



Recognition of periods out of GMC-approved training programmes in pathology specialties

Background and applicability

This guidance is applicable to postgraduate doctors in training (PGDiT) who are in a GMC-approved training programme in cellular pathology specialties (histopathology, diagnostic neuropathology, paediatric & perinatal pathology, and forensic pathology), infection specialties (medical microbiology and medical virology), and chemical pathology.

It provides a framework for allowing learning outcomes achieved during periods out of programme (OOP) to be reflected in the expected date for the award of a Certificate of Completion of Training (CCT) by counting some or all of this time towards the total indicative training time. This relates to PGDiT who have acquired substantial capabilities relevant to their CCT curriculum through time spent out of programme for training (OOPT) or research (OOPR).

The 2021 Royal College of Pathologists (RCPATH) specialty curricula emphasise the importance of PGDiT demonstrating achievement of high level learning outcomes, framed as capabilities in practice (CiPs), for the award of CCT. In parallel, there is less emphasis on strict counting of time spent in a recognised training programme in comparison with previous curricula. Previously, OOP periods were approved for training before the OOP period began, with a specific amount of time prospectively recognised towards indicative training time. In the context of capability-based curricula, it is appropriate to retrospectively review OOP periods to confirm that the anticipated learning outcomes were actually achieved.



This guidance is consistent with the extant version of the Gold Guide. In the event that subsequent iterations of the Gold Guide provide support for recognising out of programme experience (OOPE), RCPATH guidance will be updated to reflect that.

Principles for recognising capabilities gained during periods out of a GMC-approved specialty training programme (OOPT/OOPR)

1. There has been a long-established principle of prospectively approving recognition for OOP periods to be counted towards training time for the award of CCT. In light of the change towards capability-based curricula this approach will be improved by assessing curriculum capabilities gained after the OOP period, rather than making a prospective decision to count time towards training without retrospective confirmation.
2. When an OOP period is being planned, in which it is anticipated that substantial capabilities relevant to the specialty curriculum are likely to be gained, it remains useful to prospectively estimate the indicative training time that these capabilities are expected to equate to. However, this estimate should not contribute to the doctor in postgraduate training's projected CCT date until capabilities gained have been confirmed through the ARCP process, upon return to the programme.
3. OOP periods should continue to be categorised and prospectively approved by the relevant Deanery, or equivalent, in accordance with the extant edition of the Gold Guide. The RCPATH will continue to prospectively review and approve OOP periods (when required as set out in the Gold Guide) but will now provide a maximum period which may be counted towards indicative training time. PGDiTs must submit an OOP Notification Form (see link below) for all OOP periods which in some circumstances will also require seeking prospective approval of their OOP.
4. A minimum of 3 and maximum of 12 months OOP can be counted as part of indicative training time but it is not implicit that OOP periods will be counted towards training time. It is not obligatory to count OOP periods towards training time: a PGDiT may



choose whether they wish to ask to have OOP periods counted in this way. Up to two OOP periods may be counted towards indicative training time, to a maximum of 12 months.

5. Determining that all or part of an OOP period can be counted depends upon evidence that the PGDiT has acquired capabilities that demonstrate progression in CiP supervision levels. The amount of OOP time counted towards indicative training time is, therefore, based on the extent of this progression rather than the amount of time spent OOP. During the OOP period, a PGDiT should record in their ePortfolio any activity and relevant assessments that may evidence progression in CiPs. This is equally applicable to both OOPR (e.g. research protocol development, approvals and research outputs) and OOPT (e.g. clinical practice). When a PGDiT has participated in out-of-hours clinical service during the OOP period, uploading evidence of activity and assessments relating to that may also be appropriate.
6. The ARCP immediately after return to the training programme is the final opportunity to have OOP periods counted towards training time. Ahead of the ARCP scheduled immediately after return to the training programme, the capabilities gained should be assessed by either the ES or TPD. This should be carried out by assessing the entrustment level for each CiP.
7. By taking account of progression in CiPs achieved since leaving the training programme, and the expected time to achieve the entrustment level required for each CiP by the end of training, the duration of the OOP period that may be counted towards indicative training time should be calculated. This should be set out in the ES report for the ARCP immediately after return to the training programme. This decision may be supported by the appropriate curriculum gap analysis form (see link below) and, if that is used, it should be uploaded to the ePortfolio.
8. For PGDiT who are expected to obtain dual CCT, the CCT date for both specialties must be aligned. In the pathology specialties, this is anticipated to arise among doctors in Infection training in which case the second CCT specialty would be infectious diseases (ID) or tropical medicine (TM). In these circumstances, the JRCPTB process



for counting OOP periods towards training time should be followed for ID or TM in parallel with the RCPATH process for Medical Microbiology or Medical Virology.

9. The duration of the OOP period that will be counted towards indicative training time should be confirmed by the ARCP panel. The period counted should not be greater than the period prospectively approved by RCPATH. When that decision has been made the CCT date should be adjusted and RCPATH should be notified using the CCT Date Adjustment Form (see link below). The RCPATH will confirm the PGDiT's CCT date and ensure that any OOP periods are recorded for the purposes of notifying the GMC when a CCT application is recommended.
10. When capabilities acquired during a period spent OOP have been recognised in this way, allowing some or all of the OOP period to be counted towards the expected CCT date, this process should not be subsequently reversed. If a decision is taken to delay the CCT date at a later point during training, for any reason, that should be treated as an extension to training and should be effected by an outcome 3 at ARCP.

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