

2018 NATIONAL TRAINEE SURVEY RESULTS

ALLERGY

SPECIALTY SPECIFIC QUESTIONS

SEPTEMBER 2018

Warren Lynch / Aidan Simpson Quality Management Team Joint Royal Colleges of Physicians Training Board



Introduction

The Specialty Specific Questions have been developed to test trainee's access to, participation in or confidence in the attainment of specific aspects of the specialty training curriculum.

The questions have been included as Programme Specific Questions in the annual GMC National Trainee Survey. A table showing trainee's collective responses from a national perspective, a comparison with the responses last previously received for the question (if it has been asked in a previous year) and the region or regions where agreement is highest or lowest are shown on pages 4-7 with a fuller breakdown of the questions and the trainee responses (nationally, by Deanery/LETB and by grade later in this report.

8 Allergy trainees, 2 less than 2017, completed the 2018 survey. The numbers of trainees in each Deanery / LETB completing the survey were as follows:

Deanery / LETB	2017	2018	
Health Education East Midlands	<3	0	
Health Education East of England	<3	<3	
Health Education N, C & E London	0		
Health Education South London	5	0	
Health Education North West	<3	<3	
Health Education Wessex	<3	<3	
Total	10	8	

Reduction of >10% of trainees completing the NTS in 2018 compared to 2017



Specialty Specific Questions – Allergy

Quality Criteria		2017/2018
	agreeing overall	Difference
Q1. I have had sufficient experience in dealing with the consequences of atopic march in children to meet the curriculum	2017: 100%	-40%
outcomes. (ST5, ST6, ST7) n=5	2018: 60%	-40%
Q2. I feel competent to participate in an adult allergen immunotherapy service for allergic diseases arising from	2017: 100%	+0%
aeroallergen and insect venom allergy and offering subcutaneous and sublingual vaccines. (ST5, ST6, ST7) n=5	2018: 100%	+076
Q3. I feel competent to investigate suspected drug allergy, including general anaesthetics, antibiotics, aspirin and other	2017: 100%	+0%
analgesics, local anaesthetics in an outpatient, day case or inpatient challenge setting. (ST5, ST6, ST7) n=5	2018: 100%	
Q4. I feel competent to perform or order and interpret allergy tests and in vitro tests for serum allergen-specific IgE and	2017: 100%	+0%
understand the principles and clinical significance of component resolved allergen-specific IgE detection. (ST5, ST6, ST7) n=5	2018: 100%	1070
Q5. The Knowledge Based Assessment examination was useful in shaping my training needs. (ST5, ST6, ST7) n=5	2017: 0%	+ 0%
	2018: 0%	+ 0/0
Q6. I feel competent to investigate and manage patients with anaphylaxis including "idiopathic" anaphylaxis.		+0%
(ST5, ST6, ST7) n=5	2018: 100%	
Q7. I feel competent to determine the aetiology of, and manage urticaria and angioedema of all causes. (ST5, ST6, ST7) n=5	2017: 100%	+0%
	2018: 100%	
eel competent to investigate and manage patients with asthma, including identifying which patients qualify for anti-		+5%
IgE therapy and administering and monitoring this therapy. (ST5, ST6, ST7) n=5	2018: 80%	
Q9. I feel competent to examine the upper airways and to manage patients with chronic rhinosinusitis and nasal polyps.	2017: 75% 2018: 80% +5%	
(ST5, ST6, ST7) n=5		
Q10. The BSACI national training days are delivering training appropriate to the content of the allergy curriculum.	ST5, ST6, ST7) n=8 2018: 100%	
(ST3, ST4, ST5, ST6, ST7) n=8		
Q11. I feel competent to investigate and manage all patients with overt or suspected food allergy, with full understanding of	2017: 100%	
the role of skin prick testing, component resolved diagnosis and single and double blind food challenge in a day case setting.	2018: 100%	+0%
(ST5, ST6, ST7) n=5		

51 75% digreement in 2010 70 100% digreement in 2010	0 - 50% agreement in 2018		51 – 75% agreement in 2018		76 – 100% agreement in 2018
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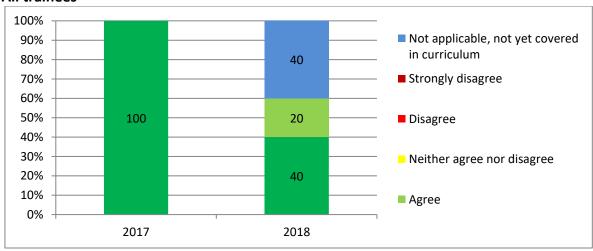


Please indicate how much you agree or disagree with the following statements:

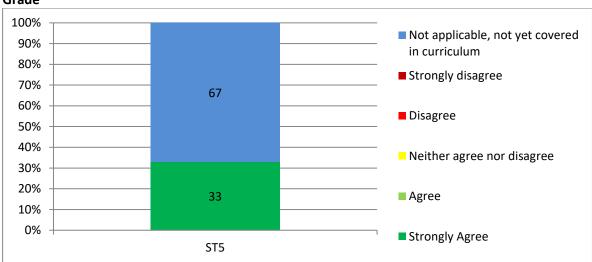
Q1. I have had sufficient experience in dealing with the consequences of the atopic march in children to meet the curriculum outcomes.

(This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5

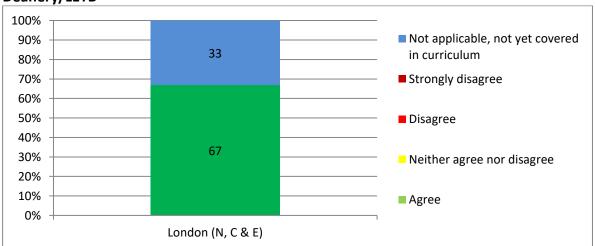
All trainees



Grade



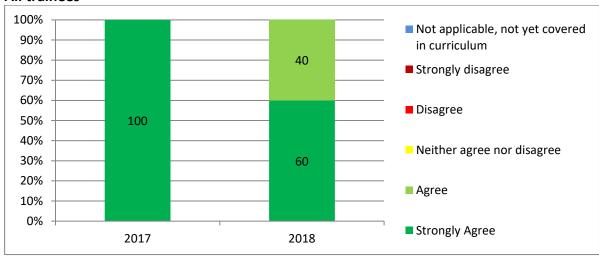


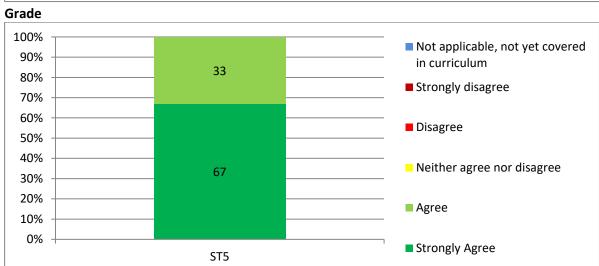


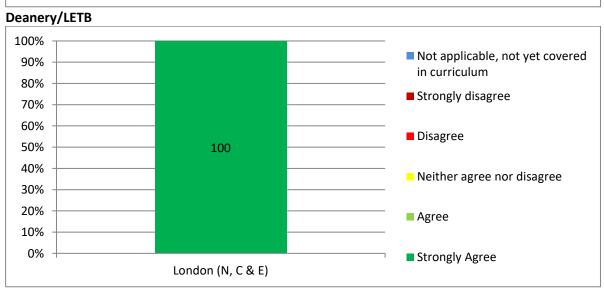


Q2. I feel competent to participate in an adult allergen immunotherapy service for allergic diseases arising from aeroallergen and insect venom allergy and offering subcutaneous and sublingual vaccines. (This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5

All trainees



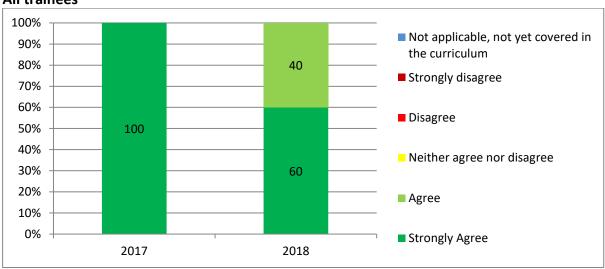




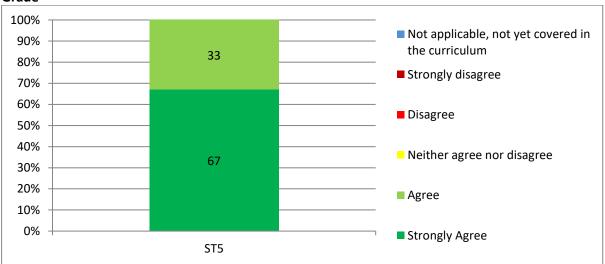


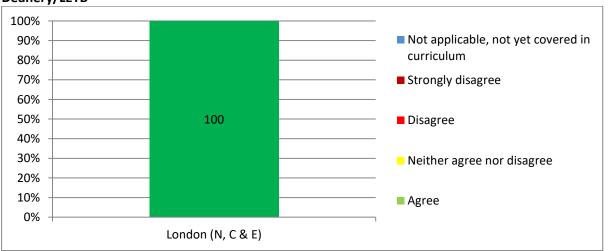
Q3. I feel competent to investigate suspected drug allergy, including general anaesthetics, antibiotics, asprin and other analgesics, local anaesthetics in an outpatient, day case or inpatient challenge setting. (This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5

All trainees







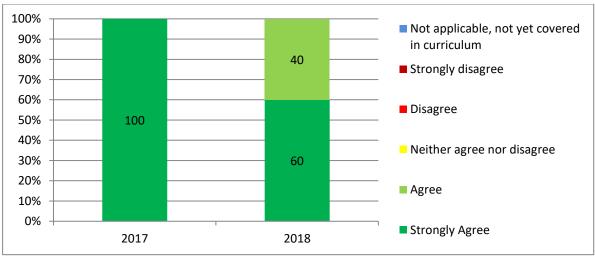




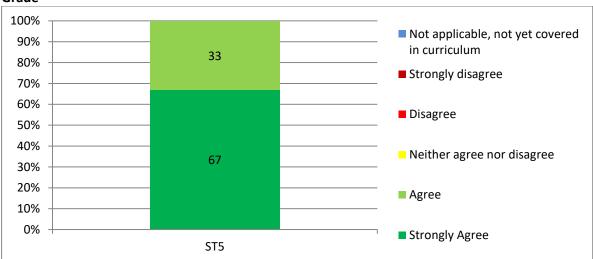
Q4. I feel competent to perform or order and interpret allergy tests including skin prick tests, intradermal tests and in vitro tests for serum allergen-specific IgE and understand the principles and clinical significance of component resolved allergen-specific IgE detection.

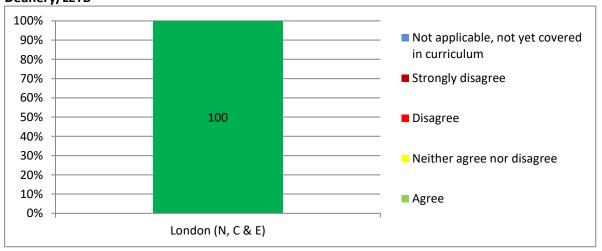
(This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5

All trainees







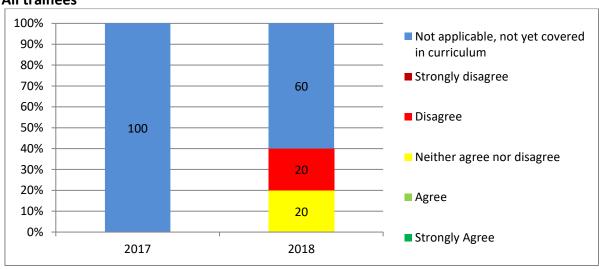




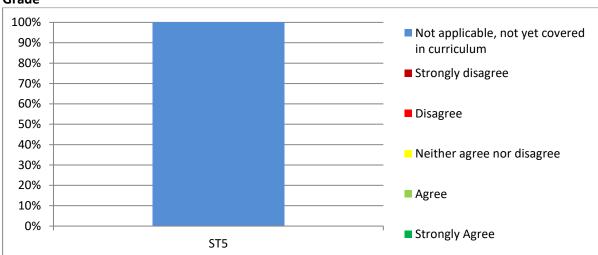
Q5. The Knowledge Based Assessment examination was useful in shaping my training needs.

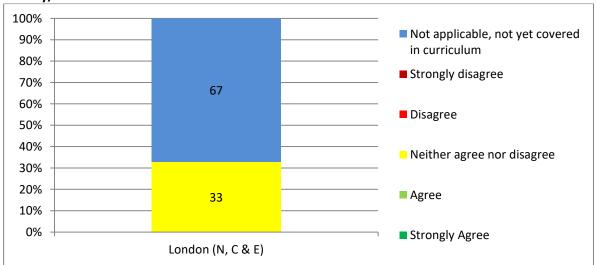
(This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5

All trainees







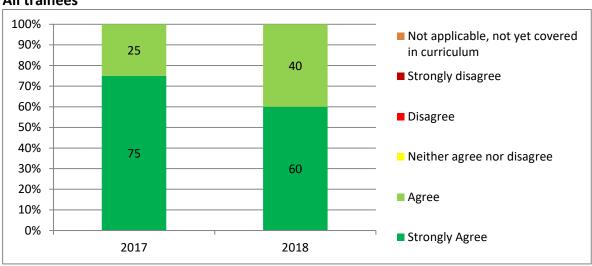




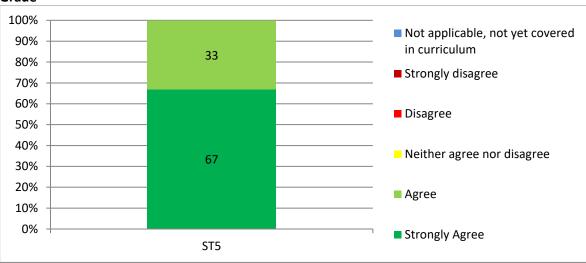
Q6. I feel competent to investigate and manage patients with anaphylaxis including "idiopathic" anaphylaxis.

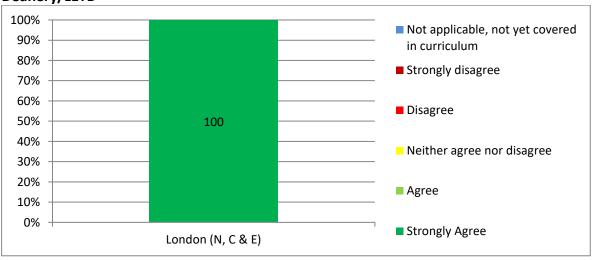
(This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5

All trainees





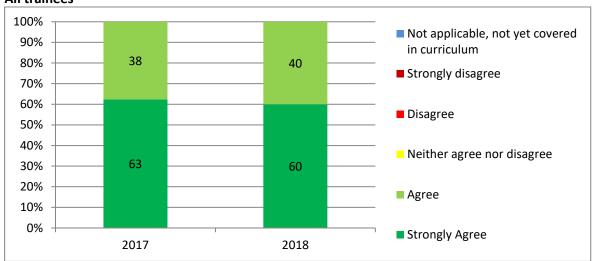




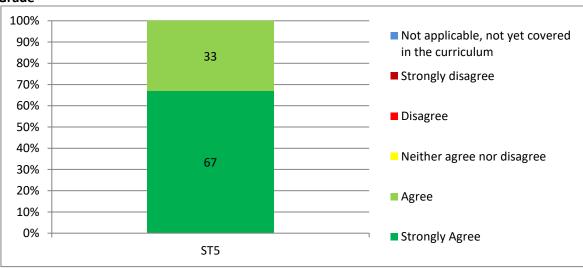


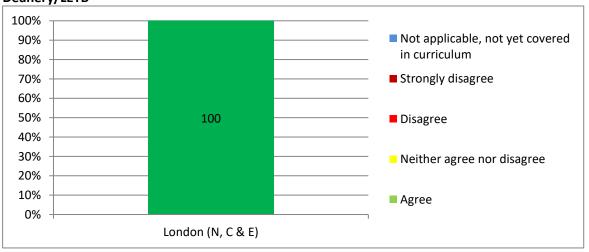
Q7. I feel competent to determine the aetiology of, and manage urticaria and angioedema of all causes. (This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018: n=5









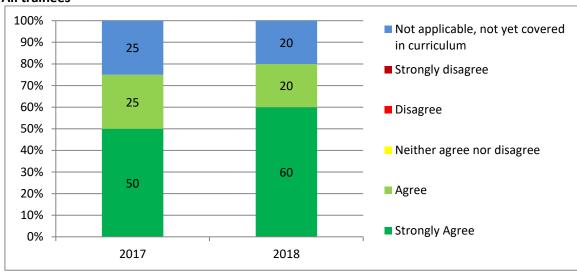




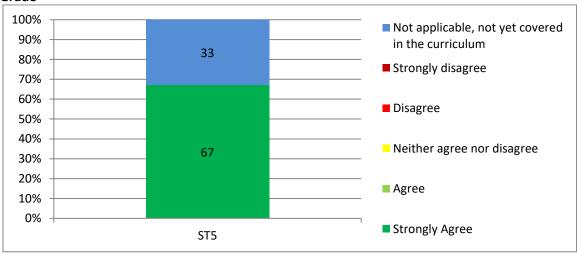
Q8. I feel competent to investigate and manage patients with asthma, including identifying which patients qualify for anti-IgE therapy and administering and monitoring this therapy.

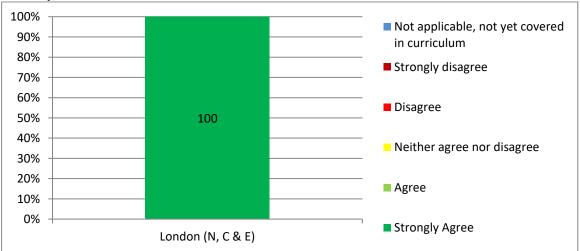
(This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=8, 2018:n=5

All trainees







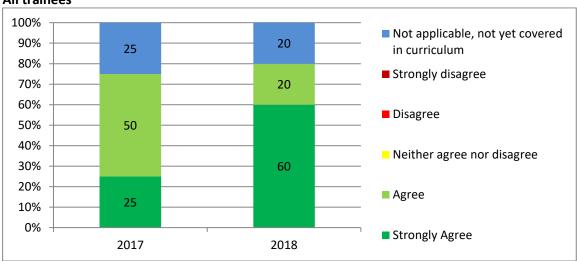




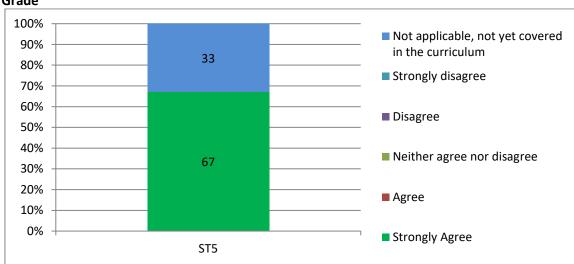
Q9. I feel competent to examine the upper airways and to manage patients with chronic rhinosinusitis and nasal polyps.

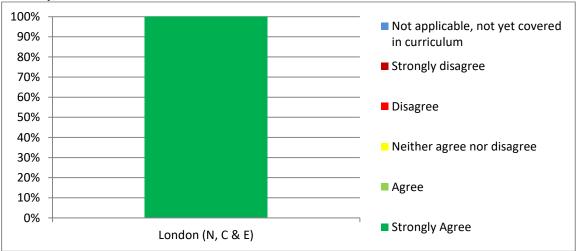
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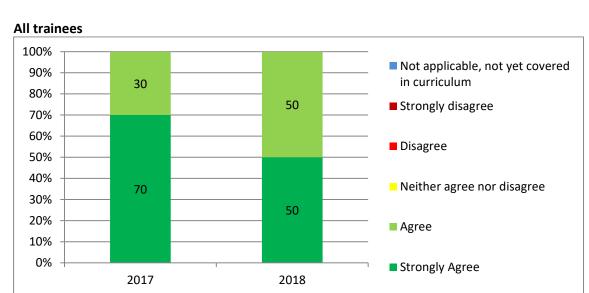


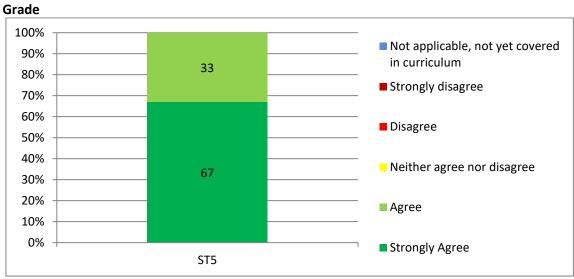


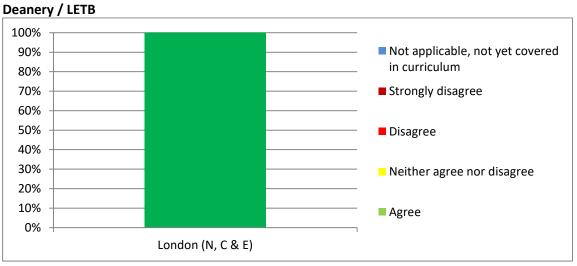




Q10. The BSACI national training days are delivering training appropriate to the content of the allergy curriculum. (This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=10, 2018:n=8





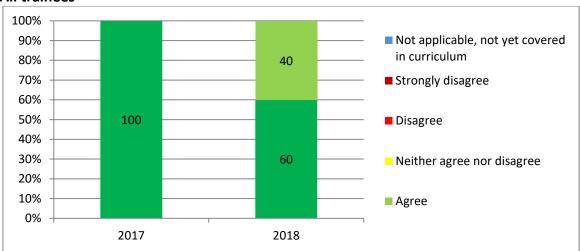




Q11. I feel competent to investigate and manage all patients with overt or suspected food allergy, with full understanding of the role of skin prick testing, component resolved diagnosis and single and double blind food challenge in a day case setting.

(This question was presented to trainees of the following grades: ST5, ST6, ST7) 2017: n=3, 2018:n=5

All trainees



Grade

