# Implementation of the 2015 Immunology curriculum

Following a detailed review of the 2010 curriculum and development by the SAC, the new 2015 curriculum was approved by the GMC in November 2015.

This document provides details of the new and amended content and guidance on the implementation for new and current trainees.

## Transition to the new curriculum

The GMC require all trainees to be working to the current curriculum (please see <u>GMC position statement</u> and <u>JRCPTB</u> guidance). A two year transition period is allowed for new curricula, so trainees whose CCT date is beyond December 2017 will be required to transfer to the 2015 curriculum before this date.

The following general principles apply:

- Trainees who started in training in August 2015 will use the 2015 curriculum with immediate effect.
- Trainees who are in their final year of training should remain on the 2010 curriculum and are not required to transfer to the new curriculum.
- Trainees who are not in their final year of training but will CCT by December 2017 may choose whether to transfer or remain on the 2010 curriculum.
- Trainees remaining on the 2010 curriculum will continue to use the Laboratory Training Manual and Record for Specialty Registrars in Immunology.
- Those transferring to the 2015 curriculum should use the ePortfolio to record laboratory immunology from January 2016 (please see below).
- Trainees are responsible for ensuring they transfer to the new curriculum if appropriate and are advised to discuss their transition to the new curriculum with their educational supervisor as early as possible. Trainee's progress will be reviewed by the ARCP process.

## Laboratory immunology competencies

Competency grades and formative assessments for laboratory immunology have been revised in the new curriculum.

From January 2016, trainees following the 2015 curriculum will be able to record evidence and ratings for laboratory competencies in the ePortfolio, as for other curriculum content. Trainees remaining on the 2010 curriculum will continue to use the Laboratory Training Manual and record for Specialty Registrars in Immunology.

Trainees who have been using the laboratory training manual and are transferring to the new curriculum should scan and upload a copy of the manual to their personal library on the ePortfolio. They should discuss what they have covered to date with their educational supervisor (ES) and map it to the 2015 curriculum, referring to the grid below to convert levels of competency.

Laboratory manual (2010 curriculum)	Laboratory competencies (2015 curriculum)
1	1
2	2
3	
4	3

## Summary of new and changed content in the 2015 curriculum

## Change to structure

The 2015 curriculum follows the same spiral structure as the 2010 curriculum and the summative assessments remain the FRCPath Parts 1 and 2.

The following three key changes have been made:

#### 1. Integration of laboratory competencies and single grading of competencies

The laboratory competencies previously contained in the laboratory manual have been integrated into the curriculum and to improve clarity, a single grading of competencies is now used across all domains.

#### 2. Specified competency grades within each section

Trainees were concerned that the 2010 curriculum did not specify what level of competency was required for items within a section. To improve clarity, the new curriculum identifies what level of competence is required for specific items within each section. For example, in the Auto Immunity and Vasculitis section, a trainee is required to have level 3 competence (autonomous practice) in the ability to liaise and refer when auto immunity arises in allergic or immune deficient patients. On the other hand, the trainee would only be expected to have level 2 competence (ability to recognise, understand and critically discuss the principles of treatment) for any given auto immune disease.

Trainees are no longer required to achieve level 3 competences in Fundamental Immunology, as this would indicate autonomous practice.

#### 3. New sections containing existing items

To improve clarity two new sections have been created, containing items moved out of crowded existing sections. These are Therapeutics (3.4) and Lymphoid malignancy and secondary Immune-deficiency & transplant (3.5) – please see details below.







## **Changes to content**

1. Primary Immunodeficiency Diseases (3.2)

Corresponds to content of section 3.2 in 2010 curriculum. Added:

• How to provide support for families affected by genetic conditions. This was introduced at the request of the patient group consulted during curriculum review.

## 2. Therapeutics (3.4)

New section. The majority of content items were present in other parts of the 2010 curriculum. Added:

- Principles of gene therapy for PID
- Toxicities of recombinant proteins including cytokines, cytokine antagonists, ligand antagonists and monoclonal antibodies

#### 3. Lymphoid malignancy, secondary immunodeficiency and transplant (3.5)

New section bringing together content from the 2010 curriculum and made more explicit.

## 4. Allergic Disease (3.6)

Added:

- Recognises and ensures patients enter the appropriate pathways for the following non allergic illnesses: Contact dermatitis, Chronic idiopathic urticaria, Coeliac, Lactose intolerance, IBD, patients who have had "alternative" allergy tests but do not have allergic symptoms, ACE inhibitor reactions, Hypersensitivity pneumonitis, Non allergic causes of raised IgE and Chronic fatigue syndrome
- Understands the evidence for, the role of & limitations of specialist allergy tests including component resolved diagnosis and basophil activation.

## 5. Laboratory Immunology (3.7)

Removed:

- Items on water purification, balances, cryostats and spectroscopes- these are considered too technical
- Obsolete methods have also been removed: double diffusion, fungal antibodies, CRP and B2 microglobulin PAGE, W Blot, 2 D electrophoresis and chromatography Added:
- Immunocap
- Free light chains (serum and urine) testing

## **Change in documentation**

European Society for Immunodeficiencies – An introduction to the Diagnostic Criteria for PID (via <u>this link</u>). Previously there was a list of specific diseases. However, in this very rapidly changing area trainers and trainees agree that citing a web based resource is a better way of being inclusive of developments rather than listing every item.





### Generic changes to the curriculum

Sections on Good Medical Practice and Equality and Diversity have been updated in line with changes to versions and legislation.

The multiple consultant report has been added to assessment section and ARCP decision aid (the MCR is already a mandatory requirement for trainees).

## Summary of competency levels for curriculum content

#### 2010 curriculum

Curriculum topic	ST3	ST4	ST5	ST6	ST7
Fundamental Immunology	Level 1	Level 2	Level 2	Level 2	Level 3
	competent	competent	competent	competent	competent
Laboratory Immunology	Level 1	Level 2	Level 2	Level 2	Level 3
	competent	competent	competent	competent	competent
Primary immunodeficiency	Level 1	Level 2	Level 2	Level 2	Level 3
	competent	competent	competent	competent	competent
Allergy	Level 1	Level 2	Level 2	Level 2	Level 3
	competent	competent	competent	competent	competent
Autoimmune disease & systemic	Level 1	Level 2	Level 2	Level 2	Level 3
vasculitides	competent	competent	competent	competent	competent
Acquisition of common	20%	40%	60%	80%	100%
competencies					

#### 2015 curriculum

Curriculum topic	ST3	ST4	ST5	ST6	ST7
Fundamental	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 2
Immunology	competencies	competencies	competencies	competencies	competencies
Laboratory Immunology	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 3
	competencies	competencies	competencies	competencies	competencies
Primary	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 3
immunodeficiency	competencies	competencies	competencies	competencies	competencies
Allergy	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 3
	competencies	competencies	competencies	competencies	competencies
Autoimmune disease &	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 3
systemic vasculitides	competencies	competencies	competencies	competencies	competencies
Therapeutics	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 3
	competencies	competencies	competencies	competencies	competencies
Lymphoid malignancy,	Achieved level 1	Achieved level 2	Achieved level 2	Achieved level 2	Achieved level 3
secondary immune-	competencies	competencies	competencies	competencies	competencies
deficiency & transplant					
Acquisition of common	20%	40%	60%	80%	100%
competencies					



