



Infection Training Working Group: Updated position statement September 2014

INTRODUCTION

Following consultation with stakeholders a decision was made to align more closely training in the various infection disciplines: Infectious Diseases (ID), Tropical Medicine (TM), Medical Microbiology (MM) and Medical Virology (MV). The Joint Royal Colleges of Physicians Training Board (JRCPTB) and Royal College of Pathologists (RCPath) have been working together to take this forward. This work has included the establishment of an overseeing Infection Training Working Group (ITWG) with membership from JRCPTB, RCPath, Lead Dean and Trainees; establishment of sub-groups with focus on curricula, assessment and examinations, and deliverability, regular liaison with the GMC, and consultation and communication with other stakeholders.

The four curricula and details of their assessment systems (incorporating the Combined Infection Training) were submitted to the GMC for approval in August 2013. Further to clarification of a few points raised by the GMC, approval was confirmed by them on 6 May 2014. The proposal agreed by the GMC was based on the following:

- 6-7 years of post-Foundation training
 - Core Medical Training (CMT) (2 years) followed by
 - Competitive entry at ST3 into
 - Combined Infection Training (CIT) (2 years) to include
 - 6 months of clinical inpatient care of patients with infection under the clinical supervision of an ID consultant (as part of CIT)
 - All trainees undertake FRCPATH Part 1 (identical certificate/diploma in infection for ID/TM) during CIT and must have completed it to progress into ST6 (question database developed with MM, MV, ID expertise)
 - Higher Specialty Training (2 years) – CCT in ID, TM, MM or MV
 - MM/MV trainees only undertake FRCPATH Part 2
 - Opportunity for dual CCT in ID/TM with GIM or ID/TM with MM/MV with an additional year
- Trainee intake from August 2015

In approving the curricula the GMC made the following caveats:

- Although the combined infection training programme is not a standalone curriculum (given that the curricula are run-through) like core medical or core surgical training, the approval has been given on that basis to enable future changes to be submitted once for all four curricula. Amendments to the post CIT elements of each curriculum will need to be submitted as separate changes.
- The standard setting methodology to be utilised for the FRCPATH Part 2 examination has not yet been finalised. The Royal College of Pathologists will need to apply for separate approval of the Part 2 examination once it has been finalised.
- The Colleges will be required to report to the GMC, through their Annual Specialty Reports (a single report on this element submitted by one College), an update on the deliverability of the new CIT programme. If there are any major concerns over deliverability, the GMC would expect to be notified as soon as possible.

- The Royal College of Pathologists will be required to submit a revised / updated policy regarding Equality and Diversity within the next six months.
- The role of patient and lay input into the curriculum and assessment process requires further consideration.

The final versions of each of the curricula have been sent to the GMC and are now available on the respective College websites:

[Medical microbiology and medical virology](#)
[Infectious diseases and tropical medicine](#)

In addition, the RCPATH have revised the existing 2010 medical microbiology and medical virology curricula for trainees who will not be able to transfer to the approved 2014 curricula. The revised 2010 curricula have been brought into line as much as possible with the 2014 curricula (which include CIT). They have been submitted to the General Medical Council for approval and the GMC has asked for further information. A final decision is expected in October 2014.

NEXT STEPS

There is still much work to be done before the new programmes go live in August 2015. The following section provides a brief overview of the work that is currently taking place and gives an indication of what can be expected over the coming months. Please note that this is not fully inclusive of the scope of work being undertaken and we will endeavour to ensure more regular updates throughout the coming year as plans for the full implementation of CIT emerge.

Proposed Joint Infection Specialist Advisory Committee (SAC)

The Infection Training Working Group has developed a proposed constitution and terms of reference for a joint Infection Specialist Advisory Committee to oversee CIT. This will replace the Infection Training Working Group who will meet one further time before handing over to the Joint Infection SAC. Work is currently underway to gain approval for the establishment of the new SAC.

Approval of training programmes

An application form for the approval of CIT has now been developed and approved by the Infection Training Working Group and is available on the [RCPATH](#) and [JRCPTB](#) websites. All LETBs/deaneries must apply for approval of CIT, even if they already hold approval for specialty training programmes in infectious diseases, medical microbiology, medical virology and tropical medicine.

Locations with existing approval for infectious diseases, medical microbiology, medical virology and tropical medicine will continue to have approval for Higher Specialty Training (HST). Locations which do not already have GMC approval for the respective HST specialties must submit GMC Forms A and B in addition to this form.

Application forms for the approval of CIT and any forms for the approval of new infectious diseases and tropical medicine HST programmes must be submitted to qualitymanagement@jrcptb.org.uk by **Friday 28 November 2014**. All applications for approval of new CIT programmes will be scrutinised by assessed by the Joint Royal Colleges of Physicians Training Board (JRCPTB) and Royal College of Pathologists (RCPATH).

For LETBs/deaneries that require assistance with the development of their CIT programmes or completion of their application forms, 'virtual surgeries' via tele- or video conference may be able to be arranged with relevant members of the Infection Training Working Group. LETBs/deaneries requiring assistance should email Jenny Maddocks (jenny.maddocks@rcpath.org) with their queries. It would be helpful if any queries could be as specific as possible in the first instance.

Recruitment

Recruitment to infectious diseases, medical microbiology, medical virology and tropical medicine is being led by the JRCPTB Specialty Recruitment Office but with the support and involvement of representatives of both the JRCPTB and the Royal College of Pathologists. Applicants will make a single application to Combined Infection Training and, after application, will be able to indicate the specialty(ies) and locations across all participating regions in which they are interested in receiving offers. All interviews will be held at a single national interview centre managed by a lead region who will manage the process on behalf of all others.

Candidates will be able to apply in February/March 2015 with offers being made after interview in spring 2015.

Further information about the process is updated on the ST3 recruitment website ahead of each recruitment round: <http://www.st3recruitment.org.uk/>.

Development of FAQs

The [RCPath](#) and [JRCPTB](#) have published a list of FAQs, now incorporating FAQs for infectious diseases and tropical medicine. These will be regularly updated and reviewed to ensure that information is shared as widely as possible once it is available.

Examinations

The new joint 'FRCPath Part 1/Diploma in Infection' examination continues to be developed and a core group of examiners for all specialties concerned has been identified and agreed. A bank of questions has been established and will be added to through regular meetings of the examiners with dates now set into 2015.

Transitional arrangements

The transitional arrangements for the infectious diseases and tropical medicine specialties have been agreed and, in summary, are as follows:

Trainees for whom there should be no difficulty

- Trainees in ID/GIM who entered training on or before August 2010 who are doing IDGIM, TM alone or IDMMMV should have their CCT before December 2015 and should remain on their current curriculum.
- Anyone doing ID alone who entered training in August 2011 should also have completed training by December 2015. (Exceptions may be trainees in those intakes who have taken OOP or maternity leave).
- Trainees who enter training in August 2015 will go straight onto the new curriculum.

Trainees needing special arrangements

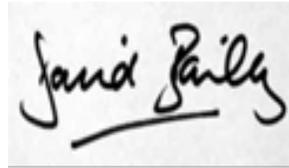
- Trainees entering training in August 2014 should be able to switch to the new curriculum and take the new examination without a problem.
- Trainees entering training in 2013 should be allowed to stay on the current 2010 curriculum and take the SCE in ST5 (in 2015)
- Trainees who entered training in 2011 and 2012 should do the SCE in ST5 (Nov 2013 or 2014) and should be allowed to complete their training on the 2010 curriculum
- There may also have to be exceptional individual arrangements made for trainees from earlier years who have spent time either OOP or on maternity leave. It is to be hoped that individual arrangements for these trainees can be made between the Deanery and the ID SAC.

The transitional arrangements for medical microbiology and medical virology have been sent out for consultation by the RCPath Medical Microbiology and Virology CSTC and for agreement by the GMC. These have now been agreed and are also published on the [RCPath website](#). The process for applying for curriculum transfer (including any application forms) will be launched in 2015 but the transitional arrangements are being released now for information. .

Finally, we would like to acknowledge the work of all of those involved in contributing to the development of the curricula and assessment systems that has led to this achievement. This includes all of those who took the time to respond to various curriculum consultations and all those who continue to be involved in the various aspects of implementation that are ongoing for the coming year.



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On behalf of the Joint RCPATH/JRCPTB Infection Training Working Group