

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 | Joint Royal Colleges of Physicians Training Board |
| Specialty | Metabolic Medicine |
| Sub-specialty | |
| Contact details for the person responsible for submitting this form to PMETB | |
| Name | Professor W Burr |
| Address | 5 St Andrews Place Regent's Park London NW1 4LB |
| Job Title/Role | Medical Director |
| Telephone number | 0207 935 1174 |
| Mobile number | |
| Email | |

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 reference | Minor changes made | Page reference in original document* | Proposed new wording | Rationale for changes made |
|---------------|--|---|----------------------|--|
| 1. | Delete text: For SpRs, the regulations governing flexible training are outlined in section 6 of A Guide to Specialist Registrar Training (1998). Trainees must have their flexible training approved by the JRCPTB (for AM) or RCPATH (for CP) before beginning their flexible training. | Curriculum page 5, penultimate and ultimate sentence under the flexible training heading which starts on page 4 | | The Orange Book has been replaced by the Gold Guide. |

| | | | | |
|----|---|---|---|--|
| 2. | Insert text | Page 7, Supervision and Feedback, 2 nd paragraph, after 2 nd sentence | Make new 3 rd sentence: "DOPs and CBD must be performed as contained in the assessment blueprint". | Reinforcing the assessment strategy and linking this to the curriculum. |
| 3. | Delete word 'limit' | Page 21, 6B, Level 2 | Change to 'limb' | Typographical error |
| 4. | Delete RITA | All document | Insert 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). |
| 5. | Change of name of College examination – Membership of the Royal College of Pathologists (MRCPATH) or Member | Throughout curriculum, assessment system application form and blueprint. | 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. |

[* 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. | | | | |
|--|------------------|--------------------------------------|----------------------|--------------------------------|
| Box reference | Proposed changes | Page reference in original document* | Proposed new wording | Rationale for changes proposed |
| 6. | | | | |
| 7. | | | | |
| 8. | | | | |
| 9. | | | | |
| 10. | | | | |

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

Section 4. Declaration

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.

Signature:



Date:

21 August 2008

Position held: Medical Director

Signature:



Date:

22 August 2008

Position held: Joanne Brinklow, Head of Educational Standards, RCPATH

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