

Annex 9

Annual college/faculty Summary Form per specialty or sub-specialty

This form is a **summary of the minor changes** made to the curriculum and/or assessment system for each specialty or sub-specialty during a given period.

The changes must be in accordance with the definition of a minor change and should comply with PMETB's *Standards for curricula*, March 2005 and the *Principles for an assessment system for postgraduate medical training*, September 2004.

ALL SECTIONS OF THE FORM MUST BE COMPLETED AND ONE FORM SHOULD BE COMPLETED PER SPECIALTY OR SUB-SPECIALTY

Section 1. Details of the medical Royal College/Faculty/Specialist Association

Details of the medical Royal College/Faculty/Specialist Association	
Name	The Royal College of Pathologists
Specialty	Medical microbiology and virology
Sub-specialty	-
Contact details for the person responsible for submitting this form to PMETB	
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Section 2. Details of changes made for the period

Section 2(a) Please tick ONE box: 2008/9 2009/10 2010/11

Section 2(b)

Box no.	Minor changes made	Page reference in original	Proposed new wording	Rationale for changes made
1.	Change of name of College examination – Membership of the Royal College of Pathologists (MRCPATH) or Member.	Throughout curriculum and assessment system application form	Fellowship of the Royal College of Pathologists (FRCPath) or Fellow.	The name of the College examination has been amended following a change in the College's Royal Charter. There has been no change to the format or standard of the examination.

2.	Record of In-Training Assessment (RITA) and any associate terms.	Throughout curriculum and assessment system application form	Annual Review of Competence Progression (ARCP)	To reflect the name of the new annual review process as outlined in <i>A Guide to Postgraduate Specialty Training in the UK</i> (commonly known as the Gold Guide).
3.	Workplace-Based Assessment Department/Workplace-Based Assessment Manager	Throughout curriculum and assessment system application form	Assessment Department/Assessment Manager	To reflect the wider remit of the department/Manager in both workplace-based assessment and the Year 1 Assessment.
4.	Appraisal is recommended at least twice per year in the curriculum and assessment system.	Throughout curriculum and assessment system application form	Trainees should have an educational appraisal at least at the beginning, middle and end of each section/year of training.	To reflect the recommendation in the Gold Guide.
5.	There will be a maximum of two opportunities to attempt the Medical Microbiology and Virology Year 1 Assessment in Stage A/ST1 - at month 8 and month 10.	Assessment system application form, page 3	ST1 trainees will have two opportunities in any one year of training to attempt and achieve a successful outcome in the year 1 assessment	To comply with ARCP process as set out in the Gold Guide. This allows for trainees to normally have up to one extra year of additional training should they require it.
6.	The purpose of the Medical Microbiology and Virology Year 1 Assessment will be clearly stated in the Information and Guidance and available on the Royal College of Pathologists website.	Assessment system application form, page 7	The purpose of the Medical microbiology and virology Year 1 Assessment is clearly stated in the Information and Guidance and available on the Royal College of Pathologists website.	As stated: http://www.rcpath.org/resources/pdf/Year_1_MMV_OSPE_assessment_2007_08_information_guidance.pdf - see section 2, page 3
7.	The purpose of each of the workplace based assessment tools will be clearly stated and available on the Royal College of Pathologists website.	Assessment system application form, page 7	The purpose of each of the workplace based assessment tools is clearly stated and available on the Royal College of Pathologists website.	As stated: http://www.rcpath.org/resources/pdf/PurposeOfAssessmentTools.pdf

8.	Workplace based assessment is still being developed and the governance structure for this component of the assessment system, as well as the overall governance structure for clarifying the relationship between training, examinations, and assessment are currently under review. It will be ensured that the structure of these governance arrangements is sufficiently flexible to accommodate any change in the relative contribution of examinations, and assessment.	Assessment application form, page 8	Workplace based assessment is overseen by the Medical Microbiology and Virology College Advisory Training Teams (CATTs) with overall governance by the Assessment Committee. This is chaired by the Director of Examinations and Assessment.	To clarify governance structure that was not in place when the assessment system was submitted.
9.	The information about the overall purpose of the assessment system will be available in the curriculum on the Royal College of Pathologists' website.	Assessment system application form, page 9	The information about the overall purpose of the assessment system is available in the curriculum on the Royal College of Pathologists' website.	As stated. See minor amendments to submitted curriculum (page 16). See box 41 (below).
10.	If the trainee fails their first attempt of the Year 1 Assessment, they will receive feedback from the Workplace-Based Assessment Department at the Royal College of Pathologists to discuss with	Assessment system application form, page 12	ST1 trainees will have two opportunities in any one year of training to attempt and achieve a successful outcome in the year 1 assessment. If they are unsuccessful it is up to their Deanery to consider, within the arrangements of the ARCP, the case for additional training. Trainees are unable to exit Stage A/ST1 of training and proceed to Stage B unless they have achieved a successful outcome in the year 1 assessment.	This removes the maximum number of attempts at the Year 1 Assessment and reflects the change to comply with the Gold Guide.

<p>their educational supervisor. They will also have the opportunity for a review of their progress with their educational supervisor. The outcome of this meeting will be a revised (if necessary) training plan and an agreement about the most appropriate time to attempt the second and final Year 1 Assessment opportunity.</p> <p>Following a second failed attempt at the Year 1 Assessment (for which feedback will be provided again), the trainee will be unable to progress in the specialty. It is expected that a RITA and ESR would take place where this was discussed with the panel but the outcome would be that the trainee would not progress to ST2. The trainee would be invited to seek career counselling from their deanery, with the support of their educational supervisor.</p>			
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11.	The College is in the process of producing a blueprint for the medical microbiology and virology assessment system.	Assessment system application form, page 13	The College has produced a blueprint for the medical microbiology and virology assessment system.	As stated: http://www.pmetb.org.uk/index.php?id=977 A revised blueprint is being submitted to reflect the change from MRCPATH to FRCPATH. See attached document.
12.	Trainees will not be able to progress to Year 2/Stage B of training if they have failed both attempts at the Medical microbiology and virology Year 1 Assessment.	Assessment system application form, page 15	Trainees will not be able to progress to Year 2/Stage B of training if they have failed to pass the Medical microbiology and virology Year 1 Assessment.	This removes the maximum number of attempts at the Year 1 Assessment and reflects the change to comply with the Gold Guide.
13.	Guidance and training on ePATH-SPRAT feedback has been provided in writing and in training sessions for histopathology educational supervisors. The same exercise will take place for medical microbiology and virology.	Assessment system application form, page 19	Guidance on ePATH-SPRAT feedback is provided for medical microbiology and virology educational supervisors.	As stated: http://www.rcpath.org/index.asp?PageID=1061
14.	Section 5f	Assessment system application form, page 24	The formal review of evidence is undertaken through the ARCP process as described in the Gold Guide. The College has released separate guidance on this which replaces that stated in 5f.	As stated: http://www.rcpath.org/index.asp?PageID=1546
15.	Section 5h	Assessment system application form, page 26	Section 7 of the Gold Guide outlines the appeals process over a decision on progress.	As stated – see section 7.118 – 7.152 in the Gold Guide: http://www.mmc.nhs.uk/Docs/A%20Guide%20to%20Postgraduate%20Specialty%20Training%20in%20the%20UK%20(Gold%20Guide).doc#_Appeals_of_a_nnuual

16.	<p>A complaints procedure for the Medical microbiology and virology Year 1 Assessment will be developed by the Workplace-Based Assessment Manager. There will be a separate appeals procedure, also the responsibility of the Workplace-Based Assessment Manager, available in the Regulations and Guidelines and held on the College website.</p> <p>The issue of complaints concerning workplace-based assessment requires further discussion at the College but it is likely that there will be a deanery role in this area.</p>	Assessment system application form, page 27	A complaints and appeals procedure for workplace-based assessment and the Year 1 Assessment has been published on the College website.	As stated: http://www.rcpath.org/resources/pdf/Complaints_and_appeals.pdf
17.	Illustrative diagrammatic representation of the RCPATH assessment system	Assessment system diagram, attached	See attached document (Appendix 1).	<p>To comply with educational appraisal and ARCP process as set out in the Gold Guide.</p> <p>Please note clarification of minimum number of satisfactory outcomes required by year (6). This was amended following educational advice that the tools could be validated with a minimum of 6 per year although more can be conducted if performance is in doubt.</p>
18.	Page numbers amended in contents page and throughout curriculum	Throughout curriculum	Page numbers updated as required	Where minor amendments and additions have been made to the curriculum, this has necessitated a change in some of the page numbering. All changes marked as track changes.

19.	Specialist training/ Specialist Registrar	Throughout curriculum	Specialty training/ Specialty Registrar	To comply with Gold Guide terminology. All changes marked as track changes.
20.	Medical Microbiology and Virology Year 1 Assessment	Throughout curriculum	Year 1 Medical Microbiology and Virology Assessment	To reflect formal name of the assessment. All changes marked as track changes.
21.	Terminology for healthcare professionals and their places of work	Throughout curriculum	Consultant in Communicable Diseases Control (CCDC) and Consultants in Health Protection (CHP) and Communicable Disease Surveillance Centre (CDSC) to Centre for Infections (Cfi).	Terminology updated to accurately reflect current terminology for healthcare professionals and their places of work
22.	Introduction	Curriculum, page 3	The curriculum complies with <ul style="list-style-type: none"> the Postgraduate Medical Education and Training Board's (PMETB) Standards for Curricula (March 2005) and the training framework described in A Guide to Postgraduate Specialty Training in the UK (commonly known as the Gold Guide). 	Principles of good medical education and training has been replaced with The Gold Guide which 'sets out the arrangements for the introduction of competence based specialty training in the UK'.
23.	Introduction	Curriculum, page 3	For trainees with an NTN or NTN(A) in an approved UK training programme, the curriculum is integrated with and supported by the following documents in order to produce a coordinated training package for the award of the CCT. The relevant package includes: <ul style="list-style-type: none"> a blueprint for the medical microbiology and virology assessment systems (This demonstrates how the College assessments and examinations test the structure of the medical microbiology and virology curriculum.) regulations and guidelines for workplace-based assessment, including multi-source feedback, and the Year 1 Medical Microbiology and Virology Assessment regulations and guidelines for the Fellowship examinations access to e-learning mapped to the medical microbiology and virology curriculum an online training portfolio (login required) Annual Review of Competence Progression 	More detail is provided about the co-ordinated training package. The training and learning record has been removed as this will be incorporated within the online training portfolio. Additional information is provided about the blueprint for the assessment system, regulations for the Year 1 assessment, workplace-based assessment and MSF and e-learning. E-learning is being introduced from Autumn 2008 in medical microbiology and virology (with assistance from E-learning for Health) to support the learning of ST1 trainees as part of a blended learning approach.

			(ARCP) guidance	
24.	Introduction	Curriculum, new addition to page 3	<p>Doctors applying for a CESR in medical microbiology and virology must be able to demonstrate equivalence to the requirements for the award of a medical microbiology and virology CCT. Such doctors are strongly advised to read PMETB's Guidance on applying for a CESR under Article 14. In addition, the following guidance is available from the College and should also be carefully followed in the preparation of a CESR application:</p> <ul style="list-style-type: none"> • General guidance on evidence to submit with applications for a CESR (Article 14) in Medical Microbiology or Medical Virology (specialty specific guidance) • Guidance for CESR applicants in specialties and subspecialties overseen by the Royal College of Pathologists • CESR curriculum vitae guidance 	An addition about the use of the curriculum in relation to CESR has been made to reiterate the importance of the curriculum for potential CESR applicants.
25.	Duration of training	Curriculum, page 4	<ul style="list-style-type: none"> • evidence of satisfactory completion of the <u>requirements of the medical microbiology or virology curriculum</u> (including workplace based assessments) and the minimum training period 	Corrects typographical error.
26.	Duration of training	Curriculum, new addition to page 4	<ul style="list-style-type: none"> • satisfactory outcomes in the requisite number of workplace-based assessments (including multi-source feedback) 	Reiterates requirement for completion of workplace-based assessment and MSF for the award of the CCT.
27.	Training regulations	Curriculum, new addition to page 5	<p>Training regulations</p> <p>This section of the curriculum outlines the training regulations for medical microbiology and virology. In line with PMETB, this reflects the regulation that only training that has been prospectively approved by PMETB can lead towards the award of the CCT. Training that has not been prospectively approved by PMETB can still be considered but the trainee's route of entry to the Specialist Register changes to CESR.</p>	New introductory paragraph to reiterate PMETB training regulations.
28.	Flexible training	Curriculum, page 5	<p>Flexible training</p> <p>'Flexible training' is the term used to describe doctors undertaking training on a less</p>	Clarification of PMETB regulations around flexible training since the curriculum was published.

			<p>than full-time basis, normally between five and eight sessions per week. The aim of flexible training is to provide opportunities for doctors in the NHS who are unable to work full time. Doctors can apply for flexible training if they can provide evidence that "training on a full-time basis would not be practicable for well-founded individual reasons".</p> <p>Flexible trainees must accept two important principles:</p> <ul style="list-style-type: none"> • part-time training shall meet the same requirements (in depth and breadth) as full-time training • the total duration and quality of part-time training of specialists must be not less than those of a full-time trainee. In other words, a part-time trainee will have to complete the minimum training time for their specialty <i>pro rata</i>. <p>PMETB guidance on approval of flexible training states that from 1 December 2007, "deaneries, in conjunction with Royal Colleges/Faculties, will take responsibility for ensuring that all flexible training of any kind is undertaken in prospectively approved posts and programmes and that it meets the statutory requirements of the General and Specialist Medical Practice (Education, Training and Qualifications) Order 2003". Prior to beginning their flexible training, trainees must inform the Training and Educational Standards Department at The Royal College of Pathologists in order that the Medical Microbiology or Virology College Advisory Training Team (CATT) can ensure that their flexible training programme will comply with the requirements of the CCT programme. The documentation towards a flexible training application will be collected and checked to ensure compliance and a revised provisional CCT date issued. Separate guidance and an application form are available on the College website for this purpose.</p>	
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29.	Research	Curriculum, page 6	<p>Research</p> <p>Some trainees may wish to spend a period of time in research after entering medical microbiology or virology training as out-of-programme research (OOPR).</p> <p>Research undertaken prior to entry to a medical microbiology or virology training programme</p> <p>Trainees who have undertaken a period of research that includes <i>clinical or laboratory work directly relevant to the medical microbiology or virology curriculum</i> prior to entering a medical microbiology or virology training programme can have this period recognised towards an entry on the Specialist Register. However, as the research is unlikely to have been prospectively approved by PMETB, their route of entry to the Specialist Register will be through the CESR.</p> <p>Research undertaken during entry to a medical microbiology or virology training programme</p> <p>Trainees who undertake a period of out-of-programme research (OOPR) after entering a medical microbiology or virology training programme and obtaining their National Training Number (NTN) can have up to one year accepted by the Medical Microbiology or Virology CATT towards their CCT. In order to be eligible to have this period of research recognised towards the award of the CCT, trainees must have their OOPR approved prospectively by PMETB before beginning their research. Prior to beginning the period of research, trainees must agree the OOPR with their deanery and inform the Training and Educational Standards Department at The Royal College of Pathologists in order that the Medical Microbiology or Virology CATT can ensure that the trainee will comply with the requirements of the CCT programme. The period of research must include clinical or</p>	Clarification of PMETB regulations around research.
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30.	Overseas training	Curriculum, page 7	<p>Overseas training undertaken prior to entry to a medical microbiology or virology training programme</p> <p>Some trainees may have undertaken a period of medical microbiology or virology training overseas prior to entering a medical microbiology and virology training programme in the UK. Such trainees must enter a medical microbiology or virology training programme at ST1. Trainees can have this period recognised towards an entry on the Specialist Register but their route of entry to the Specialist Register will be through the CESR.</p> <p>Overseas training undertaken during entry to a medical microbiology or virology training programme</p> <p>Some trainees may wish to spend a period of training overseas as out of programme training (OOPT) after entering a medical microbiology or virology training programme in the UK. In order to be eligible to have this period of training recognised towards the award of the CCT, trainees must have their OOPT overseas training approved</p>	Clarification of PMETB regulations around overseas training.

			<p>prospectively by PMETB before beginning their overseas training. Prior to beginning the period of overseas training, trainees must agree the OOPT with their deanery and inform the Training and Educational Standards Department at the Royal College of Pathologists that they will be undertaking overseas training in order that the Medical Microbiology or Virology CATT can ensure that the trainee will comply with the requirements of the CCT programme. The documentation towards a CCT recommendation will be collected by the Training and Educational Standards Department at the College, checked to ensure compliance and a revised provisional CCT date issued. It must be ensured that, following deanery agreement and acceptance from the Medical Microbiology or Virology CATT, PMETB prospectively approve the OOPT in order that the period can count towards a CCT. Separate guidance and an application form are available on the College website for this purpose.</p> <p>Trainees must have their OOPT agreed by the relevant Deanery, accepted by the Medical Microbiology or Virology CATT and approved by PMETB before beginning their overseas training.</p>	
31.	Purpose of the curriculum	Curriculum, page 8	In addition, the curriculum also sets the standards against which CESR applicants will be judged.	Reiterating use of curriculum for CESR as well as CCT.
32.	Curriculum development	Curriculum, page 9	The curriculum was <u>originally</u> developed by the Medical Microbiology and Virology CATTs	Addition of word 'originally'.
33.	Curriculum development	Curriculum, page 10	The curriculum was approved by PMETB on 12 April 2007 and formally published in May 2007. <u>It was republished in July 2008 to incorporate a series of minor amendments.</u>	Addition of re-publication date of curriculum incorporating minor amendments.

34.	Stage A	Curriculum, page 10	<p>In order to satisfactorily complete stage A of medical microbiology training, trainees must have:</p> <ul style="list-style-type: none"> • satisfactorily completed stage A of the medical microbiology and virology curriculum and a minimum training period of 12 months (whole-time equivalent) • <u>achieved satisfactory outcomes in the requisite number of medical microbiology or medical virology workplace-based assessments</u> • <u>undertaken a multi-source feedback assessment</u> 	Reiterates requirement for completion of workplace-based assessment and MSF for satisfactory completion of Stage A.
35.	Stage B	Curriculum, page 11	<p>In order to complete stage B of medical microbiology or virology training, trainees must have:</p> <ul style="list-style-type: none"> • satisfactorily completed a total of at least 24 months of training (whole-time equivalent) of which at least 12 months should be in Stage B • <u>achieved satisfactory outcomes in the requisite number of medical microbiology or medical virology workplace-based assessments</u> 	Reiterates requirement for completion of workplace-based assessment for satisfactory completion of Stage B.
36.	Stage C	Curriculum, page 11	<p>In order to complete stage C of medical microbiology <u>or virology</u> training, trainees must have:</p> <ul style="list-style-type: none"> • satisfactorily completed a total of at least 42 months of training (whole-time equivalent) of which at least 12 months should be in Stage C • <u>achieved satisfactory outcomes in the requisite number of medical microbiology or medical virology workplace-based assessments</u> 	Reiterates requirement for completion of workplace-based assessment for satisfactory completion of Stage C.
37.	Stage D	Curriculum, page 12	<p><u>Stage D of training is between month 43 and month 60 of whole-time equivalent training. This stage of the curriculum prepares the trainee for their consultant post. The ARCP undertaken at the end of Stage C should identify goals for the trainee to achieve during their final year of training.</u> The trainee has an in-depth knowledge and understanding of the principles of medical</p>	Re-ordering of paragraph to ensure clarity and compliance with Gold Guide terminology.

			<p>microbiology or virology. He/she should be competent to discuss and deal with the subject (or, where appropriate, perform the task/procedure), demonstrating a level of clinical or professional judgement commensurate with independent professional practice at consultant level. It is anticipated that a trainee at this level should have consultant input readily available at all times where required. By the end of Stage D, the trainee should be able to demonstrate a level of knowledge and skill indicating suitability for independent professional practice in medical microbiology or virology.</p>	
38.	Stage D	Curriculum, page 12	<p>In order to complete stage D of medical microbiology <u>or virology</u> training, trainees must have:</p> <ul style="list-style-type: none"> • satisfactorily completed a total of at least 60 months of training (whole-time equivalent) of which at least 12 months should be in Stage D • <u>achieved satisfactory outcomes in the requisite number of medical microbiology or medical virology workplace-based assessments</u> 	Reiterates requirement for completion of workplace-based assessment for satisfactory completion of Stage D.
39.	Stage D	Curriculum, new addition to page 12	<p>In addition to the above, trainees will also be required to undertake a universal pathology focussed MSF assessment in ST3 and ST5. Depending on the trainees' individual progress the ST3 MSF will normally take place in either Stages B or C. The ST5 MSF will normally take place in Stage D.</p>	Reiterates requirement for MSF to be undertaken at ST3 and ST5.
40.	Training programmes	Curriculum, page 12	<p>Training programmes will be quality assured by PMETB and training post and programmes will be approved by PMETB in conjunction with the relevant Postgraduate Deanery <u>and with input from the Royal College of Pathologists.</u></p>	Clarifies role of College in the quality assurance of training programmes.
41.	Content of learning	Curriculum, page 13	<p>The curriculum details the level of knowledge and skill that a trainee should acquire to provide a high quality service at consultant level in the National Health Service (NHS) and meet PMETB's Criteria for Entry to the Specialist Register.</p>	Removes reference to PMETB's Criteria for Entry to the Specialist Register. This is no longer available on the PMETB website.

42.	Purpose of assessment	Curriculum, new addition to page 16	<p>Purpose of assessment</p> <p>The Royal College of Pathologists' mission is to promote excellence in the practice of pathology and to be responsible for maintaining standards through training, assessments, examinations and professional development.</p> <p>The purpose of the Royal College of Pathologists' assessment system in medical microbiology and virology is to:</p> <ul style="list-style-type: none"> • indicate suitability of choice at an early stage of the chosen career path • indicate the capability and potential of a trainee through tests of applied knowledge and skill relevant to the specialty • demonstrate readiness to progress to the next stage(s) of training having met the required standard of the previous stage • provide feedback to the trainee about progress and learning needs • support trainees to progress at their own pace by measuring a trainee's capacity to achieve competencies for their chosen career path • help to identify trainees who should change direction or leave the specialty • drive learning demonstrated through the acquisition of knowledge and skill • enable the trainee to collect all necessary evidence for the ARCP • gain Fellowship of the Royal College of Pathologists • provide evidence for the award of the CCT • assure the public that the trainee is ready for unsupervised professional practice. <p>A blueprint of the medical microbiology and virology assessment system is available on the PMETB website.</p>	A reproduction of the purpose of the assessment system as submitted in assessment system application form last year. It was stated in the application form that the purpose of the assessment system would be inserted into the curriculum. See box 8 (above).
43.	Methods of assessment	Curriculum, page 16	Trainees will be assessed in a number of different ways during their training. Satisfactory completion of all assessments and examinations will be monitored as part of the ARCP process and will be one of the criteria upon which eligibility to progress will be judged. A pass	Reiterates and clarifies the assessment system for trainees following the curriculum.

			<p>in the Year 1 Medical Microbiology and Virology Assessment and the FRCPATH examination are required as part of the eligibility criteria for the award of the CCT.</p> <p>Year 1 Medical Microbiology and Virology Assessment</p> <p>Trainees must pass the Year 1 Medical Microbiology and Virology Assessment as one of the requirements for satisfactory completion of Stage A of training.</p> <p>Workplace-based assessment</p> <p>Trainees will be expected to undertake workplace-based assessment throughout the entire duration of their training in medical microbiology and virology.</p> <p>For medical microbiology, these will comprise:</p> <ul style="list-style-type: none"> • Case-based discussion (CbD) (minimum of 6 satisfactory outcomes required per year) • Directly observed practical skills (DOPS) (minimum of 6 satisfactory outcomes required per year) • Multi-source feedback (MSF) (minimum of 3 during training) <p>For medical virology, these will comprise:</p> <ul style="list-style-type: none"> • Case-based discussion (CbD) (minimum of 6 satisfactory outcomes required per year) • Directly observed practical skills (DOPS) (minimum of 6 satisfactory outcomes required per year) • Multi-source feedback (MSF) (minimum of 3 during training) <p>Further separate guidance is provided about the method and required frequencies of these assessments.</p> <p>FRCPATH examination</p> <p>The major assessments will occur during Stage B of training in the shape of the FRCPATH Part 1 examination and summatively towards the end of Stage C of training in the shape of the FRCPATH Part 2 examination.</p>	
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44.	Evidence of competence	Curriculum, page 17	<p>Annual Review of Competence Progression</p> <p>The ARCP is an annual opportunity for evidence gathered by a trainee, relating to the trainee's progress in the training programme, to document the competences that are being gained. Evidence of competence will be judged based on a portfolio of documentation, culminating in an Educational Supervisors Structured Report.</p> <p>Separate ARCP guidance and forms are available on the College website. A copy of all ARCP forms issued to the trainee must be provided to the Royal College of Pathologists prior to recommendation for the award of the CCT. Lack of progress, identified by the issue of an ARCP outcome 3 or 5 and necessitating repeat training to rectify deficiencies will lead to the extension of training. Training leading to the issue of an ARCP 3 or 5 and necessitating repeat training will not be recognised towards the award of the CCT.</p> <p>Evidence of ARCP outcome 6 is required as part of the evidence for the award of the CCT.</p>	To comply with ARCP process as set out in the Gold Guide. Refers to new College guidance on ARCP, issued since publication of the curriculum.
45.	Learning experiences	Curriculum, page 18	s. e-learning.	E-learning is being introduced from Autumn 2008 in medical microbiology and virology (with assistance from E-learning for Health) to support the learning of ST1 trainees as part of a blended learning approach.
46.	Supervision and feedback	Curriculum, page 19	Specialty training must be appropriately supervised <u>e.g.</u> by the senior medical and staff on a day-to-day basis under the direction of a designated educational supervisor and a Specialist Training Committee that links to the appropriate Postgraduate Deanery.	Addition of e.g. to indicate that other groups may be involved in supervision of various periods of training.
47.	Supervision and feedback	Curriculum, new addition to page 20	This should be read and implemented in conjunction with PMETB's Standards for trainers .	To acknowledge and support the new PMETB Standard's for trainers.

48.	Managing curriculum implementation	Curriculum, page 20	The curriculum outlines the minimum medical microbiology and virology training requirements for delivery in a regional training programme. It guides educational supervisors <u>as to what is</u> required to deliver the curriculum and trainees in the learning and assessment methods required for satisfactory completion of training.	Minor change to reflect broader guide for educational supervisors.
49.	Managing curriculum implementation	Curriculum, page 20	The educational supervisor must undertake regular educational appraisal with his/her trainee, at the beginning, middle and end of section of training, to ensure structured and goal-oriented delivery of training.	Change of guidance on appraisal to reflect the Gold Guide.
50.	Managing curriculum implementation	Curriculum, page 20	Trainees must register with The Royal College of Pathologists on appointment to ST1 of a medical microbiology or virology training programme. It is the trainee's responsibility to familiarise him/herself with the curriculum and assessment requirements both for the satisfactory completion of each stage of training and the award of the CCT. They must be familiar with all aspects of the assessment system; workplace based assessment including multi-source feedback, the Year 1 Medical Microbiology and Virology Assessment and the FRCPATH examination. It is the trainee's responsibility to ensure that they apply in good time for any assessments and examinations that demand an application. Trainees must also make appropriate use of the online training portfolio and e-learning.	Strengthening of statement of trainee responsibility during training.
51.	Acknowledgements	Curriculum, page 22	Dr Hugo Ludlam (immediate past Medical Microbiology CATT Chair), Dr Martin Gill (current Medical Microbiology CATT Chair), Professor Goura Kudesia (current Virology CATT Chair), Virology CATT, Professor Shelley Heard (current Director of Training and Educational Standards), Dr Hani Zakhour (immediate past Director of Training and Educational Standards), Joanne Brinklow (Head of Educational Standards).	Update of acknowledgement of contributions to curriculum development.
52.	Good clinical care (Patient medical or clinical history)	Curriculum, page 23	Skills and knowledge application Be able to overcome difficulties	Clarification of skills and applied knowledge.

			<u>of communication due to language, or associated with physical and mental impairment.</u>	
53.	Good clinical care (Examination)	Curriculum, page 24	<p>Skills and knowledge application</p> <p>Be able to perform a reliable and appropriate <u>clinical</u> examination.</p> <p>Attitudes</p> <p>Appreciate <u>situations where there is</u> the need for a chaperone.</p>	Clarification of skills and applied knowledge and attitudes.
54.	Good clinical care (Investigations including imaging)	Curriculum, page 24	<p>Skills and knowledge application</p> <p>Be able to initiate appropriate investigations</p> <p>Attitudes</p> <p><u>Be able</u> to provide explanations to patients as to rationale for investigations, and possible unwanted effects.</p>	Clarification of skills and applied knowledge and attitudes.
55.	Good clinical care (Management of chronic disease)	Curriculum, page 25	<p>Knowledge</p> <p>Define the clinical presentation and natural history of patients with chronic infections.</p>	Clarification of knowledge.
56.	Maintaining good medical practice (Lifelong learning)	Curriculum, page 27	<p>Skills and knowledge application</p> <p>Be able to gain information efficiently from a range of sources including paper-based, computer-based and audiovisual</p>	Clarification of skills and applied knowledge.
57.	Maintaining good medical practice (Clinical audit)	Curriculum, page 30	<p>Skills and knowledge application</p> <p>Replace 'complete at least one clinical audit project per year' with 'Demonstrate the ability to undertake clinical audit <u>normally by performing at least one clinical audit project per year.</u>'</p>	Since this is a competency based curriculum, the wording has been amended to reflect the competency to be achieved rather than the outcome required.
58.	Maintaining good medical practice (relevance of outside bodies)	Curriculum, page 32	<p>Knowledge</p> <p>Know of central government health regulatory agencies (e.g. National Institute for Health and Clinical Excellence [NICE], Healthcare Commission [HCC], NHS Quality Improvement Scotland, National Patient Safety Agency [NPSA]), <u>Health Protection Agency (HPA), Veterinary Laboratories Agency.</u></p>	Addition of knowledge of additional bodies.
59.	Maintaining good medical practice (media)	Curriculum, page 32	<p>Skills and knowledge application</p>	Clarification of skills and applied knowledge.

	awareness)		Recognise situations when it may be appropriate to implement such training and/or seek further advice from the Trust <u>or other relevant parties</u> e.g. <u>public health professionals</u> .	
60.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 43	By the end of this stage of training, the trainee should have reached a decision about the suitability <u>of medical microbiology or medical virology</u> as his or her career of choice.	Clarification of career choice.
61.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 44	have sufficient understanding of microbiology, <u>mycology</u> virology and parasitology to offer basic advice on the interpretation of laboratory results	Clarification of understanding of mycology.
62.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 44	Skills and knowledge application Basic understanding of human molecular biology	Clarification of skills and applied knowledge.
63.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 45	Skills and knowledge application Basic understanding of how the immune response protects against <u>infection, and how it may contribute</u> to pathogenesis of infectious diseases.	Clarification of skills and applied knowledge.
64.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 45	Skills and knowledge application Able to function <u>safely</u> in a laboratory.	Clarification of skills and applied knowledge.
65.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 45	Skills and knowledge application Understand the evidence base behind standard operating procedures (SOPs)/ <u>examination procedures (EPs)</u> and the importance of audit and quality control to establish validity.	Clarification of skills and applied knowledge.
66.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 45	Skills and knowledge application <ul style="list-style-type: none"> sample processing for <u>microbiology and virology</u> according to <u>SOPs/EPs</u>, includes <u>staining and initial sample preparation (microbiology)</u>, inoculation of tissue cultures (<u>virology</u>). 	Clarification of skills and applied knowledge.

67.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 46	<p>Skills and knowledge application</p> <p>Demonstration of competence in taking relevant clinical/infection history</p>	Clarification of skills and applied knowledge.
68.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 46	<p>Skills and knowledge application</p> <p>Eye infection</p>	Clarification of skills and applied knowledge.
69.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 46	<p>Skills and knowledge application</p> <p>congenital infection and infection acquired perinatally</p>	Clarification of skills and applied knowledge.
70.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 47	<p>Skills and knowledge application</p> <p>Classification of <u>antimicrobial</u> agents.</p> <p>Detailed understanding of the mechanism of action of aciclovir and beta-lactam <u>antibiotic</u> agents and mechanisms for development of resistance to these agents.</p> <p>Broad understanding of other <u>antimicrobial</u> agents, their uses and limitations.</p> <p>Understanding of the principles of prophylaxis, <u>both with antimicrobials and with immune globulins</u>.</p>	Clarification of skills and applied knowledge.
71.	Specialty specific medical microbiology and virology curriculum (Stage A)	Curriculum, page 47	<p>Skills and knowledge application</p> <p>Understand the principles and practice of surveillance and public health with particular regard to food-borne and vaccine-preventable <u>infections and STIs</u>.</p>	Clarification of skills and applied knowledge.
72.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 50	<p>Skills and knowledge application</p> <p>Have knowledge of the principles of nucleic acid based techniques including PCR (including real-time polymerase chain reaction [RT-PCR]), LCR (ligase chain reaction), NASBA (Nucleic Acid Sequence Based Amplification), <u>transcription-mediated amplification (TMA)</u>.</p>	Clarification of skills and applied knowledge.

			<u>Strand Displacement Assay (SDA) and nucleic acid sequencing.</u>	
73.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 50	Skills and knowledge application Understand the role of <u>typing</u> in incident/outbreak investigations.	Clarification of skills and applied knowledge.
74.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 50	Skills and knowledge application Understands regulations on transportation of samples	Clarification of skills and applied knowledge.
75.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 50	Skills and knowledge application <ul style="list-style-type: none"> • <u>external</u> quality control including National External Quality Assessment Service (NEQAS) schemes • <u>internal quality control and internal quality assurance</u> 	Clarification of skills and applied knowledge.
76.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 57	Skills and knowledge application Diagnosis and skills in , prevention and treatment.	Clarification of skills and applied knowledge.
77.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 58	Skills and knowledge application Understanding of methods of diagnosis – culture, serology, antigen detection, ELISA, PCR, LCR, <u>TMA</u> , <u>SDA</u>	Clarification of skills and applied knowledge.
78.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 59	Skills and knowledge application Recognition of the infections that can be transmitted from mother to baby during the antenatal, <u>perinatal</u> and postnatal period. Awareness of the role of <u>risk avoidance</u> , therapeutic interventions, immunisation and Caesarian section in the prevention of congenital infections.	Clarification of skills and applied knowledge.
79.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 61	Knowledge Knowledge of natural history of <u>cytomegalovirus</u> rubella,	Clarification of knowledge.

80.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 63	Knowledge Viral hepatitis Epstein Barr Virus (EBV) Hepatitis E Virus (HEV)	Clarification of knowledge.
81.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 64	Skills and knowledge application Competent to select <u>appropriate tests</u> and to <u>interact with reference laboratories in arranging specimen</u> transport and testing; interpret relevant virological tests. <u>Competent to select, perform and interpret relevant virological tests</u>	Clarification of skills and applied knowledge.
82.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 65	Knowledge Q Fever Zoster – in the normal and the <u>immunocompromised immunosuppressed</u>	Clarification of knowledge.
83.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 65	Knowledge Variant CJD	Clarification of knowledge.
84.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 65	Knowledge Viral infection of immunocompromised patients Human herpes virus 6 (HHV-6)	Clarification of knowledge.
85.	Specialty specific medical microbiology curriculum (stages B – D)	Curriculum, page 67	Skills and knowledge application <u>Be aware of the potential for abuse of laboratory organisms for bioterrorism and the current relevant legislative framework, including the Prevention of Terrorism Act 2004.</u> Recognition of abnormal patterns of infection. Ability to deal with the unexpected. Able to liaise with others to initiate a clinical and managerial response and institute remediation, <u>including defining, establishing and maintaining the appropriate levels of laboratory security to ensure due diligence in the prevention of criminal misuse of organisms.</u> Attitudes <u>Seek expert help when</u>	Clarification of skills and applied knowledge and attitudes.

			<u>necessary.</u> Attitudes towards laboratory security should be in accord with the principles of Good Medical Practice.	
86.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 73	Skills and knowledge application Describe the ways in which <u>virus genetic material is organised</u>	Clarification of skills and applied knowledge.
87.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 76	Knowledge Immunoglobulins Skills and knowledge application Be aware of the nature of different types of vaccines <u>and immunoglobulins available</u> for both prophylactic and therapeutic use.	Clarification of knowledge, skills and applied knowledge.
88.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 78	Skills and knowledge application Ability to use SOPs/ <u>EPs</u> .	Clarification of skills and applied knowledge.
89.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 79	Skills and knowledge application <ul style="list-style-type: none"> • Be able to <u>identify by</u> cell culture, <u>electron microscopy</u>, molecular techniques and rapid virus detection , <u>viruses commonly seen in the UK</u>. • Able to perform molecular amplification techniques (including <u>nucleic acid sequencing</u>) in current use and critically review results. 	Clarification of skills and applied knowledge.
90.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 81	...it is expected that (60) 50-80% of the trainee time will be spent on service commitments.	Clarification of service commitment.
91.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 81	Objectives <ul style="list-style-type: none"> • infections including (<i>Toxoplasma gondii</i> and <i>Pneumocystis jiroveci</i>) in immunocompromised patients (solid organ transplant recipients, bone marrow <u>transplant recipients</u>, HIV, congenital immunodeficiencies) • fetal infections and 	Clarification of objectives

			infections in pregnant women including <u>toxoplasmosis</u>	
92.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 82	To obtain in-depth knowledge and attitudes to enable the trainee (by completion of training) to advise independently without the normal (working day) access to laboratory results or the support from the laboratory or colleagues (both BMS and clinical). Stage A and B complexity: Low (limited experience of Out of Hours work) ; Stage B and C complexity : Average (experience under close consultant supervision); Stage C and D Complexity: High (demanding and complex clinical problems, by stage D should be able to advise independently with distant consultant supervision)	Clarification of out-of-hours competencies for virology trainees (see also, page 87).
93.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 95	Agents of bioterrorism (see box 84 – same insertion)	Clarification of skills and applied knowledge and attitudes.
94.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 100	Supraregional attachment/ <u>Reference Laboratory</u> Knowledge <u>Understanding how a reference laboratory works</u> Laboratories offering testing <u>UK National Birmingham</u> Anti-viral Reference Unit, Manchester Royal Infirmary <u>HIV, HBV, CMV.</u>	Clarification of attachment to reference laboratories and knowledge of reference laboratories.
95.	Specialty specific medical virology curriculum (stages B – D)	Curriculum, page 105	<u>Knowledge of the relevance of assaying levels of antimicrobial agents in ensuring safe levels and effective levels</u>	Clarification of knowledge


[* please stipulate whether this refers to the curriculum or the assessment system]

Section 3. Details of proposed changes for the forthcoming period

Please use this section to inform PMETB of any changes proposed for the forthcoming reporting period as far as the college/faculty is aware.

Proposed changes	Page reference in original document*	Proposed new wording	Rationale for changes proposed
The Evaluation of Clinical Events (ECE) tool will be added to the suite of workplace-based assessment tools for medical microbiology for ST3 - 5.	Assessment system, page 3	<ul style="list-style-type: none"> Evaluation of Clinical Events (ECE) ECE is a new tool. It provides a method of assessing the trainee in the performance of their duties in complex tasks often involving team working or interacting with other professional staff. Examples include presentation of a case at a multi-disciplinary team meeting, with the infection control team or conducting a parenteral nutrition ward round. 	The ECE will be used in the context of assessing safe and correct use of procedures in the laboratory and in connection with the clinical work of the laboratory. The ECE is more suited to assessing this aspect of training than any other tool currently provided in the suite of available assessment tools. It will be implemented from ST3 onwards to ensure maintenance of laboratory skills during the later stages of training.
<ul style="list-style-type: none"> Multi source feedback (MSF) The College is using ePATH-SPRAT, a variant of the SPRAT tool which was developed for paediatric trainees, to deliver this assessment. 	Assessment system, page 3	The College is currently considering the provider of MSF for 2008 onwards.	Current provider (HcAT) are unlikely to continue to provide the ePATH-SPRAT and a new provider is being considered.

[* please stipulate whether this refers to the curriculum or the assessment system]

Section 4. Declaration	
<p>I confirm that the information given on this annual college summary form is correct and I understand that failure to disclose relevant information may result in the curriculum and/or assessment system no longer being approved.</p>	
Signature: 	Date: 11 July 2008
Position held: Head of Educational Standards	

This form must be submitted electronically to: curriculum.eval@pmetb.org.uk

And in hard copy (1 copy) to: Curriculum & Evaluation, Postgraduate Medical Education & Training Board
Hercules House, Hercules Road, London, SE1 7DU