve performance.

All those supervising FDs should therefore actively seek to provide feedback in all areas of training and record some of this formally in the FD's portfolio as supervised learning events (SLEs). Some of these SLEs will be used by the FD as evidence that they have achieved each of the 13 FPCs.


As most of the FPCs are based on performance and behaviours in the workplace, these records provide the most useful evidence for their e-portfolios. The programme puts these at the top of the 'Hierarchy of Evidence' which reflects the structure of Miller's Pyramid. As a supervisor you should review the FD's portfolio progress and agree how many SLEs should be achieved to evidence the learning outcomes.



More information on the programme of learning, the educational approach and assessment process used in the FP can be found in the curriculum document.

When supervising FDs, all those involved should bear in mind that most FDs will have limited experience and should thus ensure that any for whom you have responsibility are closely supervised and supported. As they gain confidence, the level of supervision may not need to be as great; however, FDs should always have support immediately available to them and be able to seek advice when needed.

As a result of the limited experience of FDs, supervisors should remember that some may be unfamiliar with the environment in which they have been placed and that this



might be compounded in FDs from certain backgrounds. This can adversely affect their performance and supervisors must ensure they take steps to help them understand better the requirements of the programme to reduce any differential attainment as a result of this.

Each year, some FDs will not be able to demonstrate the FPCs. This can sometimes be due to poor performance in the workplace and sometimes due to inadequate evidence presented to the ARCP panel. Sometimes it is due to ill health or other issues meaning they miss too much training time to complete the requirements. If you are aware that an FD is experiencing difficulties that may prevent them from progressing in their training, it is vital that you raise this early with their ES.

More information on the requirements of supervisors can be found in the curriculum document.

To provide support and guidance for the FD, they will be assigned specific supervisors: the clinical supervisor (CS) for each placement and the educational supervisor (ES) for each training year.

More on these roles can be found in the accompanying factsheets.