**The Role of the Educational Academic Foundation Trainee in the East of England**

Congratulations on your successful application to the educational academic programme. We hope that you find this fulfilling and it starts you on a road as an educationalist in medicine.

We see this post as a first step in a lifelong enthusiasm for the quality of education and educators in medicine. We hope that as you go through core and higher training that you might use this as a basis for a diploma in education, and maybe a masters. We also have education fellows from ST3+

Initially you will be wondering how this will work. The prospectus clearly shows that we anticipate the majority of this academic programme will occur in F2, although you may wish to do some preparation, particularly around the research in F1.

We hope that this document clarifies and helps you to get the most from this exciting opportunity. It has been written due to feedback requested some interpretation of the academic compendium. Please be aware that our suggestions of what you may do and how to evidence these are just suggestions. We would suggest that you plan your activities and evidence with your Foundation Training Programme Director [FTPD] or the named academic supervisor at your trust. We welcome feedback and a ‘trainees suggest’ section.

You will have plenty of time to work in the local education department, at least 10 hours a week and up to 16, dependent on your PGCert. Most of your education time is expected to be within the trust. Part of the rationale for trusts in hosting educational academic fellows was that you would be embedded within their education teams and help drive forwards excellence, participate in teaching and evaluation. It is expected that you will therefore be involved regularly in teaching, either facilitating, organizing or faculty within the trust. You should keep a log of your teaching.

We also suggest that you attend at least one educational faculty forum at your trust, that sit with the trust team if there is an educational/quality visit and embed into the educational processes as local environment allows.

We plan that the education foundation hubs will continue and would recommend that in F1 you attend a hub, meet with the current education fellows and potentially be part of faculty in your F2.

However, you will also gain valuable experience at the medical school or out of the trust at HUB sessions. These specific absences from the trust should be agreed with your FTPD and notified as agreed offsite to your rota coordinator, so that there is a record of where your working hours are spent and should become part of your outcome measures demonstrated. Trusts do need to know where you are on a working day, as they would need to know for a major incident, or for example to know in an evacuation procedure whether you need to be accounted for [however rare this may be]

Here, in this document, we go through the specific formal elements of the academic compendium we expect to see at the ARCP, as well as our own locally determined criteria. We hope to give examples of how you can demonstrate this, who might support you, and examples for what you might like to consider.

Many of these elements overlap with requirements of your PGCert and can be used as evidence for both. Good planning of your time will allow you to not only achieve the outcomes, but to take them further as suggested extension activities. Some of the extension activities may make a good basis for your research project.

We suggest that in your HORUS e-portfolio, you upload a folder of evidence that match to [these criteria.](http://www.foundationprogramme.nhs.uk/sites/default/files/2018-08/Academic%20Compendium_0.pdf)

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| **Trust based supervision** |
| In this document I have referred to the FTPD as the trust based lead for your supervision. However, they may instead nominate an educationally strong supervisor to be your academic supervisor in this year. |
| All trainees and all trusts should have clarity over the trust based supervision from the commencement of training. |
| Trust based educational resources come from the foundation training programme director, the director of medical education, the simulation lead, the undergraduate medical school lead. All of whom should be able to help and assist in the variety of outcome projects that may be in their remit. |
| The institutes of higher education have all agreed to provide a key person for advice. It is anticipated that they may help direct you to appropriate links for project work for outcomes 5 or 6. However, they are predominantly placed to enable you to achieve your PGCert. |

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| **Key Contacts** |
| [East Anglian Foundation School Trust contacts](https://heeoe.hee.nhs.uk/node/2686) |
| [Essex Bedfordshire and Hertfordshire Foundation School Trust contacts](https://heeoe.hee.nhs.uk/node/3667) |
| [Anglia Ruskin University](mailto:Carrie.Roder@anglia.ac.uk) |
| [University of Hertfordshire](mailto:z.ahmed8@herts.ac.uk,%20k.g.spearpoint2@herts.ac.uk) |
| [University of East Anglia](mailto:%20v.rodrigues@uea.ac.uk) |

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| **Wider support** |
| We plan that there should be a meeting early in the academic year for F1, F2 and educational fellows as well as towards the end of the academic year. |
| Our educational fellows are developing projections within foundation and often have elements or offshoots of their project that would be suitable for a foundation project for outcome 5. Part of their role is to provide some ongoing mentorship and support for our foundation academics. |
| Our Foundation School Director and deputies, the overseas doctors, hub and the SIM FTPD as well as HEE EoE simulation lead also have both project ideas and give support. On our website we have the contacts for them. |

**We have determined the following to be core outcomes to be demonstrated by all our education fellows:**

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| **Outcome 1: work with the trust or deanery teams to evaluate elements of the foundation taught programme** |
| **Competences**   * describe the purpose of evaluation * Review several different feedback/evaluation forms * Complete evaluation of an element of the taught programme. creating actions to improve teaching based on feedback |
| **Example of supporting evidence:**   * Short written review of the evaluation tools that can be used * Summary of trainee evaluation of an element of the taught programme with a critique from you as to main issues with that taught element, both positive and negative * Further critique on the usefulness and limitations of the evaluation tool used * Finally a suggestion as to how to improve the evaluation tool. |
| **Suggested projects**  look at the elements of the locally delivered taught programme and choose one the elements to obtain and review feedback, working with FTPD/Med ed teams.  This could be the simulation sessions; a hub session within your trust or subregion; virtual reality simulation session. |
| **Who will help you**  your FTPD in the trust will lead and help you with this. They will review your written review, advise you of the curriculum link and educational goals for the teaching you will evaluate, and then review your evaluation of both that element and the tool.  The medical education team will provide you with dates of sessions, and may suggest sessions particularly to be reviewed, based on previous feedback, or on development of the programme strategically. There may be a trust evaluation tool that is commonly used. |
| **Evidence list in e-portfolio**   * Short written section on why evaluate, and different evaluation tools. This may be derived from PGCert work. * Summary and critique of the evaluation received and suggested improvement * Critique on evaluation tool, and any improvements to this   **This work may then lead to**   1. Developing and testing a new evaluation tool for the trust 2. Developing and evaluating an alternative or improved teaching |
| If you think that you would like to use this as a springboard to your projects for outcome 2 or 3, you may wish to consider choosing the session to evaluate in F1 and collecting the evaluation data, leaving the analytical review and development until F2. |
| **Outcome 2 : Brings together a multidisciplinary group to collaborate on a specific research/education/leadership project.** |
| *Competence*s • Identifies key stakeholders/collaborators. • Organises meetings of stakeholders/collaborators to address the specific issue(s). • Develops an action plan/proposal involving the multidisciplinary team. |
| **Examples of relevant supporting evidence**   * Agenda/minutes from meetings * Reflection on multidisciplinary collaboration |
| **Suggested project**  This sounds complicated but is relatively straightforward to achieve. We suggest you choose an area that either you would like to see in the taught programme and currently isn’t, or one that you have evaluated, and think could be delivered in a more interactive or multiprofessional way. You should start working on this early in F2. Using a multiprofessional  team you are comfortable with, either from an F1 attachment or your F2 first placement will help.  **a)** You will lead the development a multiprofessional/modular teaching incorporating some elements out of - SIM skill/communication/results review/pharmacy support/nursing expertise. Think about who might add to the teaching, and what skills would they bring. Liaise with local education team, or also with our simulation lead or educational fellows for assistance. Plan and devise with relevant hospital team. Minute meetings in development.  **b)** As a group you will the deliver the teaching. Trainee feedback should be sought and ideally also peer review, either from a fellow educational trainee or educational supervisor. You are often asked to provide peer review of teaching for our PGCert, so this ties in well.  **c)** reflect on the teaching, and discuss the pedagogic theories used as well as the adaptions made. Consider your learning from the feedback and whether there are improvements.  **d)** this should be written up as an ‘off the peg’ programme that can then be delivered in another trust by another team.  **e)** Consider ‘swapping’ your developed teaching with an education academic in another trust and then running the new programme with evaluation as an extension outcome for your portfolio. |
| **Who will help you**  Your FTPD should lead on this, however the hub FTPD or the sim FTPD or educational fellows may also be available to give you advice in choosing and planning your project. |
| **Evidence list in e-portfolio:** |
| * Written proposal for teaching, and the rationale behind it, include some educational theory, curriculum mapping and outcomes. * Working group and minutes of meeting * Reflection on multidisciplinary collaboration * Confirmation of delivered teaching * Trainee feedback received * Peer feedback received * Reflection on the teaching. |
| **This work may then lead onto:**   1. Developing a group of ‘off the peg’ teachings with other education foundation academics for use in different trust that are tried between trusts, or you may choose to develop these as part of a research project, in which case involve the SIM lead and educational fellows. 2. Peer review of other education academics 3. Adaption for either different learners or a different learner environment [outcome 3] |
| **Outcome 3: Adapts teaching style to different learner needs and to different learning environments.** |
| **Competences**   * Describes and critically appraises the major pedagogic theories * Adapts teaching style, as appropriate, during learning events * Applies these pedagogic theories to different professional groups, at different career stages (e.g. medical students, doctors, nurses) in different settings e.g. small groups (e.g. seminars, bed side teaching) and large groups (e.g. lecture theatres). |
| **Examples of relevant supporting evidence**   * Lesson plans * Feedback from participants * Reflective logs on teaching sessions |
| **Suggested project**  This is a project of two parts, the first is about learning theories, and will overlap with work done for your PGCert. You may choose to submit evidence of learning on the PGCert course for the theoretical component. Then you will develop a teaching. You may choose to use the teaching in outcome 2 as either one of the settings or career stages and then adapt this for different setting or career stages, although you have sufficient time for this to be a different teaching. Please be explicit in your evidence. You have an opportunity to be imaginative with this outcome.  **a)** For example, if preparing a new teaching, consider develop a teaching for generic foundation that contains both a large group/seminar introduction and then a small group follow of either simulation/VR simulation/case discussion or bedside teaching. Or prepare the teaching in two ways for the same careers stage and compare the feedback for the different modalities. then adapt for medical students either run as a teaching in two parts, or two different teachings. In commentary you could then consider how this could be adapted further for either multiprofessional or non-medical teaching.  **b)** Trainee feedback should be sought and peer review, either from a fellow educational trainee or educational supervisor. Again, peer review of teaching is an essential part of PGCert.  **c)** Reflect on the teaching, and discuss the pedagogic theories used as well as the adaptions made. Consider your learning from the feedback and whether there are improvements. |
| **Who will help you**  Your FTPD should advise on this, however the hub FTPD or the sim FTPD or educational fellows may also be available to give you advice in choosing and planning your project. |
| **Evidence list in e-portfolio:**   * Short written section on relevant learning theories and how they are important. This may be derived from PGCert work. * Written section describing the teaching, the different modalities in setting and learner, and your anticipated changes. * Confirmation of delivered teaching * Trainee feedback received. Consider the comparisons and contrasts. * Peer feedback received * Reflection on the teaching and the changes you anticipated, and those that required adaption during the teaching. Consider also the different educator preparation and time required. |
| **This work may then lead onto:**   1. Repurposing or developing a portion of the foundation training programme from higher training or for medical students. You may wish to consider this in a wider context as part of outcome 6 2. Developing may link with outcome 2 |
| **Outcome 4: Develops and then uses an assessment programme to test knowledge, skills and attitudes.** |
| **Competences**   * Describes and critically appraises the different assessment tools currently used and their underlying evidence base * Outlines what constitutes a ‘good’ assessment * Blueprints assessments to the curriculum/learning outcomes * Uses technology to add value to medical assessment. |
| **Examples of relevant supporting evidence:** Description of the assessment programme |
| **Suggested Project:**   1. Consider the assessments used in foundation training, and then review the literature around one of these. 2. Devise a template for what the assessment is used to assess against the foundation curriculum. Devise a trainee feedback on the value of that assessment. 3. Review how that particular assessment is utilised in practice, three different options are given as examples    1. Seek a small sample group of foundation trainees who are willing to discuss their use of that particular assessment with you and the template and feedback tool.    2. Seek a small sample group of higher trainees who provide that particular assessment and are willing to discuss their use with you, their awareness of the assessment.    3. Seek permission to review completed assessments on e-portfolio and see to what extent the outcomes are able to be reviewed against your template. |
| **Who will help you:**Your FTPD should advise on this, potentially also the DME or your educational supervisor. Educational fellows may also be available to give you advice in choosing and planning your project if you are considering extending it to be part of outcome 5. |
| **Evidence list in e-portfolio:**   * Description of the assessments used in foundation, and a short written section on literature supporting or debating the use of your chosen assessment. This may be derived from PGCert work. * Written section describing how the assessment works and what it covers in foundation – your template. * The outcome of reviewing in practice * Trainee feedback received. Consider the comparisons and contrasts. |
| **This work may then lead onto:**   1. A project for outcome 5 based around work based assessments 2. Teaching/training of higher trainees in best practice – potentially part of educator faculty   **THE EDUCATIONAL FELLOW CAN THEN CHOOSE EITHER OUTCOME 5 OR OUTCOME 6**  These are the large pieces of project work for your foundation academic programme. These have been left less structured by design.  These can grow out of ideas from the earlier outcomes. |
| **Outcome 5: Develops and/or completes a piece of medical education research or independent project work.** |
| **Competences:** See outcomes and competences listed in the research section of the Compendium. |
| **Examples of relevant supporting evidence**   * A completed manuscript * An accepted abstract at a local/national/international meeting |
| **Suggested Projects:**  Please discuss early with your local sim lead and FTPD whether there is local research projects, or whether they can support you in a self identified project. Alternatively, discuss with educational fellows and the foundation school directors and simulation leads possible areas for review.  This should be considered in your F1 year and ethical approval sought if required as early as possible to allow time in F2 to complete. Ideally this should be in the third term of F1 or early in the first of F2.  These can be based around educational theory, or impact assessments of teaching, or quality improvement projects within foundation education, the remit is wide. |
| **Outcome 5a: Writes and submits an application for ethical approval if appropriate (local).** |
| **Competences**   * Describes the general ethical principles that underpin research * Describes the process for ethical approval in the NHS (local) * Completes an application for ethical approval (local) |
| **Examples of relevant supporting evidence**   * Completed application for ethical approval * Ethical approval (local/national) |
| **Suggested projects:**  local ethics approval may be required for your project and should be considered at the end of F1. It is most likely to be considered as part of service evaluation. Your local FTPD or simulation lead should provide support for this process. |
| **Outcome 5b: Presents the study a local/national/ international meeting.** |
| **Competences**   * Describes the purpose of scientific meetings * Submits an abstract to a scientific meeting * Produces and presents a poster/oral presentation |
| **Examples of relevant supporting evidence**   * Acceptance letter at a local/national/international meeting * Poster/PowerPoint slides * Published conference abstract/programme * Certificate of attendance. |
| **Suggested delivery**  An EoE research day will give opportunity for presentation. There are also national foundation events, and you will be advised of those dates. |
| **Outcome 6: Develops a new module/course in the undergraduate or postgraduate medical curriculum that enhances learning.** |
| **Competences**   * Describes and applies the principles that underpin curriculum development * Constructs and undertakes a Needs Analysis plan * Develops patient centred educational and clinical outcomes * Identifies and designs a feedback tool(s) * Appropriately reflects on feedback and adjusts the programme accordingly |
| **Examples of relevant supporting evidence**   * The new course curriculum * Feedback from participants * Feedback from peers/supervisors |
| **Suggested projects**  **a)** For the undergraduate option, this outcome measure will take early liaison with the appropriate medical school – either UEA or ARU – to review the opportunities available to undertake this project work. This can be brokered through the foundation schools directors. This is a challenging project to deliver in its entirety.  **B)** Alternatively, the trainee can consider an element of the foundation curriculum, and work with their local FTPD. We would suggest review in the first year of training needs gap analysis and then development of your curriculum, and pilot feedback. Consider which element you wish to cover, devise appropriate generic/hub/simulation or e-learning to cover the gap. Deliver this teaching with appropriate feedback tool and peer review. Follow with a reflection. |
| **Outcome 6b: Presents the new module at a local/national/ international meeting.** |
| **Competences**   * Describes the purpose of scientific meetings * Submits an abstract to a scientific meeting * Produces and presents a poster/oral presentation |
| **Examples of relevant supporting evidence**   * Acceptance letter at a local/national/international meeting * Poster/PowerPoint slides * Published conference abstract/programme * Certificate of attendance |

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| **ARCP** |
| Academic trainees will have a face to face ARCP. The foundation curriculum elements will be reviewed in line with the Foundation ARCP, and the academic progress will be reviewed against the expectations of this document. |
| **You will be expected to provide:**   * Evidence of outcomes 1-4 * Evidence of outcome 5 or 6 * Evidence of participating in PGCert – written work submitted, attendance registration * Evidence of regular participation in teaching – log of teaching, certification and feedback * Evidence of any additional educational experience: at the trust or medical school. |

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| **Exception Reporting and Troubleshooting** |
| It is anticipated that your academic time will be spent in education. It is true that patient safety is a priority, and there may be occasional exceptional circumstances when your educational sessions need to be taken by clinical cover. However, these should be exception reported to the guardian of safe working and a log of dates kept, and trusts should be able to return the academic time to you.  Should this seem a regular rather than exceptional occurrence, first speak to the local team, and then if necessary, escalate to the central foundation team. |
| Your local foundation team have agreed that the educational academic programme can be delivered within your trust and agreed that you will be given the time and assistance to complete this. Staff change, and if this is proving difficult, please escalate difficulties. Most will be easily remedied locally. This is still a new programme, and we do anticipate it will be an iterative process. Your constructive feedback will help us improve the experience in future years. |

**Author:** Dr Helen Johnson – Foundation School Director for the East of England, in consultation with stakeholder groups within the deanery.

This guidance is planned to be active for those commencing their PGCert from **August 2019.**

