



Transitional arrangements for medical microbiology and medical virology

1. Introduction

The transitional arrangements for medical microbiology and medical virology *have been agreed* and are in line with the GMC position statement [Moving to the Current Curriculum](#) (November 2012).

In August 2015, new medical microbiology and medical virology curricula were implemented. These curricula were approved by the GMC in May 2014 along with those for infectious diseases and tropical medicine. All four curricula require completion of:

- Core Medical Training (CMT) or Acute Care Common Stem (ACCS) and attainment of the Membership of the Royal College of Physicians (MRCP (UK)) examination as an entry requirement.
- a two-year Combined Infection Training (CIT) training period to be tested by a summative examination that combines the content of the current medical microbiology and virology FRCPATH Part 1 and the infectious diseases Specialty Certificate Examination (SCE).
- a period of Higher Specialist Training (HST) in one of the four specialties.

Arrangements for dual training also exist in certain combinations of training. There are separate transitional arrangements for dual trainees in medical microbiology or medical virology with infectious diseases.

It is recognised that because of the change in the entry requirement for medical microbiology and medical virology, not all current medical microbiology and medical virology trainees will have completed CMT/ACCS and MRCP (UK). Furthermore, there will be some trainees who will have completed CMT/ACCS and MRCP (UK) but will have already passed the current medical microbiology and virology FRCPATH Part 1 and will be in Stage C of training or beyond in 2010 curricula. Both groups of trainees will therefore be precluded from transferring to 2014 curricula either because they do not meet the entry requirements or because they have already passed the current FRCPATH Part 1 examination.

The existing 2010 medical microbiology and medical virology curricula have therefore been revised and brought into line as much as possible with the 2014 curricula. The revised 2010 curricula were approved by the GMC in November 2014. Trainees not eligible to transfer to the 2014 medical microbiology or medical virology curricula will be able to transfer to one of the revised 2010 curricula.

These transitional arrangements provide a broad overview of the eligibility criteria for trainees to determine which curriculum they should transfer to and the process for doing so.

2. Broad principles underpinning the transitional arrangements

In providing these transitional arrangements, the following overarching principles apply:



- a. As of 31 December 2015, trainees with FRCPath Part 2 and in their final year of training (including less than full time [LTFT] trainees) may remain on their existing curriculum and will not be required to transfer to either the revised 2010 curriculum or the 2014 curriculum for medical microbiology or medical virology.
- b. Trainees transferring to the revised 2010 medical microbiology or medical virology curriculum must do so by 31 December 2016.
- c. Current trainees transferring to the 2014 medical microbiology or medical virology curriculum must do so by 31 December 2016.
- d. Training under earlier versions of the medical microbiology or medical virology curricula will be recognised and accredited like for like, provided that it has taken place in a GMC-approved programme and assessment of the trainee's portfolio can demonstrate an equivalent level and content of competency and assessment to that required in the revised 2010 curricula or, for those with CMT/ACCS and MRCP (UK), the 2014 curricula.
- e. Trainees who have had OOPT, OOPR or any other periods prospectively approved towards their training by the GMC will have this honoured wherever possible when transferring to the new curriculum. It is anticipated that less than full time trainees will continue with their agreed training arrangements but that a new provisional CCT or CESR(CP) date will be advised if necessary upon transfer to the appropriate curriculum.
- f. Trainees who have made inadequate progress in training evidenced by an ARCP outcome 3 will still be allowed to transfer to the relevant curriculum and assessment system; however they will transfer in at the point at which they last demonstrated satisfactory progress in their training.
- g. From the point at which trainees transfer into a new curriculum, they will
 - have to complete all the subsequent curriculum and assessment requirements of either the revised 2010 or the 2014 curriculum.
 - not be able to revert back to the earlier curriculum from which they transferred.
- h. Trainees transferring curricula who have attempted and failed either the FRCPath Part 1 or FRCPath Part 2 examination will continue to hold their previous attempts at the relevant part of the examination.
- i. Trainees on the 2008 medical microbiology and virology curriculum are most likely to transfer to the revised 2010 curriculum and will be awarded a CCT or CESR (CP) in either medical microbiology or medical virology and not medical microbiology and virology.
- j. It is recognised that there may be a small group of trainees with complicated training histories for whom these broad principles may not apply directly. It is intended that these trainees will be dealt with by the Royal College of Pathologists on an individual basis and that this may require prospective approval for transfer to the appropriate curriculum.
- k. In determining the appropriate point at which to transfer to either the revised 2010 curriculum or the 2014 curriculum, trainees should have a discussion with their educational supervisor and provide them with the appropriate evidence. This evidence includes, but is not limited to:
 - Training portfolio including details of training placements and laboratory/clinical training/experience
 - Educational supervisors' reports
 - Higher degrees / qualifications
 - Proof of attendance at specific training courses
 - Evidence of training approvals e.g. OOPT, OOPR etc.
 - Multi-source feedback and workplace-based assessments
 - Year 1 medical microbiology and virology OSPE attempts/pass
 - FRCPath part 1 examination attempts/pass
 - FRCPath part 2 examination attempts/pass
 - Annual Review of Competence Progression (ARCP) outcomes.

3. Broad arrangements

The broad transitional arrangements are therefore as follows:

- Trainees without CMT/ACCS and MRCP (UK) will transfer to the equivalent point of the revised 2010 curriculum for their respective specialty.
- Trainees with CMT/ACCS and MRCP (UK) and FRCPATH Part 1 will transfer to the equivalent point of the revised 2010 curriculum for their respective specialty.
- Trainees with CMT/ACCS and MRCP (UK) but without FRCPATH Part 1 will transfer to the equivalent point of the 2014 curriculum for their respective specialty.

Please see Appendix 1 for a flowchart outlining the various training pathways and the relevant applicable transitional arrangements.

4. Application procedure

The RCPATH will take an overview of the transition of all single specialty trainees to ensure that the general principles outlined above are followed and advise the relevant Training Programme Directors (TPDs). Trainees should also read the updated transitional arrangements carefully. Their TPD should discuss their way forward with them in the first instance and approach the College to deal with any complex questions if necessary.

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Appendix 1: Training pathways and transitional arrangements

