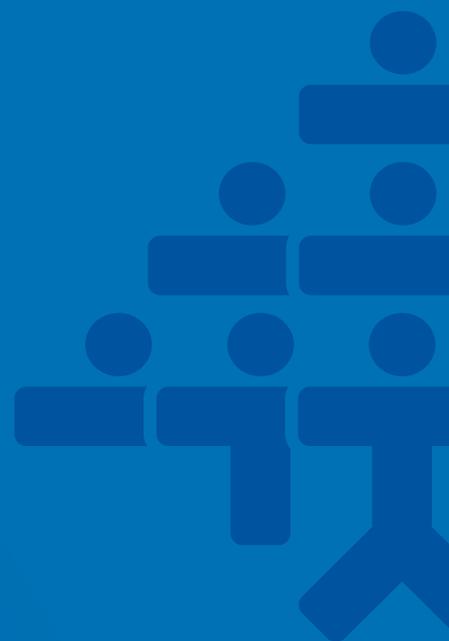

Clinical Fellowship in Endocrine Medicine

Academic Year 2017-2018



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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 Endocrine Medicine in Primary Care

The ICGP has a long history of training and developing clinical specialists in Family Medicine. Through this Clinical Fellowship in Endocrine Medicine in Primary Care, you too can experience bespoke training in a specialist clinical environment. The Clinical Fellowship in Endocrine Medicine in Primary Care takes place over a 12 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 Endocrine Medicine in Primary Care 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 Endocrine Medicine 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 Endocrine Medicine in Primary Care, 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 Endocrine Medicine in Primary Care 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 Endocrine Medicine in Primary Care.

Application and Selection

In order to apply for a Clinical Fellowship Post you must complete the ICGP-CFP Structured CV and Application Form. 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 Endocrine Medicine in Primary Care to offer to our internationally trained medical colleagues.

Embarking on a Clinical Fellowship in Endocrine Medicine in Primary Care 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 Endocrine Medicine in Primary Care 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 Endocrine Medicine in Primary Care you will be able to select and complete two additional ICGP e-Learning modules drawn from the following list (subject to availability):

- Addressing Childhood Weight and Obesity
- Promoting Physical Activity
- Promoting Chronic Condition Self-Management
- Infection prevention and control in family medicine

Structure and Timelines

All ICGP Clinical Fellowships take place over 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 – Endocrine Medicine in Primary Care Curriculum

As technological and business lifestyle changes provision of a higher quality of health care most developed countries are now encountering an increasingly ageing population, with associated health concerns. The incidence and prevalence of endocrine disorders such as type 2 Diabetes is increasing. Similarly, clinical abnormalities of thyroid function are estimated to affect more and more individuals during their lifetime.

The vast majority of care for patients with endocrine disorders is undertaken in Primary Care. The importance of early diagnosis can't be understated as delay in diagnosis is associated with increased morbidity and mortality. As a Family Practitioner you should have an understanding of how common endocrine or metabolic disorders such as diabetes mellitus, thyroid or reproductive disorders can present.

Endocrine disorders are a varied and prevalent group and a Family Practitioner needs always to be aware of them in the asymptomatic patient as well as those with vague symptoms or those with more classical presentations. Education and shared decision making should play a central role in treatment planning.

Biochemical tests can be diagnostic and often necessary for monitoring metabolic and endocrine diseases, so it is important for Family Practitioners to know which tests are useful in a primary care setting and how to interpret these tests and understand their limitations. With a large number of therapeutic agents available for treating, this is an area that can be very challenging.

As Family Practitioners, we must be cognisant that often people with endocrine disorders will often have co-morbid mental health disorders, indeed depression is more common in people with diabetes than in the general population.

Family Practitioners should appreciate the health and medical consequences of obesity including malnutrition, increased morbidity and reduced life expectancy, and have an understanding of the social, psychological and environmental factors underpinning it. They need to be aware of the number of allied health professionals who are invaluable in the management of patients with endocrine disorders.

The following learning outcomes relate specifically to the management endocrine and metabolic problems. In order to 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.) A Family Practitioner should:

- Demonstrate a knowledge of the use and limitations of the investigations available in Primary Care
- Apply an understanding of the cycle of change to lifestyle interventions
- Diagnose and manage Endocrine emergencies in the Primary Care setting, eg hypoglycaemia, DKA, HONC and Addisonian Crisis
- Organise members of the multidisciplinary team in a patient focused manner
- Demonstrate the ability to communicate effectively with colleagues from a variety of health and social care professions
- Develop an understanding of screening and management methods relevant to managing endocrine disorders providing you with the toolkit to develop and replicate the same methods in your home country
- Understand and use the referral pathways available to allow patients to access secondary care
- Explain the importance of the multidisciplinary approach to managing endocrine disorders
- Perform consultations and communicate effectively with patients, presenting information on complex endocrine disorders in an accessible manner

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 Practitioner should:

- Assess the impact of endocrine disorders on a patient's daily life
- Explain the importance of patient motivation in addressing endocrine disorders, especially type 2 diabetes
- Guide the patient and their family through decision making processes in terms of their care
- Recognise the role of the Family Practitioner in empowering the patient to look after their own health
- Adopt practices that encourage patient autonomy and empowerment

Specific problem solving skills

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, and marginalise danger, without medicalising normality. A Family Practitioner should;

- Intervene urgently when patients present with a metabolic emergency, e.g.
- Hypoglycaemia and hyperglycaemic conditions.
- Recognise that patients with metabolic problems are frequently asymptomatic or have nonspecific symptoms, and that diagnosis is often made by screening or recognising symptom complexes and arranging appropriate investigations.
- Demonstrate a logical, incremental approach to investigation and diagnosis of metabolic symptoms.
- Combine available evidence based treatments to manage diabetes, including knowledge of the medications used such as insulin, DPP 4 inhibitors, SGLT2 inhibitors, GLP 1 agonists, along with treatments for cholesterol and hypertension

Comprehensive care

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

- Appraise the Family Practitioner's role in lifestyle modification and disease prevention, in the context of the individual and in society
- Recognise the role of acute and chronic conditions in a patient's clinical condition
- Perform health screening while managing presenting complaints and concerns
- Recognise that patients with diabetes often have multiple co-morbidities and consequently polypharmacy is common
- Develop strategies to simplify medication regimes and encourage concordance with treatment
- Advise patients appropriately regarding lifestyle interventions for obesity, diabetes mellitus, hyperlipidaemia and hyperuricaemia

Community approach

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. A Family Practitioner should:

- Recognise the limited resources available to General Practice, balancing individual's needs with those of the community
- Accept the Family Practitioner's key role in managing endocrine disorders
- Recognise that public health interventions are likely to have the largest impact on obesity and diabetes mellitus, and support such programmes where possible, e.g. fit clubs and walks

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. It is important to note that as this Clinical Fellowship is based in Ireland, your experience will be gained in the Irish Context. You will be able to return home and adapt that experience to meet the social and cultural needs of your personal patient cohort.

A Family Practitioner should:

- Accept the role of co-morbid mental health problems in people with metabolic problems
- Recognise the role of the biological, psychological and social aspects of an individual upon their health
- Recognise long-term metabolic problems, e.g. the risk of depression, sexual dysfunction, restrictions on employment and driving for diabetes

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

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, and culture, financial and regulatory frameworks. A Family Practitioner should:

- Recognise how patient care is affected by the working conditions and resources available to the Family Practitioner
- Empower patients to self-manage their condition, as far as is practicable

Attitudinal

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

- Adapt a consultation style to respond to patient needs that also encourage patient autonomy and empowerment
- Adopt an active role in disease prevention
- Recognise the stigma associated with obesity

Scientific

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

- Practise an evidence based approach to patient care
- Be aware of the advantages and limitations of a multidisciplinary approach

Where the learning will take place

Work-based learning in practice:

- Diabetic watch clinics
- Pharmacy
- Community

Secondary care:

- You can learn about patients with uncommon but important metabolic or endocrine conditions such as Addison's disease and hypopituitarism, as well as about patients with complex needs or with complications of the well as about patients with complex needs or with complications of the more common metabolic conditions
- Diabetic Liaison nurses/and you should take the opportunity to attend specialist diabetes, endocrine and obesity clinics when working in other hospital posts
- You should also consider attending specialist clinics during your time in the hospital

Self-directed:

- E-learning modules
- Research
- Audit
- Special interest Clinics

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 Endocrine Medicine in Primary Care 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 Doctors 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 an "International Clinical Fellowship in Endocrine Medicine in Primary Care".

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.