

**Endocrinology and Diabetes ARCP Decision Aid – minimal standards for ARCP (satisfactory progress) outcome**

**Core Medical Training**

|  | <b>RITA Month 8</b>   | <b>RITA Month 16</b>   | <b>RITA Month 23</b>  |
|--|---|--|---|
| <b>Emergency Presentations</b>                 | Some experience of all  | Level 1 competent in all   | Level 1 competent in all  |
| <b>Top 20 Presentations</b>                    | Some experience of 1/2<br>(mini-CEX / CbD / ACAT evidence)  | Level 1 competent in 1/2<br>(mini-CEX / CbD / ACAT evidence)<br>Some experience of all   | Level 1 competent in all<br>(mini-CEX / CbD / ACAT evidence)  |
| <b>Other Presentations</b>                     | Level 1 competent in 1/2 relevant to specialties experienced so far<br>(mini-CEX / CbD / ACAT evidence)   | Level 1 competent in 1/2 relevant to specialties experienced so far<br>(mini-CEX / CbD / ACAT evidence)                                    | Level 1 Competent in all relevant to specialties experienced so far<br>(mini-CEX / CbD / ACAT evidence)   |
| <b>Procedures</b>                              | Competent in all procedures relevant to specialties experienced so far<br>(DOPS evidence)   | Competent in all procedures relevant to specialties experienced so far<br><b>and</b> Competent in 1/2 of all procedures<br>(DOPS evidence) | Competent in all procedures<br>(DOPS evidence)  |
| <b>Generic Competencies (Focus areas)</b>      | Some experience of 1/2 of Mandatory Level 1 Competency Focus Areas<br>(mini-CEX / CbD / ACAT evidence)  | Some experience of all Level 1 areas<br>Level 1 competent in 1/2<br>(mini-CEX / CbD / ACAT evidence)                                       | Level 1 competent in all<br>Level 1 Competency Focus areas<br>Some experience of 1/2 of<br>Level 2 Competency Focus areas<br>(mini-CEX / CbD / ACAT evidence)<br>Satisfactory progress in MSF |
| <b>Examinations</b>                            | -   | Review MRCP (UK) Part I progress   | MRCP (UK) Part I  |
| <b>ALS</b>                                     | Valid   | Valid  | Valid   |
| <b>Minimum number of workplace assessments</b> | Minimum of 3 ACATs should be done per year (aiming for 6 per year) + min of 4 mini-CEX per year<br>+ min of 4 CbD per year + DOPS until independence in procedures demonstrated + 1 MSF per year  |  |   |
| <b>Events giving concern</b>                   | The following events occurring at any time may trigger review of trainee's progress and possible remedial training: issues of professional behaviour; poor performance in work-place based assessments; poor MSF performance; issues arising from supervisor report; issues of patient safety |  |   |

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**Endocrinology and Diabetes Specialist Training**

|  | <b>ST3</b>   | <b>ST4</b>   | <b>ST5</b>  | <b>ST6</b>  | <b>ST7</b>   |
|--|--|--|---|---|--|
| <b>Examinations</b>                        | MRCP(UK) Diploma   |  |   | Specialist Exam   |  |
| <b>ALS Certificate</b>                     | Valid  | Valid  | Valid   | Valid   | Valid  |
| <b>Mini-CEX</b>                            | 2 minimum.<br>Covering more general areas of Endocrinology and Diabetes Mellitus   | 4 minimum.<br>Demonstrating increasing experience in sub-specialty areas | 4 minimum.<br>Demonstrating increasing experience in sub-specialty areas  | 4 minimum.<br>See note a.   | As necessary to cover any deficiencies identified at PYA |
| <b>MSF</b>                                 | Satisfactory   |  |   | Satisfactory  |  |
| <b>CBD</b>                                 | 2 minimum.<br>Covering more general areas of Endocrinology and Diabetes Mellitus   | 2 minimum.<br>Demonstrating increasing experience in sub-specialty areas | 2 minimum.<br>Demonstrating increasing experience in sub-specialty areas  | 2 minimum.<br>See note a.   | As necessary to cover any deficiencies identified at PYA |
| <b>Attendance</b>                          | Attended either annual DUK or BES meeting during previous year.  | Attended a specialist training course - see note b.                      | Attended a specialist training course - see note b.<br>By this stage, attended both an annual DUK and BES meeting | Attended an appropriate meeting – see note c.<br>By this stage, attended specialist training courses in both Endocrinology and Diabetes Mellitus. |  |
| <b>Supervisor’s Report</b>                 | Satisfactory   | Satisfactory   | Satisfactory  | Satisfactory  | Satisfactory   |
| <b>GIM (Acute) Emergency Presentations</b> | Level 2 competent by ST3 RITA (mini-CEX / Cbd / ACAT evidence)   |  |   |   |  |
| <b>GIM (Acute) Top 20 Presentations</b>    | Acquisition of Level 2 Competencies at rate proportional to years that include GIM (Acute) training, and competent in ALL by the RITA in the final year that has included GIM (Acute) training (mini-CEX / CBD / ACAT evidence)  |  |   |   |  |
| <b>GIM (Acute) Other Presentations</b>     | Acquisition of Level 2 Competencies at rate proportional to years that include GIM (Acute)* training, and competent in ALL by the RITA in the final year that has included GIM (Acute) training (mini-CEX / CBD / ACAT evidence) |  |   |   |  |
| <b>Generic Competencies (Focus areas)</b>  | Competent in number of Level 2 Focus Areas proportional to total time of training from ST3 to CCT, and competent in ALL Level 2 Focus Areas by final year RITA (mini-CEX / Cbd / PS evidence)                                    |  |   |   |  |

**Notes:**

- a) By this stage, most sub-specialty areas should have been covered, with evidence demonstrated of competence across the majority of common areas of practice in both Endocrinology and Diabetes Mellitus.
- b) Attended a specialist training course in Endocrinology or Diabetes Mellitus, run by one of the Royal Colleges of Physicians or Specialist Societies
- c) Attended either annual DUK or BES meeting (or alternatively a major international Endocrinology or Diabetes Mellitus meeting) during previous year.