Training in Infectious Diseases

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http://www.uems-id.eu/

ECCMID May 2014
Concerned parties

- UEMS
  - European Section of Infectious Diseases
  - European Board of Infectious Diseases (EBID)
  - CESMA, ECAMSQ
- ESCMID including PAS, Education, TAE
- European and national authorities
  - Accreditation of training programmes
  - Specialist registration
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Documents and Forms

Lancet Infectious Diseases 2011: Professional challenges and opportunities in clinical microbiology and infectious diseases in Europe by R.C. Read (linked to PubMed)

ESCMID workshop - ID training (not linked)

Chapter 6, European Training Programme Infectious Diseases

Survey 2006-2007, ID training programmes in Europe (not linked)

Training Logbook Infectious Diseases

Educational Supervisor Report Infectious Diseases

CME Guidelines Infectious diseases, September 1999

EACCME European Accreditation for Continuing Medical Education

A presentation at ECCMID held in April 2012 by Dr Nick Beeching (Liverpool, UK) on "The Role of UEMS infectious Diseases" can be downloaded here.

Infectious Disease Training Curriculum & Assessment Issues for UEMS/ESCMID (Briefing paper presented to the ESCMID

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Joint Subcommittee UEMS (ID) & ESCMID

– Established in 2010 as initiative of ID Section
– UEMS chairs, with a majority of members
– Initial Membership:
  • Nick Beeching (UK), Chair (EBID)
  • Andrzej Horban (Poland) (UEMS)
  • Håkon Sjursen (Norway), President EBID
  • Kate Adams (UK), President TAE
  • Evelina Tacconelli (Italy) (Professional Affairs Officer, ESCMID)
  • Murat Akova (Turkey), ESCMID Education Officer
Functions of committee

– To address issues such as:
  • Expanded Curriculum
  • European Examination
  • Log book/portfolio

– Draft curriculum circulated among section members and final document for submission to UEMS by 2012/3

– Finalising for mid 2014
CESMA

Council for European Specialist Assessment
CESMA

• Initiated by the Section of Paediatric Surgery in Feb 2007
• Proposed the “Glasgow declaration”
• Delegates from all Sections of UEMS and one delegate from PWG
• Harmonisation of the Assessment process in Europe
CESMA Meetings

• Nov 2011/12 Brussels Bureaucratic issues
• May 2013 Istanbul Exam methodology
• Nov 2013 Brussels Training framework
• May 2014 Innsbruck Training trainers, workplace based assessment, log books etc

• Previous emphasis mostly on exit exams
• Difficult to address training quality and workplace based assessment
ECAMSQ

European Council for the Accreditation for Medical Specialist Qualifications
Chapter 6

UNION EUROPÉENNE DES MÉDECINS SPÉcialistes
EUROPEAN UNION OF MEDICAL SPECIALISTS
U.E.M.S.

European Training Charter for Medical Specialists, UEMS 2008

EUROPEAN BOARD OF INFECTIOUS DISEASES

Chapter 6, CHARTER on TRAINING of MEDICAL SPECIALISTS in the EU
Chapter 6 contents

1. Introduction
   1. Monitoring issues, quality assurance, manpower

2. General aspects of training
   1. Selection
   2. Duration of training (2 yrs Internal med, 4 yrs ID)
   3. Structure
   4. Curriculum
   5. Log books
   6. Assessment
   7. Mobility
Chapter 6 contents (continued)

3. Requirements for training institutions
4. Requirements for teachers
5. Requirements for trainees
New Template UEMS 2012/29

• To be completed by each specialty
• Should be revised periodically, at least once every five years (formerly chapter 6)
ID Section/Board discussions 2013

• Common curriculum
• OK but will not change if not compulsory
• Common exam
  – Compulsory European only  yes
  – Extra  probably useful
• Training trainers  strong support, few have it
  • Perhaps use ESCMID support
ID Section/Board discussions 2013

• Workplace based assessments
  – Few have these and few understand it
  – Accept minimal recommendation and menu

• Inspection of training programmes
  – National
  – 50% have something
  – European
  – Use ESCMID centre platform & funds
New curriculum of competencies for an Infectious Disease Physician

• Includes more levels of definition of what training is required in each main objective domain
• Defines for each item the expected
  – Knowledge
  – Skills/competencies
  – Professional behaviour
• Does NOT yet specify levels of competence to be achieved at different stages of training
• Suggests possible methods of assessment of each item
  – Workplace based assessments
  – Examinations
Expansion of curriculum

- All agreed that Clinical Microbiology remains a separate specialty for European definitions.

- But allow combinations within countries eg Turkey, UK.
Objective 1: To obtain clinical competence at a specialist (consultant) level in the assessment, investigation, diagnosis and management of infection

1.1 History taking
1.2 Clinical Examination
1.3 Investigations and Specific Skills
1.5 Interaction with other Healthcare Teams
1.6 Management of Longer Term Conditions
1.7 Patient Safety
1.8 Communication
1.9 Teaching and Training
1.10 Personal Behaviour
1.11 Management and Healthcare Structure
Objective 3: To obtain competence at consultant level in the management of the HIV infected patient and infections in the non-HIV immunocompromised patient

3.1 Infection in the immunocompromised patient

<table>
<thead>
<tr>
<th>Ability to recognise infection in the immunocompromised patient</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Knowledge</strong></td>
</tr>
<tr>
<td>Has a knowledge of the pathophysiology and clinical features</td>
</tr>
<tr>
<td>of infection in the immunocompromised host</td>
</tr>
<tr>
<td>Able to understand the relevance of specific aspects of the</td>
</tr>
<tr>
<td>history and specific physical signs (and their absence)</td>
</tr>
<tr>
<td>Able to understand the utility and limitations of laboratory</td>
</tr>
<tr>
<td>investigations in immunocompromised patients</td>
</tr>
<tr>
<td><strong>Assessment Methods</strong></td>
</tr>
<tr>
<td>SCE, mini – CEX, CbD</td>
</tr>
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<tr>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Skills</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to interpret test results and explain their relevance</td>
</tr>
<tr>
<td>to patients</td>
</tr>
<tr>
<td>mini – CEX, PS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Behaviours</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to consider interaction of psychological and social</td>
</tr>
<tr>
<td>well being on physical symptoms</td>
</tr>
<tr>
<td>mini – CEX, CbD, PS</td>
</tr>
<tr>
<td>Able to demonstrate empathy and appreciate patients</td>
</tr>
<tr>
<td>anxieties</td>
</tr>
<tr>
<td>mini – CEX, MSF, CbD, PS</td>
</tr>
<tr>
<td>Has an awareness of patient’s rights and responsibilities</td>
</tr>
<tr>
<td>mini – CEX, CbD</td>
</tr>
</tbody>
</table>
### 3.6 Multi-Disciplinary Team Working in the Management of Patients Requiring Palliative and Terminal Care

**Ability to work and liaise with a multi-disciplinary team in the management of patients requiring palliative and terminal care**

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understands the spectrum of professional and complementary therapies available e.g. palliative medicine, nutritional support, pain relief and psychology</td>
<td>CbD</td>
</tr>
</tbody>
</table>

**Skills**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates discernment in balancing a scientific and a caring approach to the problem and able to judge when active treatment should stop</td>
<td>MSF, CbD</td>
</tr>
<tr>
<td>Able to work within a multi-disciplinary team</td>
<td>MSF</td>
</tr>
<tr>
<td>Able to give patients effective pain relief and psychological support</td>
<td>MSF, CbD, mini - CEX</td>
</tr>
</tbody>
</table>

**Behaviours**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Assessment Methods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demonstrates a commitment to continuity of care through physical illness to death</td>
<td>MSF, CbD, mini - CEX</td>
</tr>
</tbody>
</table>
Further objectives

- **Objective 2:** To obtain competence at consultant level in the management of Community Acquired Infections (CAI)
- **Objective 3:** To obtain competence at consultant level in the management of the HIV infected patient and infections in the non–HIV immunocompromised patient
- **Objective 4:** To acquire the skills necessary at consultant level to recognise, manage and control health care acquired infection (HCAI), including intensive care (ICU) related infections
- **Objective 5:** To achieve competence at consultant level in the diagnosis, investigation and management of imported infection and the provision of pre–travel health advice
Objective 5: To achieve competence at consultant level in the diagnosis, investigation and management of imported infection and the provision of pre-travel health advice

5.1 Imported Infections
5.2 Health Advice for Travellers
5.3 Infection Related Problems of Immigrants
5.4 Tropical Medicine*

*This is an optional extra and not part of the core curriculum
Objective 6: To obtain an understanding of the role of the Clinical Microbiologist and the importance of Microbiological techniques in Infectious Diseases and to understand the process and constraints around the Microbiological report

Objective 7: To become competent in all aspects of the management of antibiotic use

Objective 8: To obtain an understanding of research and audit methodology and the practical implementation of research and audit projects

For all points in objective 6 where Clinical Microbiology or Microbiological is stated this includes allied disciplines (Clinical Mycology, Parasitology, Virology)
What has been done so far

• Expanded curriculum
  – the expanded curriculum with indicative methods of assessments of competency was presented in Sep 2011 based on UK model, and has been further modified
  – More detailed than many countries have achieved and the assessment methodologies are novel to most countries
  – Feedback has been obtained from ESCMID TAE and also UK trainee feedback on UK model
Assessment of training

• Duration of training  OR
• Competency based

• Log books of attendance & cases
• Workplace based assessments
• Multisource feedback
• Diplomas eg DTM&H, Dip HIV Medicine etc
• Supervisors reports

• Complex portfolios
• Formal reviews (usually annual)
Assessment - examinations

• When?
  – During
  – At the end

• Components
  – Short cases/Long cases
  – Lab work
  – OSCE (different stations)
  – Viva
  – MCQ
  – Essays & short notes
Specialist Examination

- Do we need one?
- What is European exam for?
  - Final pass/fail for accreditation
  - Part of full portfolio as in UK
  - Alternative/extra exam for trainees who want to move
- What format?
- How to write questions based on many national guidelines?
- What language?
- Voluntary or compulsory?
- Cost and frequency?
Examination Framework

- Best of five (trained question writers)
- Exam writing, board and standard setting groups
- Blueprint for exam directed by curriculum
- Sample questions
- Reading list
- Example: ID Specialty Certificate Examination UK

www.mrcpuk.org/mrcpuk-examinations/specialty-certificate-examinations/specialties/infectious-diseases
Current situation

• UEMS ID separate from UEMS Med Micro but parallel process and cross representation
• Harmonising with ESCMID
• Revised “Chapter 6” being circulated for finalisation
• To be on UEMS website before Lubljana conference by end of May
• Submission for UEMS approval late summer
• Trialling ID exam questions by EBID and TAE
Reality check

• National opposition to compulsory European training/assessment regulations
• ID not recognised in some countries
• Cost of “extra” qualifications eg examination for trainees
• No legislation in place to make it compulsory

BUT
• Necessary to improve minimum standards across Europe
Reality check

• Time – slow progress as all are busy with their day jobs

• Resources for implementation
  – Local eg workplace based assessments, training trainers
  – National eg training programme inspections & accreditation
  – European eg costs of examination

• Resources to take process further between UEMS and ESCMID
Proposal

• Project proposal to employ suitable expert to
  – Write documents
  – Coordinate input from all parties
  – Manage project in timely fashion
  – Develop framework and plan for advocacy for implementation

• For discussion over next 2 months and submission to ESCMID for Sep 2014
PA Workshop
Ljubljana, Slovenia, 5–6 June 2014
3rd ESCMID Workshop on Professional Affairs in Clinical Microbiology and Infectious Diseases
The Future of Clinical Microbiology and Infectious Diseases in Europe
References


ID Specialty Certificate Examination in UK
www.mrcpuk.org/mrcpuk-examinations/specialty-certificate-examinations/specialties/infectious-diseases
UK web resources for terminology

Specialty training curricula in infectious diseases and in tropical medicine
www.jrcptb.org.uk/trainingandcert/ST3-SpR/Pages/Infectious-Diseases.aspx

Glossary of terms used including competency assessments
ESCMID & other web resources

Curricula for ID and Clinical Microbiology
www.escmid.org/profession_career/speciality_training/

Trainee Association of ESCMID (TAE)
http://www.escmid.org/profession_career/trainee_association_of_escmid/

UEMS Section of Medical Microbiology
http://www.uems-smm.org