

Identifying exceptional performance in physician training – IM Stage 1

The Internal Medicine Stage One (IMS1) curriculum developed by the CMT/IM SAC and JRCPTB, and which was subsequently ratified by the GMC, aims to identify minimum level of attainment that should be associated with trainee progression in training and, eventually, a standard outcome (O6) on conclusion of IMS1 training facilitating application for IMS2 and other specialty training. It is apparent however that acquisition of capabilities can be achieved at disparate rates depending on several circumstances including trainee opportunities and aptitude.

As we have developed progression in training based on capability acquisition it has become apparent that we should define exceptional performance to help ARCP panels facilitate acceleration in training when this is desired by the trainee and supported by the educational supervisor. The average standard of IMS1 physician trainees is high and thus exceptional performance should be seen to be exemplary with exhibition of attitudes and aptitudes that are above and beyond those demonstrated by most trainees.

Trainee perspective

Even though the trainee may be seen to be performing at a level above their peers it may not be their desire to accelerate progress through training. This is entirely acceptable, and the wishes of the trainee should be respected. Each educational supervisor for trainees who may have been highlighted as performing at an exceptional level should review the trainee's intention without pressurising the trainee to accelerate in training.

Trainer perspective

Assessment of exceptional performance would not be left to one individual but would be prompted by a consistent theme of reports from clinical and educational supervisors that the trainee is demonstrating exemplary performance across both the generic and the clinical capabilities in practice (CiPs) from the IMS1 curriculum.

The prospect of acceleration of training must be balanced by the potential loss of broader experience. Thus, while a trainee may be perceived to performing well enough for consideration of acceleration, the breadth of activity that they have experienced and are demonstrating must be above that which might be expected from an average trainee. Thus, the trainee may exhibit creative problem-solving behaviour in clinical practice with active consideration of patient focussed investigative and management pathways but also demonstrate high aptitude in leadership, teaching, communication and professional behaviour that focusses on patient safety and effective delivery of care. In IMS1. Progress towards full MRCP UK must also be considered.

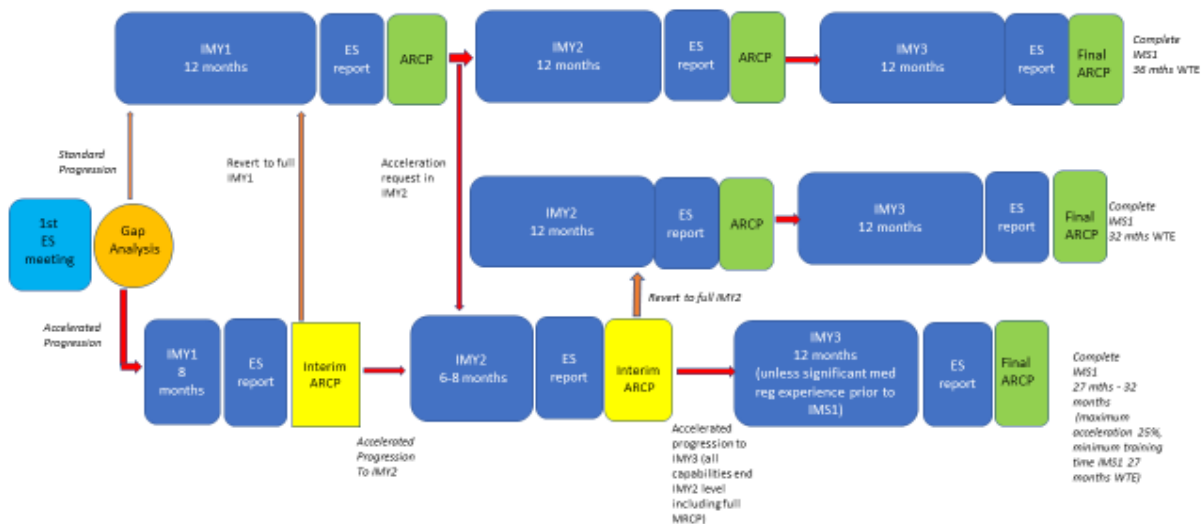
Process

Two distinct groups of trainees should be considered.

1. **Trainees entering IMS1 who have gained appropriate experience following Foundation training (eg in Clinical Fellow posts)**
 - a. This experience must have evidence that can be reviewed at an initial gap analysis with the ES who will then determine whether the trainee may be considered for accelerated training and contact the TPD so that the possibility of accelerated training can be considered

- b. If the TPD considers accelerated training to be a possibility, an early, interim ARCP will be arranged at about 8 months IMY1 training time. The ES must make a recommendation for accelerated training on the ES report and include the reasoning
- c. The ARCP panel will review the evidence and decide if the request to accelerate should be approved. If approved, the trainee may progress to IMY2 early and a revised predicted end IMS1 date confirmed. If acceleration is declined, the trainee will revert to standard progression with 12 months WTE IMY1
- d. If a trainee requests acceleration in IMY2 or a trainee has already accelerated in IMY1 and requests further acceleration, the ES will review the request and if supportive will contact the TPD. An early, interim ARCP will be arranged after 6-8 months WTE IMY2 training time. The trainee must have achieved all end IMY2 capabilities at the time of ARCP to be considered for acceleration to IMY3 and the ES must make a recommendation for accelerated training on the ES report and include the reasoning
- e. The ARCP panel will review the evidence and decide if the request to accelerate should be approved. If approved, the trainee may progress to IMY3 early and a revised predicted end IMS1 date confirmed. If acceleration is declined, the trainee will revert to standard progression with 12 months WTE IMY2
- f. All trainees will complete 12 months WTE training time at IMY3 level, unless the trainee has significant medical registrar experience prior to IMT, in which case the possibility of reducing IMY3 training time to 8 months WTE can be considered
- g. The maximum time that training programme can be reduced by is 25%, with the minimum WTE training time as 27 months for the 3 year programme

Trainee with additional experience post-Foundation and prior to IMT



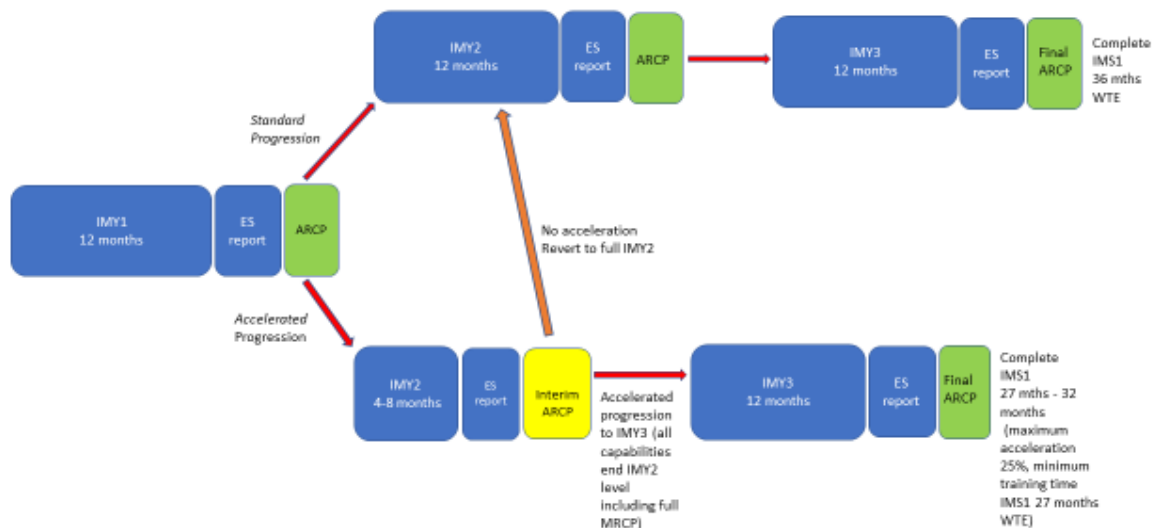
2. Trainees without prior experience upon entering IMS1 but performing at level greater than peers

- a. If the trainee wishes to be considered as showing exceptional performance, the ES should review the reports received to date in the form of results from supervised learning events, multiple consultant reports and the multisource feedback that should have been performed. If the ES feels that the reports are of a standard that

would make the trainee stand out among their peers, this should be highlighted to the IMY1 ARCP panel that the trainee is appropriate to consider acceleration in training, provided that the trainee wishes to do so

- b. Trainees are identified by the IMY1 ARCP panel as performing at a significantly higher level than their peers and could be considered for acceleration. An early, interim end IMY2 ARCP is arranged after 4-8 WTE IMY2 training time
- c. The IMY2 ES reviews the portfolio and confirms in the ES report that they support acceleration as the evidence is of a standard that would make the trainee stand out amongst their peers as they are 'exceptional'. The trainee must have achieved all end IMY2 capabilities at the time of ARCP to be considered for acceleration to IMY3
- d. The ARCP panel will review the evidence and decide if the request to accelerate should be approved. If approved, the trainee may progress to IMY3 early and a revised predicted end IMS1 date confirmed. If acceleration is declined, the trainee will revert to standard progression with 12 months WTE IMY2
- e. All trainees will complete 12 months WTE training time at IMY3 level
- f. The maximum time that training programme can be reduced by is 25%, with the minimum WTE training time as 27 months for the 3 year programme

Exceptional performance without additional previous experience



3. Less than full time or academic trainees

Trainees who are working Less-Than-Full-Time (LTFT) or are appointed to an Academic IMT programme (note differences in academic programmes across Four Nations), the duration of training should have been determined at appointment by the Local Office / Deanery and the estimated training completion date adjusted accordingly. It is not accepted that trainees working LTFT or on academic programmes would automatically be considered for acceleration of training but are to be treated in the same manner as trainees on more traditional, full-time training programmes. Such trainees can, of course, apply for acceleration in the same manner as explained above and would need to demonstrate accelerated acquisition of capabilities.

