

**JOINT ROYAL COLLEGES OF PHYSICIANS TRAINING BOARD  
(JRCPTB)**

**Annual Specialty Report for Stroke Medicine to  
The Postgraduate Medical Training Board (PMETB)  
for August 2007 to July 2008**

**1. Establishing Schools**

Stroke Medicine is a sub-specialty until now with 6 parent specialties, although the majority of trainees are from Geriatrics. The number of funded and approved programmes is limited and there may only be 1 or 2 trainees in each region.

**2. Triggered Visits**

No, and we have had no negative feedback from trainees during Subspecialty Year Assessment (SYA)

**3. Effect of changes to the specialty**

The current emphasis is on service development to improve access to 24/7 Thrombolysis, immediate admission to acute stroke units for appropriate diagnostic assessment and early management strategies. This together with rapid access, early assessment of Transient Ischaemic Attacks and minor strokes to reduce the risk of further cerebrovascular events will require teams of specialists with appropriate training who can contribute to 24/7 cover.

**4. Key concerns for the future of the specialty**

The current emphasis on acute care needs to be balanced by the needs of patients who require specialist stroke rehabilitation both as in-patients and post-discharge and this too needs to be addressed by appropriate training. Thus the overall number of specialist clinical sessions required to support a comprehensive Geriatric Service will be increased and number of training programmes approximately increased to match demand.

**5. RITAs/ARCPs.** The following includes the responses we have received from the Heads of Specialist Training for this specialty

No specific information available for this specialty though there appear to be no concerns

**6. European Working Time Directive (EWTd):** The following includes the responses we have received from the Heads of Specialist Training for this specialty

No information available for this specialty though there appear to be no concerns

**7. Training Programme Director Report information**

We have not received these reports for every Deanery for this reporting period but

intend to include the themes in subsequent reports.

### **8. Examinations**

We do not have examination data available for this reporting period.

### **9. Assessments**

Workplace based assessments for the medical specialties including Direct Observation of Procedural Skills (DOPs), mini CEX, and Multisource Feedback (MSF) have been in place since 2005. Although there have been concerns within each specialty with regard to the time involved to complete these, their use has been widely encouraged so that PMETB standards are met. We continue to pilots further workplace based assessments.

### **10. e-portfolio**

Pilots for the specialty e-portfolios have been completed and will be available from April 2009. In the meantime, trainees have been advised to complete paper records or to continue to use their CMT e-portfolio.