

GP Specialty Training Programme



GP Curriculum

As this forms part of a GP Specialty Training Programme it is important that Trainees work towards the learning objectives of the RCGP GP Curriculum throughout the post.

Main sections covered	10.1
Supplementary sections that may be covered	11

Learning Needs

To help identify learning needs in relation to the GP Curriculum the Trainee should complete the self-assessment rating scale tool.

This should be completed before the initial meeting of the Trainee with their Clinical Supervisor. It can then be used to help identify areas that require development. In this meeting an educational plan for the post can be drawn up that identifies how these learning needs can be addressed and how and when they will be assessed.

Please note that it may not be possible to cover all of the GP Curriculum learning objectives within this post. The GP Educational Supervisor will be able to assist the Trainee in identifying ways to cover these potential gaps as part of the overall GP Specialty Programme.

Assessments and Reviews

During this 6 month post it is the responsibility of the Trainee to arrange the following with their Clinical Supervisor:

- An initial induction meeting reviewing the learning objectives and producing an educational plan (within the first 3 weeks of the post)
- 3 CBD assessments
- 3 mini-CEX assessments
- DOP assessments – as appropriate
- An end of post meeting to discuss your progress and entering the Clinical Supervisor's Report on the e-Portfolio

Please note that this is the minimum requirement for assessments and your Clinical Supervisor may feel that more are required in order for you to meet the required competency areas.

Study Leave

Any study leave must be congruent with learning outcomes of the GP Curriculum and approved by the GP Educational Supervisor. The Trainee is recommended to use up their study leave entitlement within the 6month post and spend as much time as possible in general practice with their Educational Supervisor. This may include their 6 monthly Educational Supervisor review. It is the responsibility of the Trainee to book any study leave with the relevant hospital department.

GP Specialty Training Programme: Learning Objectives & Assessment in O&G

What the Trainee can learn	Assessment Modality		
	CbD	Mini-CEX	DOPS
Knowledge of Management of Emergencies:			
1. Ectopic	✓		
2. Miscarriage	✓	✓	
3. Eclampsia	✓		
4. Bleeding – APH (inc Abruptio), PPH	✓		
5. Ovarian Cyst	✓		
GYNAECOLOGY COMPONENT			
Knowledge of Management of Common Gynaecological Presentations:			
Gynaecology Clinic			
1. Menstrual Problems – PMB/IMB/PCB, Dysmenorrhoea, Menorrhagia	✓	✓	
2. PV Discharge inc PID	✓	✓	
3. Ovarian Problems – Cysts, PCOS	✓	✓	
4. PMT	✓	✓	
5. Continence, Prolapses	✓	✓	
6. Pelvic Pain inc Endometriosis	✓	✓	
7. Vulval Disease	✓		
8. Sterilisation	✓		
9. Gynaecological Malignancy	✓		
10. Infertility	✓	✓	
Social Gynaecology			
Awareness of what involved and options available	✓		
Awareness medico-legal and ethical issues	✓		
Colposcopy Clinic			
What services offer and what patient can expect there			
Specialised Clinics			
Menopause and HRT	✓		
Continence Service	✓		
Others as available locally – CAB (Clinic for Abnormal Bleeding), Vulval (may be joint with dermatology), Infertility	✓		
	CbD	Mini-CEX	DOPS

Sexual Health Clinic (Overlap with Men's Health)			
Contact Tracing – Importance/How to Do or Access	✓		
HIV Pre-Test Counselling	✓	✓	
Psychosexual Counselling – What available and simple strategies	✓		
Family Planning Clinic			
What services offer	✓		
Variety of contraceptive options available – risks and benefits of each, appropriate selection for the individual	✓	✓	
<u>OBSTETRICS COMPONENT</u>			
<u>Specific Knowledge:</u>			
1. Preconceptual Counselling including high risk cases eg Diabetic Mother	✓	✓	
2. Normal Pregnancy and how identify those 'at risk' who need higher level of monitoring	✓		
3. Pregnancy Problems – Experience in Labour Ward, Antenatal Clinic and Day Care	✓		
➔ High Risk Cases – Medical (DM, Cardiac, Epilepsy), Addiction Problems	✓		
➔ Clinical Problems – Bleeding Late in Pregnancy, Abdominal Pain in Pregnancy, Pre-eclampsia and Eclampsia	✓		
4. Post Natal Care – Awareness and Management of Potential Problems including infection and bleeding	✓		
<u>Specific Skills:</u>			
1. Gynaecology and Menstrual History		✓	
2. Obstetric History		✓	
3. Sexual History		✓	
4. Speculum, Smear and Triple Swabs. PV			✓
5. HIV Pre-Test Counselling		✓	
6. Female genital tract examination, breast examination			✓
<u>Appreciation of Roles of Others</u>			
1. Midwife	✓		
2. Incontinence service – specialist nurse, physiotherapy	✓		

How the Trainee can learn

LEARNING OPPORTUNITIES IN HOSPITAL SETTING

1. **Early Pregnancy Assessment Service**
2. **Seeing Emergency Referrals and Admissions – On Call Duties**
3. **Following patient journey** from admission to discharge – involved in ward rounds
4. **Labour Ward**
5. **Day Care**
6. **Outpatient Clinics –** General Gynaecology, Colposcopy
7. **Specialised Clinics and Services** eg, Specialised clinics eg Menopause, Social Gynaecology, CAB, Vulval (may be joint with Dermatology), Infertility, Sexual Health Clinic
8. **Theatre experience –** It is anticipated that theatre experience would be minimal, enabling the trainee to understand and explain what involved in common Gynaecological or Obstetric Operations only eg LUSCS, Hysterectomy
9. **Formal Teaching Sessions**

Educational Plan from to

Trainee:..... email:.....

Clinical Supervisor:..... email:.....

Educational Supervisor:..... email:.....

Learning Needs Identified:

How will these be addressed?

Assessment Planner

Assessment	Focus of assessment	When?
CbD 1		
CbD 2		
CbD 3		
Mini-CEX 1		
Mini-CEX 2		
Mini-CEX 3		
Additional		

Signed & agreed:

Trainee:		Date:
Clinical Supervisor:		Date: