Guidance for schools of medicine on Internal Medicine stage 1 programme preferences

This document provides guidance to schools of medicine and trainees regarding details of Internal Medicine Training (IMT) Stage 1 programmes, including guidance on internal medicine year three (IMY3) preferencing and selection to IMY3 posts.

Programme details for trainees

All schools will supply information about their IMT programmes from which trainees can choose. The following information will be available when preferencing opens:

- Full rotation information for the first two years of the programme, including the hospital, specialty information and duration of each post
- An indication of where IMY3 will be based geographically

Some regions are already providing more detail on the IMY3 rotations on offer; this information will be available for all programmes by the time that trainees are asked to make a decision about continuing into IMY3. Group 2 specialties will require trainees to have completed the first two years of IMT (or equivalent) and passed all parts of the MRCP Diploma before the specialty post can be commenced.

Internal Medicine year 3 (IMY3)

There is some variation across the UK as to the structure of IMY3 posts. Our guidance is that the year should consist of two six month posts to include Acute Medicine/continuing GIM on-call. The curriculum mandates that posts in IMY3 are a minimum of six months’ duration.

How will IMY3 allocations be made?

Each school will manage a locally-run process for allocating rotations for IMY3.

1. The training programme director (TPD) for Internal Medicine will hold interim reviews in IMY2 to gauge the trainee’s (non-binding) intentions for plans to undertake IMY3.
2. Within each geographic region indicated for IMY3, the TPD and workforce team will request preferences for the available rotations from all trainees considering a progression into IMY3. Submission of preferences should include a short statement as to why the trainee has chosen the specialty or specialties. In writing the statement the trainee should be made aware that the specialty undertaken in IMY3 will not be taken into consideration in the selection process for ST4 higher specialty training and the person specification for higher specialty posts will also make this clear.
3. Trainees can use IMY3 as an opportunity to undertake a specialty complementary to any chosen career path.
4. Rotations for IMY1 and IMY2 should not include any repeat of specialty. In some programmes it may be possible to select an IMY3 rotation that includes a specialty already covered in IMY1 or IMY2; it will not be possible to stay in the same specialty for both IMY3 posts.
5. When finalising allocations, the TPD/s will take into account the learning needs of the trainee and the service provision requirements across the region.
6. The allocation of IMY3 posts will try to ensure that as many trainees as possible get their first choices.
7. Where possible the allocated IMY3 post will be in the same site as either the IMY1 or IMY2 rotation.
8. Trainees will have 10 working days to appeal the decision of the TPD. Appeals should be submitted to the Head of School; trainees should receive a response by email within 10 working days.
Decision-making regarding allocation into IMY3 posts, where highly competitive, may include the following consideration of trainee performance within the programme:

- ARCP outcome at end of IMY1
- Progress in the MRCP Diploma
- Completion of a quality improvement project
- The reasons stated in the trainee’s personal statement
- Recruitment score on entry to the programme

**Important points to note:**

Changes in the number of trainees in the programme and service pressures mean that it is not possible to absolutely guarantee that advertised rotations and processes will not change. All regions will make efforts to ensure that any changes are minimised and managed as fairly as possible.

**Acute Care Common Stem (ACCS) acute medicine**

Trainees undertaking an ACCS acute medicine training programme who wish to apply to a group 1 specialty from 2022 will be required to complete IMY3. They will be offered a stand-alone IMY3 within the same region as their ACCS programme. The process for allocating rotations will be managed locally by each region. Transition guidance will be provided by the JRCPTB.

**Less than full time (LTFT) trainees / gaps in training / deferrals**

Some trainees are working less than full time (LTFT) and will not be ready to progress into IMY3 at the same rate as other colleagues; other trainees may have chosen to defer their entry into IMY3 or had a gap in training. Each region is aware of these issues and will seek to work with trainees within the programme, to allow them to have an equal chance to select suitable rotations in IMY3. The JRCPTB will provide guidance to support this process.

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