
Clinical Fellowship in Older Person's Health



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About the ICGP

The Irish College General Practitioners (ICGP) is the professional body for general practice in Ireland. The College was founded in 1984 and is based in Lincoln Place, Dublin 2. The College's primary aim is to serve the patient and the general practitioner by encouraging and maintaining the highest standards of general medical practice. It is the representative organisation on education, training and standards in general practice.

The College is the recognised body for the accreditation of specialist training in general practice in Ireland and is recognised by the Medical Council as the representative academic body for the specialty of general practice. At an international level the College is a member of the World Organisation of National Colleges and Academies and Academic Associations of General Practice (WONCA).

The ICGP provides educational governance in granting certification of satisfactory completion of training for general practice specialty Clinical Fellowship Doctors undergoing the National GP Training Scheme, a 4 year integrated curriculum driven specialty training scheme, together with the Membership Examination (MICGP) which is the recognised standard for Family Practitioners who wish to become eligible for Specialist Registration as General Practitioners in Ireland. Previous experience of the ICGP during the last ten years has included extension of The National GP Training Scheme in Ireland in moving from a three year to a four year training model. The ICGP also provides governance for and administration of the Professional Competence Scheme for Family Practitioners in Ireland, compliance with which is required by The Irish Medical Council as a condition of ongoing eligibility on the Specialist Register for General Practice in Ireland.

In 2016 the ICGP is launched a suite of Clinical Fellowships for Doctors from overseas who may wish to undertake part of their Sub Specialty training in Ireland. The ICGP Clinical Fellowship Programme (ICGP-CFP) will offer a structured training and education pathway leading to a Clinical Fellowship award at the end of a 12 month period.

The International Clinical Fellowship Programme

The Irish College of General Practitioners Clinical Fellowship Programme (ICGP-CFP) provides a route for overseas doctors wishing to undergo structured and advanced postgraduate medical training in Ireland. The ICGP-CFP enables suitably qualified overseas postgraduate medical Clinical Fellowship Doctors to undertake a fixed period of active training in clinical services in Ireland. The programme is normally offered over one or two years of clinical training, after which the overseas doctors will be required to return to their country of origin. In limited certain circumstances, the period of training may extend to three years.

The purpose of the ICGP-CFP is to enable overseas Clinical Fellowship Doctors to gain access to structured training and in active clinical environments that they cannot get in their own country, with a view to enhancing and improving the individual's medical training and learning, to become Clinical leaders in their chosen career pathway in their home country, and, in the medium to long term, the health services in their own countries.

This Programme will allow participants to access a structured period of training and experience as developed by the ICGP to specifically meet the clinical needs of participants as defined by their home country's health service.

Aims

Competencies, at a level consistent with practice in the specialty, will include the following:

- Patient care that is appropriate, effective and compassionate dealing with health problems and health promotion.
- Medical knowledge in the basic biomedical, behavioural and clinical sciences, medical ethics and medical jurisprudence and application of such knowledge in patient care.
- Interpersonal and communication skills that ensure effective information exchange with individual patients and their families and teamwork with other health professionals, the scientific community and the public.
- Appraisal and utilisation of new scientific knowledge to update and continuously improve clinical practice.
- Capability to be a scholar, contributing to development and research in the field of the chosen specialty.

- Professionalism.
- Ability to understand health care and identify and carry out system-based improvement of care.

Professionalism

Medical professionalism is a core element of being a good doctor. Good medical practice is based on a relationship of trust between profession and society, in which doctors are expected to meet the highest standards of professional practice and behaviour. It involves partnership between patient and doctor that is based on mutual respect, confidentiality, honesty, responsibility and accountability.

In addition to maintaining clinical competence, a doctor should also:

- Show integrity, compassion and concern for others in day-to-day practice
- Develop and maintain a sensitive and understanding attitude with patients
- Exercise good judgement and communicate sound clinical advice to patients
- Search for the best evidence to guide professional practice
- Be committed to continuous improvement and excellence in the provision of health care whether working alone or as part of a team

Prior to commencing their sponsored clinical placements, all participants will also be required to undergo the mandatory screening requirements of the relevant clinical site/service including occupational health assessment and Police clearance.

Review and Assessment

A consultant trainer/educational supervisor will be identified for each participant in the programme. He/she will be responsible for ensuring that the educational potential of the post is translated into effective training which is being fully utilised. Only departments approved for Clinical Fellowship Training by the ICGP and its constituent training bodies will be used.

The training objectives to be secured should be agreed between each Clinical Fellowship Doctor and trainer at the commencement of each posting in the form of a written training plan. The trainer will be available throughout, as necessary, to supervise the training process. In each year Clinical Fellowship Doctors undergo a formal review by an appropriate panel. The panel will review in detail

the training record, will explore with the Clinical Fellowship Doctor the range of experience and depth of understanding which has been achieved and consider individual trainer's reports. An opportunity is also given to the Clinical Fellowship Doctor to comment on the training being provided; identifying in confidence any deficiencies in relation to a particular post.

A quarterly and annual review of progress through training will be undertaken on behalf of the International Clinical Fellowship Programme (ICGP-CFP). These will include assessments and reports by educational supervisors, confirmation of achievements and the contents of the ePortfolio will be reviewed. At some or all of these annual reviews a non-specialty assessor will be present capable of addressing core competencies.

Additional sub-speciality requirements in respect of the training pathway will also apply. Applicants are advised to consult the Structured Pathway and Assessment process for their chosen Clinical Fellowship Programme.

The award of a Certificate of Competency will be determined by a satisfactory outcome after completion of the entire series of assessments.

Become an Internationally Trained Leader in Older Person's Health

The ICGP has a long history of training and developing clinical specialists in Family Medicine. Through this Clinical Fellowship in Older Person's Health, you too can experience bespoke training in a specialist clinical environment. The Clinical Fellowship in Older Person's Health takes place over either a 12 month or 24 month period. During this time you will experience training, clinical placement and clinical practice. You will incrementally build your skill set and confidence in the sub-speciality over the course of the Clinical Fellowship.

The Clinical Fellowship in Older Person's Health will provide you with exposure to both hospital and family practice based medicine. Your time will split as follows:

- Three days a week with in a Family Practice setting
- Two days a week's working under an Older Person's Health Specialist within a hospital setting

Dedicated Support Team

From application to graduation your learning experience will be supported by the ICGP International Affairs Team.

At each stage in the journey you will be assigned a dedicated point of contact who will be committed to making the Clinical Fellowship process as easy and enjoyable as possible for you.

Entry Requirements

The Irish College of General Practitioners have commenced a Clinical Fellowship Programme in Older Person's Health, specifically designed for internationally trained doctors. The Clinical Fellowship programme is based on the successful model pioneered by the Royal College of Physicians in Ireland. Standard entry requirements apply across all our Clinical Fellowship programmes.

The successful Clinical Fellowship applicants must demonstrate the following characteristics & qualifications:

- They will have studied their basic medical degree through English.
- They will have completed a 4 year Training Program in Family Medicine in their home country.
- They will have completed one further year working full time in the specialty of Family Medicine in their home country.
- They will have passed all the examinations that are appropriate for doctors in Family Medicine in their home country, e.g. Saudi Boards Examination, Arab Boards examination etc.
- They will have achieved an overall band score of 7.0 or greater in the IELTS (International English Language Testing System) and a minimum score of 6.5 in each of the four domains. The IELTS test taken must be 'Academic' and must have been completed within the last two years.
- They will be highly motivated clinicians who have a strong desire to develop new skills in their chosen specialist areas.

The doctors who complete Clinical Fellowships will return to their home country as leaders in Older Person's Health provision, ready to become involved in further enhancing the larger specialty of Family Medicine as well as the services in their specialist subject e.g. diabetes or Older Person's Health.

Application and Selection

In order to apply for a Clinical Fellowship Post you must complete the ICGP-CFP Structured CV and complete the Online Application Form via www.icgp.ie. Shortlisting will apply and final selection and appointment will follow a formal interview which will be conducted in the trainees host country.

World Class Clinical Partners

The ICGP have created four new Clinical Fellowship posts in Older Person's Health to offer to our internationally trained medical colleagues.

Embarking on a Clinical Fellowship in Older Person's Health with the ICGP will provide you with direct access to world class clinical partners. You will be jointly based within a busy family practice and a hospital unit which specialises in Older Person's Health services. You will experience hands-on, structured vocational training, in a clinical setting, supervised by an Irish clinical expert.

Work-based learning completed in the clinical setting is a core part of this experience.

Central, Accessible Location

All of the posts are located urban centres, in large family medicine centres and hospitals with established teaching and training facilities. The hosts in each of the facilities are highly regarded leaders in their speciality areas.

The candidates will be fully involved in the day to day activity of the host family medicine practice.

Joining the ICGP Community

While engaged on a Clinical Fellowship, Doctors will have the opportunity to become part of the ICGP Clinical Community. The ICGP will offer candidates the opportunity to engage in its ongoing professional development programme. This will include access to courses that are relevant to their specialist area including national conferences, local meetings and workshops, eLearning plus the option of enrolment on the ICGP Professional Competence Scheme.

Specifically as part of the Clinical Fellowship in Older Person's Health you will be able to select and complete two additional ICGP Short Courses drawn from the programmes on offer during your Fellowship Programme.

Structure and Timelines

All ICGP Clinical Fellowships take place over either a 12 month or 24 month period from point of commencement to completion. As providers of bespoke educational packages, the ICGP can provide doctors with access to a multi start Clinical Fellowship designed to suit their needs and scheduling.

Doctors are advised to complete a Clinical Fellowship Application a minimum of six months prior to programme commencement. Applicants will be asked to indicate their preferred commencement date at point of application.

Learning Pathway – Older Person’s Health Curriculum

The structure of the Clinical Fellowship in Older Person’s Health is based on the core competencies for the Family Practitioner, as identified by the ICGP.

These are:

Primary care management

This is about how you manage your contact with patients, dealing competently with any and all problems that are presented to you and coordinating their care using resources appropriately. (This area of competence is not limited to dealing with the management of the practice.)

Person-centred care

This is about understanding and developing an effective doctor patient relationship.

Specific problem-solving skills

This is about the context-specific aspects of general practice: Selective history taking, physical examination and

Investigations leading to an appropriate management plan. It is about how you deal with early and undifferentiated illness and the skills you need to tolerate uncertainty, without medicalising normality.

A comprehensive approach

This is about how general practitioners must be able to manage co-morbidity, multiple complaints and pathologies both acute and chronic health problems in the individual and also applying health promotion and disease prevention strategies.

Community Orientation.

Reconciling the health needs of individual patients and the health needs of the community in which they live in balance with available resources.

A Holistic Approach.

Taking into account clinical factors, but also any psychological, social, economic or cultural factors that are important and understand the ways in which these will affect the experience and management of illness and health.

In applying these core skills in General Practice, three personal features are important.

These personal features relate to factors which have an impact on your ability to deliver the competences in real life in your work setting:

Contextual aspects of care

The environment in which you work; working conditions , community , culture, financial and regulatory frameworks; the impact of workload and the practice facilities and how that may influence the quality of your care.

Attitudinal aspects of care

Your awareness of your attitudes and capabilities; ethical aspects of clinical practice; achieving a good balance between work and private life.

Scientific aspects of care

Adopting a critical and evidence based approach to your practice and maintaining this through continued learning.

Curriculum

Please note that this is an indicative curriculum and will be tailored to meet the learning needs of each Clinical Fellowship Doctor.

The following learning outcomes relate specifically to the management of Older Person's Health.

In order to demonstrate the core competences in this subject and successfully complete the Clinical Fellowship in Older Person's Health you will require knowledge, skills and attitudes in the following areas:

Introduction

The global population of older people is increasing exponentially. It is predicted that the population of those over 65 years of age will have increased by almost 160% in 2046. With this increase, the care of older people will form an increasing proportion of a Family Physicians work.

Older adults often have complex health needs with challenges such as multimorbidity, polypharmacy, social isolation and difficulties with mobility, self-care and communication. Family Physicians have a central role in the delivery of care tailored to the needs of the individual older person. Multidisciplinary and multi-agency working is required to address these needs and the Family Physician has an important role in co-ordinating care with other members of the primary care team, ensuring that the right services are provided for this population.

Learning Outcomes

The following learning outcomes demonstrate the core competences in this subject. You will require knowledge, skills and attitudes in the following areas:

Primary Care Management

This area of competence is about how you manage your contact with patients, dealing competently with any and all problems that are presented to you. (This area of competence is not limited to dealing with the management of the practice.) As a Family Physician you should be able to:

- Describe the epidemiology of the conditions and problems commonly associated with old age and presenting in primary care, such as dementia and cancers as well as their risk factors
- Recognise the common, early, 'red flag' symptoms and signs of malignancy
- Proceed urgently with referral of suspected malignancy
- Use knowledge of the physical, psychological and social changes that may occur with age to relate to adaptations that an older person makes
- Accept that many cancers are more prevalent in the older person and may be insidious
- Adapt drug treatment according to the individual older person taking into account side-effects, concordance, hazards of polypharmacy and changes in absorption, metabolism and excretion that may occur in the older adult
- Account for the physical factors – particularly diet, exercise, ambient temperature and sleep – that disproportionately affect the health of older people
- Diagnose and manage the conditions and problems commonly associated with old age, such as Parkinson's disease, falls, gait disorders, stroke, confusion, dementia and cancer
- Organise care to allow easy access to the primary healthcare team for older people, appropriate timing of appointments and sign-posting to appropriate team members

- Organise care to allow for the systematic management of chronic conditions and multiple morbidities
- Plan continuing care as determined by the needs of the patient
- Design systems to ensure effective management of repeat prescriptions
- Design systems to ensure the appropriate use of screening and case-finding programmes for older people, including those in residential accommodation
- Delegate to other healthcare professionals, specialists and social services when necessary
- Analyse the quality of care for older people through audit, including in residential accommodation
- Recommend local support services for older patients, e.g. podiatry, visual and hearing aids, immobility and walking aids, meals on wheels, home care services
- Outline the day-care and long-term care options in the community for the older person and regulations for their appropriate use
- Outline how to use the various statutory and voluntary organisations for support of older people in the community
- Act habitually to ensure that the provision of care promotes the older person's sense of identity and personal dignity, and that the older person is not discriminated against as a result of their age
- Recognise abuse (emotional, mental and physical) in the older person and deal with it appropriately

Person Centred Care

This area of competence is about understanding and relating to the context of your patients as individuals, and developing the ability to work in partnership with them. A Family Physician should:

- Be aware of the theories of ageing
- Advocate for older people to carry out all the activities commensurate with their mental and physical competence (e.g. exercise, travel, sexual activity and

independence)

- Describe the prognosis of diseases in old age
- Produce appropriate management plans for further investigation, management and end-of-life-care for older people
- Acknowledge how management of disease processes in old age is influenced by the psychological state and social situation of the older person
- Act habitually to communicate at an appropriate level with the patient with hearing or visual impairment
- Recognise the challenges of communicating with older people including slower tempo and possibly needing to rely on the evidence of third parties
- Adopt appropriate communication skills for shared decision-making with older people and, where appropriate, families and carers

Specific Problem Solving

This area of competence is about the context-specific aspects of general practice, dealing with early and undifferentiated illness and the skills you need to tolerate uncertainty. As a Family Physician you should be able to:

- Exemplify a sensitive approach to older patients and their relatives or carers
- Recognise acute illness
- Demonstrate appropriate history taking including biological, psychological and social factors
- Define the demography of the practice (number of elderly patients, prevalence of chronic diseases)
- Recognise the changes in the normal range of laboratory values that are found in older people and interpret results accordingly
- Demonstrate the ability to assess mental capacity in the older person
- Demonstrate the ability to assess mobility in the older person
- Demonstrate measurement of visual acuity

- Diagnose and manage hearing loss
- Diagnose and manage constipation in the older person
- Diagnose and manage incontinence in the older person
- Apply the signs and symptoms of the early presentation of cancer to decision-making with older people
- Recognise suspected cancer early in the disease process
- Adopt a problem-based approach rather than a disease-based approach to the care of older people, who often have complex physical, psychological and social problems
- Assess the older person's potential for rehabilitation

Comprehensive Approach

This area of competence is about how you as a general practitioner must be able to manage co-morbidity, coordinating care of acute illness, chronic illness, health promotion and disease prevention in the general practice setting. As a Family Physician you should be able to:

- Accept the complex nature of health problems in older patients
- Demonstrate the ability to communicate complex management strategies to patients and relatives
- Define the special features of psychiatric diseases in older people, including dementia
- Acknowledge how psychiatric disease in older people affects the person, the family and community
- Accept the importance of the mental state, psychosocial and mobility assessment in the care of the older person
- Outline methods to assist in effective time management to include home visits
- Identify appropriate screening services for hearing impairment in older adults
- Accept how multimorbidity will influence the management of existing disease and may delay the early recognition of clinical patterns
- Perform appropriate health promotion on an individual basis as part of the

consultation in the older patient

- Describe the preventative strategies required in the care of older people
- Adapt care appropriately to provide health promotion, prevention, cure, care, rehabilitation and palliation for older people
- Organise multidisciplinary teamwork in primary care including involvement of family
- Identify related healthcare professionals, specialists and social services using a team approach

Community Orientation

This area of competence is about the physical environment of your practice population, and the need to understand the interrelationship between health and social care, and the tensions that may exist between individual wants and needs and the needs of the wider community. As a Family Physician you should be able to:

- Accept the impact of poverty, ethnicity and local epidemiology in older people
- Identify inequalities in healthcare provision for older people
- Identify the positive and negative ways in which socio-economic and health features inter-relate, and the importance of this within the community

Holistic Approach

This area of competence is about your ability to understand and respect the values, culture, family structure and beliefs of your patients, and understand the ways in which these will affect the experience and management of illness and health. As a Family Physician you should be able to:

- Discover the social circumstances and family structure of older people
- Identify issues related to carers, in particular the positive and negative impact of being a carer on their health and your holistic duty to address these issues
- Exemplify a sensitive approach to apparently dated social and health beliefs and cultural traditions
- Assess for possible neglect or abuse of the elderly
- Identify the legal rights of the older patient and problems arising from the disposal of their assets
- Identify the complex ethical issues posed by older people's impaired vision in relation to fitness to drive

Essential Features

The three essential features (EFs) below are concerned with the features of you as a doctor which may influence your ability to apply the core competences to real life in the work setting.

Contextual Features

This essential feature is about understanding your own context as a doctor and how it may influence the quality of your care. Important factors are the environment in which you work,

including your working conditions, community, culture, financial and regulatory frameworks.

A Family Physician should:

- Identify moral, ethical and emotional issues relating to the end of life and after death
- Make use of relevant policy and guideline documents that influence healthcare provision for older people
- Recognise how geographical distance influences your support and treatment of older
- Identify the legal issues that may arise in the care of older people, e.g. confidentiality, capacity, power of attorney, guardianship, living wills, death certification and cremation

Attitudinal Features

This essential feature is about your professional capabilities, values, feelings and ethics and the impact these may have on your patient care. A Family Physician should:

- Act habitually to ensure that personal biases regarding the management of risk factors in the elderly do not influence management decisions
- Recognise personal attitudes to the elderly, to the processes of growing old, becoming frail and dying
- Recognise personal attitudes to the use of intensive or invasive tests and treatments and the use of limited healthcare resources in the care of the elderly
- Exemplify a non-judgmental approach to care of the older person so that personal biases do not adversely affect healthcare

Scientific Features

This essential feature is about the need to adopt a critical and evidence-based approach to your work, maintaining this through continuing professional development and lifelong learning. A Family Physician should:

- Apply an evidence-based approach to management of health for older people
- Implement the key national guidelines that influence healthcare provision for older people
- Describe the key research findings that influence management of older people
- Accept the difficulties in extrapolating evidence from research to older people and those with multimorbidity
- Acknowledge the difficulties in designing ethically approvable research

Structured Assessments

Clinical Fellowship Doctors must successfully complete the listed assessments in conjunction with trainer sign off in order to be awarded the associated Clinical Fellowship

Formative Assessments – To be completed in the Training Practice

- Clinical Topic Review (CTR)
- Clinical Case Presentation (CCP)
- Direct observation of non-clinical skills (DONCS)

Summative Assessment – Work Based

- Assessment of clinical expertise (ACE)
 - Assesses the clinical competence of the Clinical Fellowship Doctor taking a history and performing an examination of a patient in order to reach a diagnosis and management plan.
 - The Clinical Fellowship Doctor is assessed in their normal working environment by their trainer. The trainer is responsible for ensuring that the assessment is carried out in an environment that optimises Clinical Fellowship Doctor performance potential without detracting from the reality of clinical practice.
 - The Clinical Fellowship Doctor is assessed by the following criteria:
 - History
 - Examination
 - Communication skills
 - Clinical judgement
 - Professionalism
 - Organisation
 - Level of care

Clinical Fellowship Doctors are required to successfully complete one ACE in each Clinical Fellowship post. If the Clinical Fellowship Doctor does not adequately complete the assessment, the trainer should provide them with feedback and repeat the assessment at a later stage.

Finally all Clinical Fellowship Doctors will be required to complete a 40 minute Oral Examination based on the Core Competencies and Skills outlined in the Older Person's Health Curriculum.

Logbooks

Each Clinical Fellowship Doctor is responsible for maintaining an up-to-date record of progress through training and compiling a portfolio of achievements for presentation at each annual assessment review. The Clinical Fellowship Doctor also has a duty to maximise opportunities to learn, supplementing the training offered with additional self-directed learning in order to fulfil all the educational goals of the curriculum.

The ICGP has developed an evidence based educational guide, for each rotation. Following a DELPHI process, of experts in Irish General Practice Specialist training, a rotation specific guide has been developed. This identifies essential learning experiences and essential skills to be acquired during that rotation. Proficiency in addressing the performance required for each learning opportunity will be assessed by the on-site educational supervisor.

Professionalism and appropriate attitudinal learning will also be documented through this educational guide. Thus the essential knowledge, skills and attitudes will be assessed whilst addressing the evidence based learning opportunities for each learner. The importance of reflection, as an essential element of Adult Learning is recognised and this learning guide will assist each Clinical Fellowship Doctor to optimize their journey through the relevant curriculum. Thus we will ensure that assessment is performed at two levels of complexity. This includes each Clinical Fellowship Doctor's performance as they encounter individual learning opportunities during their work but additionally at the higher level of the fellow's bespoke curriculum pathway.

Up-to-date training records and an ePortfolio of achievements will be maintained by the Clinical Fellowship Doctor throughout. The training records will be countersigned as appropriate by the trainers to confirm the satisfactory fulfilment of the required training experience and the acquisition of the competencies set out in the training plan. They will remain the property of the Clinical Fellowship Doctor and must be produced at their end point assessment review.

Programme Completion

On completion of a twelve month placement, training courses and aligned assessments, Clinical Fellowship Doctors will be awarded a “International Clinical Fellowship in Older Person’s Health”.

All those who have successfully completed the programme shall be invited to attend the annual ICGP Conferring Ceremony where their Certificate will be formally awarded by the Chair of the ICGP.