

STUDY LEAVE GUIDELINES

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GUIDELINES FOR THE APPROVAL OF STUDY LEAVE

1. INTRODUCTION

The UK Conference of Postgraduate Deans (COPMeD) produced and issued "Guidelines for Study Leave" in September 1998 ¹. The Calman reforms to specialist training were implemented by the end of 1997. More recently radical changes in postgraduate medical education and training are underway with the implementation of "Modernising Medical Careers". In May 2004 the British Medical Association's Junior Doctors Committee together with the Trainees' Committee of the Academy of Medical Royal Colleges, issued a position paper on "Valuing learning" ². The Postgraduate Medical Education and Training Board (PMETB) has been established and is now responsible for, among other things, the quality assurance of postgraduate medical education and training.

Following wide consultation in 2005 COPMeD has reviewed its policy on study leave and developed national policy for implementation from 1st April 2006. This policy does not contradict or seek to change the present terms and conditions relating to the amount of study leave and expenses payable, which are governed by national collective agreements.

The nature of study leave

The nature of study leave is very varied. Study leave can be for free-standing local or national courses, local programmes of learning (for example half day release), conferences and private study. Such study leave can be financed through deanery study leave budgets, or directly supported from other deanery budgets. In future it is envisaged that most of the required education and training (including elements covered at present through study leave) will be built into programmes of training.

There is a useful distinction between study (and hence study leave) which may be about learning for career advancement (which may include mandatory and desirable elements, and be linked to curriculum requirements), and skills development required for clinical governance purposes and the doctor or dentist's fitness to practise. Study leave for the latter should be provided by trusts (for example various models of life support training that are an essential requisite assurance of competence to ensure patient safety under the NHS Clinical Negligence Scheme for Trusts). Much, sometimes all, study leave for trainees in General Practice, may be taken up by half day release programmes. Learning support is also provided by Medical Royal Colleges and specialist societies. Trainees may both undertake and support their own learning, and therefore need the skills of identifying their own learning needs.

Principles for study leave

1. A key principle is that study leave continues to have a place for adult learners in postgraduate medical education, training and learning. However, it has also been argued that there is no time to waste on courses that are not essential to training.
2. The responsibility of Postgraduate Deans is for doctors and dentists in training, and not generally for career grades or other health professionals. Postgraduate Deans have only very limited responsibilities (in general practice and dentistry) for Continuing Professional Development.
3. While these principles will apply across all four UK nations, and given that the accountability for any budgetary allocation for study leave rests with local deaneries, local flexibility is essential
4. Continuing professional development stems from a commitment to lifelong learning and should be manifest in a (regularly reviewed and updated) personal development plan (PDP). The contents of such a plan are designed to either help the individual do the job better, or to reach their desired professional goals in the future. There will always be new knowledge and skills to be acquired, and new attitudes to be shaped during a professional lifetime. From an equity

perspective, study leave should be viewed as being linked to the educational needs of the individual, related to the specialty for which that individual is training.

5. Particular training programmes may not be able to offer everything desired or required. For most trainees in most programmes it should be possible to identify broadly what experience should be gained, and what attitudes, knowledge and skills should be acquired, and approximately when. Much of the contribution to be made by study leave, including private study, can then be predicted, and therefore budgeted for (in terms of time and funding), and managed. But flexibility and responsiveness to individual needs should also be maintained.
6. Starting from these assumptions, study leave should:
 - Enhance learning
 - Normally be planned as an integral part of a training programme (which would include work-based and multi-professional learning opportunities)
 - Where offered within a training programme, be accompanied by an expectation that trainees take up these opportunities (70% attendance is commonly required)
 - Be used to provide education and training not otherwise easily acquired in the work place setting
 - For most trainees, include a majority component that is defined as essential for the specialty or programme, with a proportion remaining for tailoring to individual needs; where considered integral to the training programme.
 - Where study leave is integral to a programme, the extent to which this subsumes part of the annual number of days available for study leave should be made explicit e.g. in the programme literature provided during recruitment and selection
 - Routinely be part of the appraisal dialogue, and outcomes may contribute to assessments
 - Be part of the documentation accumulated by doctors or dentists for re-certification.
 - Be quality controlled routinely by deaneries and providers, shown to provide value for money, and be quality assured by the PMETB.
 - Private study leave should serve a very specific defined purpose and it's aims and objectives should be discussed and agreed between educational supervisor and trainee.
7. There are a number of other principles:
 - Those responsible for organising or providing educational opportunities should not set out to make a profit, since this may deprive trainees of further learning opportunities through deanery or personal funding (although it is reasonable to expect actual costs to be covered and include a margin for error or exceptions)
 - Flexible trainees should be treated equitably and will normally have access to study leave pro rata *, and a Personal Development Plan etc conforming to exactly the same principles as other trainees
 - Private study (with time approved as set out above but not funding) may be approved as long as educational principles (for example defined objectives; measured or tested outcomes and evidence of benefit) are complied with
 - There should be educational coherence (i.e. the proposed study leave should be consistent with training needs) to avoid "spending" of an indicative allocation for the sake of it e.g. near the end of a programme with some potential funding unspent
 - Where a course is educationally quality assured (and therefore approved) by one Deanery, this recognition should be accepted in other Deaneries
 - Study leave for trainees who are out-of-programme (OOPE; including those undertaking research) will not be supported financially by Deaneries (since the funding will be required for the trainee filling the post vacated temporarily)

* This will normally mean flexible trainees having an ILA containing the same total funding allowance as a full time trainee but distributed over the length of their part time programme

- Learning through study leave remains the responsibility of the learner, and is agreed through negotiation and agreement. NIMDTA has an explicit local appeals processes to resolve disputes.

References

1. The Conference of Postgraduate Medical Deans of the United Kingdom. Guidelines for Study Leave. COPMeD: London, September 1998.
2. BMA Junior Doctors Committee and the Trainees Committee of the Academy of Medical Royal Colleges. Valuing learning: Funding individual study and professional development for today's doctors in training - a position paper. BMA; AoMRC: London, May 2004.
3. Operational Framework for Foundation Training. London, TSO, 2005. (Paragraphs 158-65) (<http://www.mmc.nhs.uk/download/Operational-Framework.pdf>)

2. STUDY LEAVE ENTITLEMENT

The requirements for, and terms of study leave, should be reviewed within the context of the Terms and Conditions of Service Handbook for Hospital Medical and Dental Staff.

2.1 Specialist Registrars (SpRs)

SpRs are entitled to up to a maximum of 30 days in a year. The study leave year runs from 1 August to 31 July.

SpRs who have obtained CCT and are deemed to be in the Period of Grace are not normally entitled to study leave funding as the training period will have been completed. The Period of Grace is a time of employment to enable trained doctors to seek employment, substantive or locum, as a consultant. It is the Agency's view that study leave funds should be available only to those SpRs who continue in their training towards a CCT

2.2 Specialty Registrars (StRs), Core Trainees and Fixed Term Specialty/Core Training Appointments (FTSTAs/FTCTAs)

StRs, Core Trainees and FTSTAs/FTCTAs are entitled to up to a maximum of 30 days in a year. The study leave year runs from 1 August to 31 July.

2.3 LATs

Trainees in Locum Appointments for Training are entitled to the same terms and conditions as SpRs, StRs, CTs and FTSTAs/FTCTAs.

2.4 LAS Appointments

Locum Appointments for Service (LAS) are not eligible for study leave.

2.5 Less Than Full Time Trainees (LTFTs)

Less Than Full Time trainees are entitled to an annual study leave allowance 'pro-rata' to their sessional commitments. On occasion it may be necessary to extend the study leave allowance in any one year depending on the individual's training requirements. However, the allowance over the entire training programme will remain proportional to the sessional commitment.

2.6 Research Fellows

Research Supervisors should ensure that funding for research by SpRs/StRs includes an element for relevant study leave, including presentation of papers at national and international meetings.

2.7 Foundation Year 1 Trainees

It is a mandatory requirement for Foundation Year 1 trainees (F1s) to attend the Induction Course run by their employing Trust. They are not entitled to study leave, although should be facilitated within working hours to attend organised teaching sessions.

2.8 Foundation Year 2 Trainees

Foundation Year 2 trainees (F2s) are entitled to up to 30 days study leave. This includes mandatory Generic Skills sessions and Taster Modules.

3. STUDY LEAVE ALLOWANCE

The following are not usually part of the study leave allowance:

- Bleep-free teaching time within the Trust in which the trainee is based and NHS initiatives such as Audit, CEPOD and Clinical Governance activities.
- Leave to sit examinations necessary for the career advancement of the trainee in his/her chosen specialty. Usually only two attempts per exam are permitted. Travel expenses may be funded from the study leave budget but not usually for overseas examinations or diplomas.

Examination fees should not be paid and funding for travel/subsistence should normally be limited to two attempts. Study leave should not be granted to a doctor holding a higher qualification to study for and sit the same examination in another centre.

- Postgraduate Certificates, Masters Degree and Diplomas are not normally funded by the Agency, but leave may be considered.

The following will normally be part of the allowance:

- Attendance at Deanery half-day or day release courses including 'Regional Teachings' which take the trainee away from service is counted as part of the entitlement, e.g. when all the SpRs/StRs/CTs/FTSTAs/FTCTAs in the specialty travel to one central Trust or University Department for postgraduate teaching. This will include trainees working in the central Trust provided they are out of service for the duration of the training day or half day.
- Similarly, StRs in General Practice who are required to attend regional training courses, may have this time counted against their study leave allowance.
- Time for private study e.g. to prepare for an examination or to write up research. This should not be approved for periods of more than five working days and should only be granted within the exigencies of the service. Private study leave should serve a very specific defined purpose and its aims and objectives should be discussed and agreed between trainer and trainee.
- In the interests of equity between specialties and training rotations, weekly half-day or full-day sessions for research or private study recommended by Colleges and Faculties should be counted as part of the trainees' study leave allowance. Trainees should agree plans for this time with their Educational Supervisors and provide evidence of objectives having been achieved.
- The time allocation for study leave relates to the number of **working** days missed over the leave period of 30 days. Weekends should only be counted when they coincide with a duty period.

4. MANAGEMENT OF STUDY LEAVE

The proposed use of study leave must be relevant to the individual's educational needs and appropriate to his or her experience. As a general rule study leave should not be granted for courses outside Northern Ireland where an appropriate local course of an equivalent standard exists. The budget for study leave is limited and any reduction in expenses payable should be agreed in writing with the applicant before the study leave is approved. Fees, travelling expenses, subsistence allowance should be agreed in advance, although it is recognised that there will be circumstances when retrospective payment may be unavoidable. Study leave should be planned well in advance and application made at least one month ahead. If written application is made late and insufficient time is given for approval to be considered then study leave may not be granted.

Study leave should be applied for from the hospital the trainee is working in at the time of the course. Where applications are required to be made well in advance of the date of the course the study leave must have the approval of the relevant authorized signatory. This approval does not include funding approval as this is managed centrally by the Training Programme Director at NIMDTA. Where this is not known at the time of making the application, approval must be sought at a later stage.

Trainees should not be expected to do on-call whilst on study leave or the night before study leave as it diminishes the value of study leave to the trainee.

4.1 Specialty Registrars, Core Trainees and Fixed Term Specialty/Core Training Appointments

Trainees should be granted leave to attend courses which are considered to be essential for their level and grade of training (Appendix I). Special consideration should also be given if the trainee is presenting a paper at a national meeting.

4.2 Approval of Study Leave

Applications for study leave must be made in accordance with the study leave policy of the employing hospital. Please contact the Postgraduate Centre in your hospital for more information.

Discretionary study leave may be approved for SpRs/StRs/Core Trainees to attend professional conferences outside the United Kingdom when presenting their own work.

4.3 Approval of Funding

Funding for study leave is approved and managed by NIMDTA.

Mileage and subsistence allowances are paid in accordance with the Terms and Conditions of Service for Hospital Medical and Dental Staff.

4.4 Application Procedure

- Application must be made on the approved form which is available by download from NIMDTA website home page.
- All requests for study leave, regardless of whether costs are involved, must be supported by a completed application form.
- In the event of a study leave request not having support at hospital level it is important that this is indicated on the application form and returned to NIMDTA.
- Applications must be submitted not later than 4 weeks before the date of proposed leave.

- Completed applications must be approved by the authorized signatory in accordance with the hospital study leave policy.
- Applications will be reviewed by NIMDTA before approval is granted.
- Claim forms will be issued on receipt of approval and must be returned to NIMDTA within 4 weeks of return from leave. All receipts must be attached.
- Payment will be made within 30 days of receipt of claim form

5. TIME OUT OF PROGRAMME

NIMDTA will apply on behalf of trainees for approval of periods of time out of programme in accordance with the requirements of the Postgraduate Medical Education and Training Board (PMETB).

PMETB requires the following documents to consider approval of out of programme experience:

- 1 A formal covering letter from the Deanery to PMETB seeking prospective approval of the OOPE post and confirming that this post has Deanery support. PMETB cannot accept applications from individual trainees or colleges/SACs/Faculties without the deanery support.
- 2 Confirmation that the OOPE post has the explicit written support of the relevant Royal Medical College representative(s). Local college representatives must act in accordance with the national policy of their college and should seek advice where necessary from their College to ensure consistent standards across the UK.
- 3 A statement detailing the purpose and structure of the post including confirmation that the post is subject to quality management in line with PMETB requirements. If the OOPE is not to count towards the aware of CCT, PMETB does not need to be consulted.

When a trainee is granted unpaid study leave to a research/clinical post outside the UK, the Trust, in which the trainee is placed prior to embarking on study leave, normally acts as employer and continues to pay the employer's contribution to the trainee's superannuation.

Please refer to The Gold Guide, section 6, for further information on taking time out of programme.

APPENDIX I

POSTGRADUATE COURSES/MEETINGS

LOCAL COURSES

Details of courses organised by NIMDTA are available on the website, www.nimdta.gov.uk

The Management Development Programme for SpRs is a multi-specialty course, attendance at which is considered essential for those in the final year of specialty training of the CCT Training programme.

EXTERNAL COURSES

Courses that are not available locally but are regarded as essential to fulfill specialty training requirements, are listed below. Where courses are considered to be highly desirable but not essential these are indicated. **The list is not entirely comprehensive and other courses may have to be assessed on their own merits.**

Emergency Medicine (Last updated 10/07/2007)

Local

Essential

- Advanced Trauma Life Support (ATLS)
- Advanced Life Support (ALS) (UK Council recognised)
- Advanced Paediatric Life Support (APLS)

Highly Desirable

- Pre-Hospital Trauma Life Support (PHTLS)
- Major Incident Medical Management and Support (MIMMS)
- Regional Training Course for FY2 and ST1 doctors (BCH)
- Emergency Department Ultrasound (Introductory Course)

External

Highly Desirable

- Paediatric Pre-hospital Life Support
- Medicals (external) - Course in Medical Emergencies
- Meetings of the British Association of Emergency Medicine (BAEM)
- Meetings of the College of Emergency Medicine (CAEM)
- Meetings of the Emergency Medicine Section of the Royal Society of Medicine
- Course for MCEM examination

Anaesthetics (Last Updated 10/08/2007)

Local

Essential

- Introductory Course (half day release) (ST1)
- Primary Revision Course (ST2)
- Final FFARCSI/FRCA Course (ST2/3 - after successful completion of primary exam)
- Introductory Course to Basic Science (ST1)
- Basic Sciences Course (ST1)
- Final Revision Course (ST2/3)

- Statistics and Measurement Course (ST1/2)
- Obstetric Course in Anaesthesia & Analgesia (all trainees except ST1)
- Flying Solo Course (ST1)
- Advanced Trauma Life Support Course (ATLS)

Hospital Dentistry (Under Review)

Local

- MFDS Course

A series of lectures to support the PASS syllabus prepared by the Dental Faculties of the Surgical Royal Colleges of Glasgow, Edinburgh and Dublin is in place for those wishing to study for their Membership of the Faculty of Dental Surgery (MFDS) examinations. This programme also supports Parts I and II M.F.G.D.P.(UK).

Various courses and lectures held under the auspices of the Postgraduate Dental Dean are available to those employed in Hospital Dentistry.

External

- M.F.D.S. (Membership of the Faculty of Dental Surgery)

NOTE: All applications for study leave for Hospital Dentistry in Northern Ireland are managed centrally. All applications for study leave should be sent initially to the Adviser in Hospital Dentistry. Study leave forms can be obtained from NIMDTA

General Practice (Under Review)

Local

Essential

- Regional SHO Course on General Practice
- CPR Training
- Family Planning Course

Desirable

- Child Health Surveillance Course
- Minor Surgery Course
- Diploma in Obstetrics and Gynaecology
- Diploma in Child Health
- Diploma in Mental Health
- Diploma in Geriatric Medicine
- Regional Neonatal Resuscitation Training Day

Laboratory Medicine

Chemical Pathology with Metabolic Medicine (Last Updated 22/08/2007)

Essential

- Training Weeks - run by the Association of Clinical Biochemists (ACB) (cycle of six, 2/year)
- Molecular Biology Course - arrangements may be made with Department of Medical Genetics
- Statistical Methods/Informatics - Statistics course in QUB; will require ACB Informatics Course when it commences
- Management - ACP or Keele University Laboratory Management Course

- Focus Meeting - Annual Meeting of the ACB (annual attendance is not essential)
- MSc in Clinical Biochemistry - University of Surrey (Scientists only)
- Intercollegiate Course on Human Nutrition

Desirable

- Any relevant local meetings
- National and International meetings in relevant sub-specialty areas e.g. British Endocrine Society, Diabetes UK, Heart UK, British Inborn and Metabolic Diseases Group etc.

Histopathology/Cytopathology (Reviewed 27.08.08)

External

Essential

- Advanced Pathology Course for MRCPATH Part II, Edinburgh, London, Sheffield, Manchester
- Update Course in Cytology, London, Liverpool, Edinburgh, Birmingham, Manchester

Desirable

- Course in Breast Screening Pathology at Nottingham OR Edinburgh
- ACP courses
- Path Society Courses
- USCAP (IAP) - American or Canadian
- College Update Symposia

Symposia run by the Pathological Society, the International Academy of Pathologists and the Association of Clinical Pathologists (on a selected basis, pertinent to the interests of the individual trainee)

Haematology (Last Updated 28/07/2008)

Essential

- Intermediate Blood Transfusion Course
- Coagulation Course
- Parasitology
- Morphology/Histology (B. Bain)

Desirable

- Advances in Haematology
- MRCPATH Part II Course
- Haemoglobinopathy
- RCPATH Training Days
- Meetings of British Society for Haematology
American Society for Haematology annual meeting

Immunology (Last Updated 23/10/2007)

External

Essential

- Hammersmith Short Course in Immunology
- Supraregional Immunology Training Course
- Paediatric Life Support Course

- Association of Pathologists Training Days
- 3 day teaching at the Protein Reference Unit (Dr Joe Sheldon)
- ACP Training Days
- UKPIN Forum

Medical Microbiology (Updated 27.08.08)

Local

Desirable

- Statistical Methods, Queen's University, Belfast
- Research Methods, Queen's University Belfast

External

Essential

- Medical Parasitology, Liverpool School of Tropical Medicine or London School of Hygiene and Tropical Medicine
- Colindale Course (Infection Control)
- Management for Pathologists, Association of Clinical Pathologists
- Falfield Course on Disinfection and Sterilisation

Desirable

- Hospital Infection Course (modular), Public Health Laboratory Service
- Practical training courses for MRCPPath examination - various UK centers
- Medical Mycology e.g. University of Leeds

Medical Specialties

Core Medical Training (Last Updated 22/08/2007)

Essential

- Part I MRCP (local)
- Part II MRCP (local)
- ALS
- IMPACT

External

- Other courses and meetings appropriate to career intentions and training needs. Training Programme Directors can advise in this respect.

Cardiology (Updated 11.06.08)

- 1 A monthly "Grand Round" to take place initially in the RVH Cardiac Catheterisation lab conference room, starting 1.00 pm on one Friday per month. This will start with a Case Presentation and Discussion. A senior Cardiologist will lead this. The meeting will then continue at 2.00 pm into the weekly surgical conference. It is envisaged that this Grand Round will eventually rotate to other teaching centres, but initially start off on the RVH site.
- 2 Two weekend residential courses giving more in-depth didactic education in specific areas of Cardiology, details to be confirmed.
- 3 A One day "Virtual Reality" training course in stent insertion.

Dermatology (Last Updated 15/08/07)

Essential

- Cambridge Course for Basic Sciences in Dermatology
- Basic Dermatotomy Course (Leeds)
- Dermoscopy Course (RSM, London)
- Evidence Based Dermatology Course (Nottingham)
- Contact Dermatitis Course (Birmingham or Nottingham)
- Phototherapy Course (Dundee or London)
- Dermatopathology Course (Glasgow)
- Paediatric Dermatology Course (Dundee, Liverpool or Birmingham)
- Cosmetic Dermatology Course (London)
- A Management Training Course
- Twice yearly Irish Association of Dermatology Meetings throughout the four years of training
- At least one Annual Meeting of the British Society for Paediatric Dermatology November Meeting
- At least one Annual Meeting of the British Association of Dermatology
- At Least one Annual Meeting of the American Academy of Dermatology in the USA
- At least one Annual Meeting of the European Academy of Dermatovenereology
- At least one Annual Meeting of the British Society for Investigative Dermatology

Highly Desirable

- Thesis Course (London)

Endocrinology and Diabetes (Last updated 10/08/2007)

Essential

- Attendance at continuing medical education arranged by the Irish Endocrine Society on an annual basis
- Attendance at at least one annual meeting of the British Endocrine Societies and of the British Diabetic Association
- NI Training Days in Endocrinology and Diabetes
- Attendance at the Clinical Cases Day of the Society for Endocrinology
- Children's Diabetes Camp

Highly Desirable

- Attendance at other continuing education and scientific courses and meetings at national and international level

Clinical Genetics (Under Review)

External

Essential (annually)

- Quarterly London Dysmorphology case meetings (at least two)
- Clinical Genetics Society Meeting

Essential (not annually)

- British Society of Human Genetics
- American Society of Human Genetics
- Irish Society of Human Genetics
- Cancer Genetics Course
- Skeletal Dysplasia Course
- Basic Genetic Science Course

- Clinical Genetics Management Course
- Counselling Skills Course (Manchester)

Desirable

- Manchester Birth Defects Meeting
- UK Cancer Genetics Group
- Medical Ethics Course/Meeting

Gastroenterology (Under Review)

Local

Essential

- Colonoscopy Course

Genitourinary Medicine (Under Review)

Essential

- Colposcopy Course
- Family Planning Certificate
- Attendance at the Bi-annual Meetings of the Society for the Study of Sexually Transmitted Diseases in Ireland (SSSTDI)
- Attendance at Meetings of the Medical Society for the Study of Venereal Disease (MSSVD)
- Attended the London Universities' Course in STDs and HIV, and acquisition of the Diploma in Genito Urinary Medicine.
- Sexually Transmitted Infections Foundation (STIF) Course

Highly Desirable

- IUVDT
- ISSTDR
- BSCCP and GUM Colposcopy Group
- European AIDS clinical meetings
- International AIDS meetings
- International Society for the Study of Vulval Diseases
- British Society for the Study of Vulval Diseases

Geriatric Medicine (Last updated 10/08/2007)

Local

Essential

- ALS Course
- NIBGS SpR Training Afternoons/Days
- GIM Teaching Afternoons/Days

Desirable

- NIMAST Symposia
- Local RCP CME Meetings
- Annual Associate of Stroke Physicians Meeting

External

Essential

- One of the Two BGS Scientific Meetings per Year

Desirable

- Annual Meeting of Irish Gerontological Society

Nephrology (Last updated 23/10/2007)

Essential

- BCH Regional Nephrology Unit Seminar Series (Postgraduate Centre, BCH)
- Higher Specialist Trainee Programme in Renal Medicine (Department of Nephrology, Level 11, BCH)

External

At least one National and one International Meeting per year from the list of ‘Highly Desirable’ Meetings listed below.

Highly Desirable

- Annual Renal Association Meetings
- Biannual Meetings of the British Transplantation Society
- Annual Meeting of the European Renal Association/European Dialysis and Transplant Association
- Annual Meeting of the American Society Nephrology
- Renal Association Advanced Nephrology Course
- Royal College of Pathologists Diagnostic Renal Biopsy Pathology Course
- Annual Meeting of the Irish Nephrological Society
- Annual Meeting of the Scottish Renal Association
- Senior Registrar Club Meetings

Neurology (Under Review)

Local

- Monthly SpR Training Days
- Weekly Neuroscience Grand Rounds

National and International (not annually)

Essential

- Association of British Neurologists
- Irish Neurological Association
- American Academy of Neurology
- European Neurological Society Meeting
- Edinburgh Advanced Neurology Course

Medical Oncology (Under Review)

Local

Essential

- Postgraduate Oncology Course - Second/Third Year

External

Essential

- Scottish Oncology Course - First Year

Highly Desirable

- Association of Cancer Physicians (ACP)) annually
- Irish Association of Cancer Research (IACR))
- American Society of Clinical Oncology (ASCO)) at least two of these

- European Society of Medical Oncology (ESMO)) during training

Palliative Medicine (updated 11.08.08)

Essential

- **Higher Specialist Trainee Education Programme In Palliative Medicine** (local) - monthly on Friday afternoon - all years
- **Communications Course** - one over period of training
- **Ethics Course / Conference / Education Session** - one over period of training
- **Research Methods In Palliative Care** - one over period of training
- **Advanced Pain and Symptom Management Course** - one over period of training
- **Teaching Course** e.g. NIMDTA teaching course - one during final 2 years
- **Deanery Management Course** (mandatory for all trainees)(local) - one during final 2 years
- **Hospice Management Training Course** (local) - one during final 2 years

Desirable

- Meetings of Doyle Club / Association of Palliative Medicine
- European Association of Palliative Care Conference / Palliative Care Congress / Other Approved International Conference (poster / oral presentation required)
- Irish Association of Palliative Care Research / Clinical Meetings
- Relevant Oncology Master-Class (local)
- National Council Meetings

Rehabilitation Medicine (Under Review)

Essential

- British Society of Rehabilitation Medicine
- Irish Association of Rehabilitation Medicine
- Rehabilitation Medicine for Trainees (Nottingham University)
- Environmental Control Assessment Course - Lincoln (on one occasion)

Highly Desirable

- Internal Medical Society of Paraplegia/American Spinal Injuries Association

Attendance at other:

- National/International Meetings on Traumatic Brain Injury
- International Society of Prosthetics and Orthotics
- National courses organized on use of intramuscular Botulinum toxin for spasticity

Rheumatology (Last Updated 14/08/07)

Essential

ST3 level and above

- ALS course updated every 2 years
- Attendance at SpR training days in Rheumatology (at least 5 per year)
- Attendance at SpR training days in General Medicine for those aiming for dual accreditation (at least 5 per year)
- (A one-off preparatory course for Rheumatology Specialist Knowledge Assessment is likely to be necessary from 2009 for new SpRs at ST4-5 level): mid-training.
- Attendance at Irish Society for Rheumatology meetings on an annual basis
- Attendance at least one meeting of the British Society for Rheumatology or European League against Rheumatism (EULAR) per year

- Regular attendance at the Musculoskeletal Ultrasound course during attachments in Belfast.

Highly Desirable

- Attendance at other continuing education and scientific courses and meetings at national and international level.
- Specialist interest in musculoskeletal ultrasound - attendance at national or international approved courses
- Specialist interest in Sports medicine - diploma course in SEM.
- Specialist interest in Osteoporosis - attendance at approved course in Bone Densitometry; Training for practitioners and operators in radiation protection IR(ME)R; preceptorship in a specialist unit. National and international osteoporosis meetings
- Specialist interest in EMG/Nerve Conduction studies - attendance at approved national courses and participation in specialist clinics.
- Specialist interest in Adolescent Rheumatology (with support of Specialty Training committee) - one year clinical attachment to a specialist unit
- Approved course on research methods & statistics (early stage of training)
- BSR Foot and ankle course
- BSR Advanced course
- American College of Rheumatology annual congress - at least once in training programme.

Therapeutics and Pharmacology (Under Review)

Local

Essential

- Statistical and Research Methods Course (QUB)
- Attendance and Presentation at Meetings of the Cardiovascular Centre
- Involvement in Local and Regional Drugs and Therapeutics Committees, Local Ethics Committees and the Drugs and Poisons Steering Group

External

Essential

- At least one annual meeting of the British Pharmacological Society
- At least one annual meeting of a related Clinical Society - British Cardiac Society, British Hypertension Society, British Diabetic Society, European Association of Poison Centres and Clinical Toxicologists

Highly Desirable

- UK Courses on Drug Epidemiology, Pharmacoeconomics, Pharmacovigilance, Pharmacokinetics and Drug Action
- MSc Course in Medical Toxicology and Recent Advances Course in Cardiff and Birmingham

Obstetrics and Gynaecology (Last updated 10/08/2007)

Local

- MRCOG Part II
- MRCOG Part II Continuous Revision Course
- DRCOG

External

Essential

- MRCOG Part I
- Advanced Life Support in Obstetrics & Gynaecology (ALSO) Course
- Endoscopic Training
- Family Planning

Highly Desirable

- Management of Obstetric Emergencies and Trauma (MOET) Course

The following are occasionally run locally

- Basic Surgical Skills
- Basic Colposcopy Course

Occupational Medicine (Under Review)

External

Highly Desirable

- Course leading to AFOM eg. *Distance Learning Course (University of Manchester, Centre for Occupational Health)*
- Course in Statistics and Research Methods (external, local if available)
- Attendance at the Annual Scientific Meetings of the Society of Occupation Medicine, and Faculty of Occupational Medicine, DUBLIN

Local

Highly Desirable

- Society of Occupational Medicine Meetings

Ophthalmology (Under Review)

Local

- Final Fellowship Revision Course

External

- Moorefield's Course, London
- Basic Microsurgical Skills Course, London (Compulsory for SHOs wef. from 1.4.01)

(Poster/Oral Presentation Acceptance Required)

- Irish College of Ophthalmologists Annual Meeting
- Royal College of Ophthalmologists Annual Meeting
- Oxford Eye Congress
- Annual Symposium and Congress of Ophthalmology
- American Academy of Ophthalmology Annual Congress
- ARVO
- ASCRS

Essential

- Basic Microsurgical Skills Course

Otolaryngology (Under Review)

Local

Year I

- Temporal Bone Course
- Surgical Anatomy of the Nose (Belfast)
- IOS (Irish Otolaryngology Society)

Year II, III & IV

- Basic Rhinoplasty Course
- laser Workshop Course (Omagh)

External

Year I

- Basic Science for Otolaryngology (Dundee)
- Oxford Bath Clinical ENT Course
- Surgical Anatomy of the Nose (London)

Year II, III & IV

- ORS Research Course
- Head and Neck Surgical Course
- Endoscopic Sinus Surgery Course
- Intercollegiate FRCS Course

Year V

- Advanced Otology Course
- Facial Plastic Surgical Course/Advanced Rhinoplasty
- Phonosurgery Course/Voice Restoration
- Microvascular Course
- Skull Base Surgical Course

Paediatrics (Updated 29.8.08)

Level 2 Training (ST4/5) Core Programme

On occasion the College Tutor should have discretion to recommend to the Programme Director that an invitation be extended to an ST3 trainee where the following conditions are met:

- Has MRCPCH Part 2
- None of the eligible ST4/5 would be disadvantaged as a result

Local

- Part II MRCPCH - Only in preparation for the clinical aspects of the examination (**see under external courses in Paediatrics**)
- Emergency Paediatric Life Support (EPLS)
- Evidenced Based Medicine Course - ST4/5 trainees as part of core training
- Advanced Paediatric Life Support (APLS)
- Neonatal Resuscitation (NLS)
- Child Protection courses (Safeguarding Children Levels 1 and 2, and any future specialist modules)
- Child Health Surveillance
- Anatomy of Respect (Child Bereavement Trust)

Highly Desirable

- STABLE Course -(Antrim Hospital)

External

- Part I MRCPCH (PATEST Course)
- Part II MRCPCH - essential for Level 1 trainees before proceeding to Level 2

Community Child Health

- Griffith's or Bayley's Child Development Courses
- Child Protection Training, UK eg. Metropolitan Police Course, Hillingdon, (other Fostering and Adoption courses, UK)
- Neuro-disability courses eg. Institute of Child Health, London

Endocrinology

- Annual British Society of Paediatric Endocrinology & Diabetes
- One day BSPED, RCPCH annual meeting in York
- CPD courses organized by BSPED
- Diabetes UK Annual Professional Conference

Neonatal

- Neonatal Sub-specialty training NLS Course
- Neonatal Cranial Ultra Sound Scan Course in a recognized UK center
- Neonatal Echocardiographic course in a recognized British Isles center

Desirable Conferences

- Irish Perinatal Society
- Northern Ireland Annual CESDI Meetings
- Annual RCPCH and BAPM meeting
- ESPR and European Perinatal Meetings
- Others on the advice of the Programme Director

Nephrology

- Paediatric Nephrology Course at the Institute of Child Health
- Bi-annual British Association of Paediatric Nephrology Meetings

Respirology

- Annual Symposium on Paediatric Respiratory Disease, Sheffield
- Other courses and meetings appropriate to career intentions and training needs. Programme Director can advise in this respect.

Psychiatry (Under Review)

General Professional Training

Essential

- MRCPsych Part I Course
- MRCPsych Part II Course
- Local Psychotherapy Introductory Course
- Balint Group

- Diploma in Mental Health
- Advanced Life Support (ALS)/Approved Resuscitation Course

Higher Training

Essential

- NIMDTA Management course
- Research Methods Course
- Attendance at annual Meeting of Royal College of Psychiatrists (or appropriate Faculty) to present a poster/paper
- Attendance at 1-2 Irish Division meetings (or Faculty meetings) per year
- Attendance at local specialist Faculty meetings
- Safety Training Course
- Training in I.T.
- Training in Teaching Methods

In addition, specialist requirements are:

Child and Adolescent Psychiatry (Under Review)

Essential

- Paediatric Life Support
- Mandatory Academic Training Programme (Dublin)

Desirable

- Relevant modules on local Psychotherapy courses
- Systemic Family Therapy Courses (local)
- Cognitive Behaviour Therapy Course
- Training and Attachment Theory and Assessment
- Griffith Child Development Course (RBHSC one-day)

Psychiatry of Learning Disability (Under Review)

Desirable

- Recognised Child Development Courses
- Local and UK Courses relating to Autism/Asbergers Syndrome
- Conferences on particular subject areas of relevance eg. Behavioural Phenotypes, Down's Syndrome, Attention Deficity Disorder etc.
- Conferences - IASSID, NADD, MHMR, EAMHMR, MAMH, Penrose Society etc. (as recommended by the Learning Disability Higher Training Programme Organiser)
- Courses relating to treatment approaches including - Psychotherapy, Family Therapy, Behavioural Approaches for People with Learning Disability

General Adult Psychiatry (Under Review)

Desirable

- British Association of Psychopharmacology Diploma in Psychopharmacology
- Courses and Training related to Psychotherapeutic treatment approaches

Psychotherapy (Under Review)

Essential

- Personal Analysis

- MA in Psychoanalytic Studies
- Twice yearly meeting of the Specialist Registrar in Psychotherapy Training Group

Desirable

- Diploma in Cognitive Therapy
- Foundation Year in Systematic Family Therapy
- Research Modules 1 and 2 etc.

Psychiatry of Old Age (Under Review)

Desirable

- Two weeks experience in Geriatric Medicine
- Training in Pharmacology of the Elderly
- Exposure to Psychotherapeutic Techniques relevant to the elderly
- Training in relevant Radiology techniques
- Training in Medico-Legal and Ethical Issues of Old Age

Radiology (Last reviewed 28/08/2008)

Local

- Part I FRCR
- Part II FRCR

External

Other courses and meetings appropriate to career intentions and training needs. The Adviser or Head of Training can advise on this.

General Surgery (Under Review)

Local

- Advanced Trauma Life Support (ATLS)
- Core of Knowledge Training (Radiology)
- Basic Surgical Skills Course
- Basic Sciences Course
- Advanced Course in Surgery

Highly Desirable

- Care of the Critically Ill Surgical Patient Course (CCRISP)

External

- Workshop on Basic Surgical Techniques (London)
- Workshops in preparation for the CSIG (Royal College of Surgeons, London)
- STEP Course (distance learning course) - highly desirable for Basic Surgical Training

Cardiac Surgery (Under Review)

External

Essential

- Cardiothoracic Workshop - one day operative workshop (Royal College of Surgeons in Ireland, Dublin)

Desirable

- Applied Basic Science for Cardiothoracic Surgeons. Royal College of Surgeons of England
- National Heart and Lung Institute. Annual Course in Cardiac Surgery (19-23 May 1997)

Neurosurgery (Last updated 10/08/2007)

Local

- Advanced Trauma Life Support (ATLS)

External

Essential

- Specialty Fellowship Course of the Society of British Neurological Surgeons (London) (official refresher course for exit examination)

Orthopaedic Surgery (Under Review)

External

Essential

- Radiation Protection Course
- Advance Trauma Life Support (ATLS)
- Basic Course in Fracture Surgery
- Basic Science Course
- Paediatric Course
- Hand Course
- Annual Meeting of the British Orthopaedic Association (at least one attendance in six years)
- Irish Orthopaedic Association (at least one attendance in six years)

Desirable

- A Hip Revision Surgery Course
- A Spinal Course
- An Advanced Trauma Course

Paediatric Surgery (Last Updated 22/08/2007)

Local

- Clinical Conferences
- Teaching Ward Rounds
- Journal Club
- Audit Meetings (including Morbidity and Mortality Review)
- Radiology Meetings
- Pathology Meetings
- Oncology Meetings
- Clinical Research Meetings
- Antenatal Diagnosis and Counselling Meetings/Clinics

External

Essential

- BAPS Specialist Registrar Training Days (twice a year) - minimum of 6
- BAPS Annual International Meeting - minimum of 2
- Neonatal Course (essential for exam)

Strongly Recommended

- APLS/ATLS Course and Certification
- Paediatric Surgical Specialist Registrar Club (annual)
- BAPS Basic Science Course for Paediatric Surgeons
- Simpson Smith Symposium, London (annual)
- Peter Paul Rickham symposium, Liverpool (bi-annual)
- A Laparoscopic Course
- A Surgical Skills Course (Intermediate/Advanced)
- A Management Course
- An Intensive Care Course
- The Cambridge Paediatric Urology Course
- The Paediatric Surgical Oncology Course

Recommended Meetings

- Society for Research into Spina Bifida and Hydrocephalus
- SIOP/IPSO (International Society for Paediatric Surgical Oncology)
- UK Children's Cancer Study Group
- British Association of Parenteral and Enteral Nutrition
- British Society for Paediatric Gastroenterology and Nutrition
- European Society for Paediatric Urology
- European Paediatric Surgical Society
- Aviemore Course

Plastic Surgery (Under Review)

External

Essential

- Advanced Courses in Plastic Surgery (at least 2 per annum)
- One BAPs Scientific Meeting
- One sub-specialty Meeting eg
The Hand Society
Head and Neck Oncology
The Craniofacial Society
SR Travelling Club (2 meetings per annum)

Desirable - for 3rd year SHOs

- One national course eg microsurgical
- One national meeting if trainee is presenting

Urology (Under Review)

External

Essential

- Annual BAUS Meeting
- Annual Urological Research Society Meeting
- Scientific Basis of Urology Course (attendance mandatory on one occasion, preferably during the first 2 years of training).

Desirable

- BAUS sponsored course eg Paediatric Urology, Basic Urodynamics