

ACADEMY OF MEDICAL ROYAL COLLEGES

Meeting of the Academy Infection Training Working Party between 3-5pm on Wednesday 17th March at Royal College of Paediatrics and Child Health, 5-11 Theobalds Road, London WC1X 8SH.

Present:

Professor Sir Neil Douglas	Chair
Professor Bill Burr	JRCPTB
Professor Philip Cachia	Lead Dean
Dr Chris Conlon	Infectious Diseases
Dr Derrick Crook	Microbiology/Infectious Diseases joint training
Professor Brian Duerden	Microbiology and Infection Control (tele-link)
Dr Anne Edwards	GUM
Dr Martin Gill	Chair of Microbiology CATT
Ms Lesley Hagger	JRCPTB
Professor Goura Kudesia	Chair of Virology CATT
Ms Jenny Maddocks	RCPATH
Dr Nandini Shetty	Health Protection Agency
Dr Jim Stephenson	Medical Microbiology
Dr Peter Wilson	Medical Microbiology
Ms Manjula Das	AoMRC

1) Welcome

The Chair welcomed the group to the meeting including Dr Anne Edwards, GUM and Dr Nandini Shetty, Health Protection Agency.

2) Apologies were received from

Dr Celia Aitken, Virology; Dr Susan Alleyne, Trainee Doctor; Professor Shelley Heard, RCPATH; Dr John Hood, Microbiology; Dr Raj Patel, GUM; Dr Stephen Gillespie, Medical Microbiology; Dr Delane Shingadia, Paediatric Infectious Diseases; Dr Philip Kell, Chair of GUM SAC, Dr Alastair Miller, Infectious Diseases; Professor Armine Sefton, Examinations; Dr Andrew Todd, SAC ID/Tropical Medicine and Dr Helen Williams, SAC Microbiology.

3a) Draft minutes from the previous meeting 04/11/09 were accepted as accurate. Notes from the Virology CATT were circulated for information.

b) Matters arising

All matters arising were covered elsewhere on the agenda.

4) Draft Core Infection Curriculum version two

Dr Gill presented the second draft of the Core Infection Curriculum which will be undertaken in the first two years post CMT. Amongst other revisions, this version includes aspects from the AoMRC Common Competences Framework for Doctors

and the Medical Leadership Curriculum and Framework and has been rephrased inline with PMETB and educationalist advice. Clarification from the working party was sought on areas which were highlighted in yellow.

ACTION: Members of the working party to feedback comments on the core infection curriculum to Dr Gill by the end of April.

5) Module developments

a) Background letter from Dr Conlon detailing the background to the module development was circulated for information.

b) Good Medical Practice was circulated for information.

c) Proposed Groupings of post core content

The document (attachment 5c) circulated shows the proposed groupings of modules which will follow the core infection programme (attachment 4). The groupings are:

- i) Laboratory practice
- ii) community acquired infections
- iii) immunocompromised hosts
- iv) outpatient "virology"
- v) pregnancy and paediatrics
- vi) cardiac, respiratory and TB
- vii) surgical infections
- viii) tropical, travel medicine and parasitology

The working party agreed that this covered all the categories required for an infection doctor who would be competent within a laboratory and on the ward. It was highlighted that assessments must be included alongside other curriculum content.

d) Modules

A formatted module in respiratory infections according to the template required by the regulator was circulated as an exemplar for the module layout. It outlines the knowledge, skills and behaviours expected alongside the type of assessments that might be used to evaluate the competences, in line with the GMP (attachment 5b).

Volunteers were requested to take on a category/grouping (as detailed under minute 5c) and ensure that the level of detail required is sufficient, using the circulated module as a template).

The length of training was discussed. Currently for the other specialties it stands at:

- i) ID 2(CMT) + 4= 6 years
- ii) MM 5 years
- iii) Virology 5 years
- iv) Combined ID + GIM 2 (CMT) + 5-6= 7-8 years

It was agreed that taking into consideration the above, the post core modules should be two years, therefore this programme will be 6 years comprising

- 2 years of Core Medical Training
- 3 years of Core Infection Training
- 1 year of post core consisting of special interests modules

It was felt that a programme longer than this would be difficult to finance and practically deliver.

The group discussed the organisation of the curriculum and agreed that the one year module part of the curriculum will involve competitive entry and allow trainees to specialise out of four options (to be agreed once the core content in the three year programme has been agreed). Therefore the product will be pluri-potential, with a single CCT but will allow for different emphasises, depending on the module categories undertaken.

ACTION: MS Hagger, Dr Conlon and Dr Crook to divide up the modules between individuals in the working party for development. Members to agree core infection programme content and modular content for final year. To be completed by April. Dr Gill to lead on Microbiology, Professor Kudesia on Virology and Dr Conlon on Infectious Diseases.

ACTION: Leads to send Ms Das the CIT and modules by 23rd April.

6) Communications update

a) Feedback from FIS presentation

Dr Gill and Dr Conlon presented the working party's developments and intentions at the FIS annual conference and it was welcomed favourably. Further to this a range of queries were raised including: delivery, training of the trainers, the core/modular divide, specialisation, the role of research, academics and examinations. These issues are being addressed by the working party.

b) Wider communications

It was agreed that input from specialty groups on the content of the curriculum and modules should be sought prior to a wider national consultation with key stakeholders to ensure that all key groups have the opportunity to comment on and help development before wider distribution. This will include key groups like the SACs, AMM, BIS, FIS and HIS.

ACTION: Members of the working group to identify these other key groups and to inform Ms Das of contact details by 23rd April. Members of the working party to highlight the timescales to these groups and individuals. Ms Das will send out a list to the working party to ensure that all necessary groups are contacted.

7) The next steps

a) Confirm timescales

- i) Working party to complete curriculum and modules by end of April
- ii) Complete curriculum to be circulated to the working party for final comments to be sent back by end of 23rd April
- iii) Agreed curriculum by working party (by end of April) to be circulated to special interest groups at beginning of May and associations for comments and feedback by end of May
- iv) To be drawn together and sent out for national consultation to all key stakeholders including deans and Foundation School Directors, trainees and service.

b) Pilots

Although it was felt that piloting would be beneficial, there is no funding for this, however, if feasible, this will be encouraged.

c) Delivery

It was suggested that the national grid system developed and utilised by the paediatrics be used to aid the development of competitive entry between modules at the latter part of this curriculum.

ACTION: Ms Das to obtain details of the working of the paediatric grid and circulate to the working party.

8) Any other business

It was agreed that the circulated questionnaire should not be distributed at this stage.

9) Date of the next meeting

The May 17th date is no longer feasible.

ACTION: Ms Das to organise meetings in May and November.