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| **Please respond to the following statements about your Foundation GP placement as best you can** |
|  | Agree | Somewhat agree | Disagree | Don’t know |
| **INDUCTION** |  |
| An induction to the organisation of the practice took place and enabled me to start work safely |  |  |  |  |
| A placement planning meeting took place and helped me identify my learning needs for this post |  |  |  |  |
| I learned about Prescribing systems to help me prescribe safely |  |  |  |  |
| I was taught how to make a referral to secondary care |  |  |  |  |
| **SUPERVISION** |  |
| I have been supported to consult with patients either in person or by video/telephone and house visiting with increasing responsibility at the correct pace for me |  |  |  |  |
| I know who to contact when I need to ask for help and support when consulting, either in the surgery or while house visiting |  |  |  |  |
| When I ask for advice, support is available and is helpful |  |  |  |  |
| My prescribing is reviewed during case discussions |  |  |  |  |
| The referrals I make are discussed with me |  |  |  |  |
| **TRAINEE WORKLOAD AND TIMETABLE** |  |
| In an average week I will receive 3-4 hours of teaching: tutorial/ feedback/case discussion– or pro-rata if Less Than Full Time |  |  |  |  |
| I am allocated 2 hours per week personal development time |  |  |  |  |
| The teaching I receive is valuable and based on my needs |  |  |  |  |
| There is a good balance between clinical workload and learning on the job which will enable me to cover the FY curriculum |  |  |  |  |
| **TEACHING, FEEDBACK, ASSESSMENT AND ADEQUATE EXPERIENCE** |
| I get regular helpful feedback on how I am managing patients |  |  |  |  |
| I get regular helpful feedback on how I am progressing overall |  |  |  |  |
| Study leave requests are supported |  |  |  |  |
| I can attend mandatory Foundation teaching |  |  |  |  |
| I get advice on how best to use my portfolio |  |  |  |  |
| There is no difficulty in arranging to get SLE’s/assessments done |  |  |  |  |
| **TEAMWORK AND LEADERSHIP** |
| I am able to attend and contribute to practice meetings |  |  |  |  |
| I have been involved in Quality Improvement Activity |  |  |  |  |
| There is a culture of learning across the whole practice team |  |  |  |  |
| If a received a complaint or if something went wrong, I would receive support and advice from my trainer |  |  |  |  |
| There are opportunities for me to feed back to the practice on how my training is going |  |  |  |  |
| The wider practice team is involved in my training |  |  |  |  |
| The quality of clinical record keeping in the practice allows safe transfer of care between clinicians |  |  |  |  |
| **WELLBEING AND PROFESSIONALISM** |
| There is a positive environment in the practice with no undermining behaviours |  |  |  |  |
| LTFT working or other adjustments would be supported by this practice |  |  |  |  |
| Someone checks I am OK at the end of the day and after house visits |  |  |  |  |
| The practice would take steps to meet the needs of trainees from protected groups where these are different from the needs of other trainees. |  |  |  |  |
| **OVERALL EXPERIENCE** |  |
| I would recommend this practice to my peers as a good place to train |  |  |  |  |
| I would be happy if a relative was registered with the practice as regards quality of care |  |  |  |  |
| What is especially good about training in this practice? |
|  |
| What could be better? |
|  |