



Paediatric curriculum for excellence

Educational Supervision Guide for Paediatric Sub-Specialty: Allergy, Immunology and Infectious Diseases

.....
*A practical guide for Trainers and
Supervisors*



www.rcpch.ac.uk/progress

This document outlines the Educational Supervision Guide for Paediatric Sub-Specialty: Allergy, Immunology and Infectious Diseases to be used by Trainees and Supervisors.

This is Version 1.0. As the document is updated, version numbers will be changed and content changes noted in the table below.

Version number	Date issued	Summary of changes

The following guide has been produced by PAIID College Specialty Advisory Committee (CSAC) to help support Educational Supervisors who supervise PAIID sub-specialty trainees and guide training centres responsible for the trainees. The CSAC would particularly like to thank the trainee representatives - Nandinee Patel and Aisleen Bennett for their work contributing to this document.

General guidance will be followed by allergy, immunology or infectious disease relevant advice, where this differs between sub-specialities.

Any questions for items within this guide should be addressed to the training advisors who can be contacted via the RCPCH PAIID CSAC web page.

Content

Who are PAIID trainees?.....	4
PAIID sub-specialty application process.....	4
Trainee and Educational Supervisor roles	4
Less than Full Time (LTFT) trainees.....	4
Academic posts	5
Out of Programme (OOP) opportunities	5
The role of the College Specialty Advisory Group (CSAC)	5
ARCPS.....	5
Signing off for CCT	5
Supporting Educational Supervisors	6
Supporting Trainees	6
Feedback.....	6
Induction Meeting.....	6
Supervisor/supervision requirements	7
Annual Review of Competency Progression	8
Supervised Learning Events, Workplace based assessments and curriculum tagging .	8
Curriculum Capabilities	9
Courses and Conferences	9
Study Leave	9
Considerations to acute changes in rota due to unforeseen circumstances	10
Optimising the learning experience in PAIID.....	11
Feedback	11

Who are PAIID trainees?

A Paediatric Allergy, Immunology and Infectious Diseases (PAIID) specialist is a doctor who works across all paediatric age groups to investigate, diagnose and manage infectious, immunological and allergic disorders.

The British Paediatric Allergy, Immunology and Infectious Diseases special interest group ([BPAIIG](#)) is the national group through which trainees are expected to acquire further training opportunities.

PAIID sub-specialty application process

These PAIID trainees will have been selected by the College Specialty Advisory Committee (CSAC) panel through a nationally competitive application process. Therefore, those trainees entering this training pathway will have demonstrated dedication and enthusiasm for this speciality as well as sufficient knowledge, ability and independent achievement to complete this training successfully.

Academic trainees may be directly appointed via the university and apply for GRID equivalence via national selection (as described above) once in post.

Training is by default three years' full time equivalence. Requests for prospective approval of up to one year of training can be made to CSAC prior to application to sub-specialty. No retrospective approvals are possible. Relevant PhDs can be counted towards training with prospective approval for up to one year of training. The CSAC will also consider some time in relevant specialties in GRID approved centres.

Trainee and Educational Supervisor roles

Our trainees are encouraged by CSAC to be adaptive and innovative in their training opportunities in discussion with their local teams to achieve their curriculum capabilities, as well as seeking support early if gaps arise or are foreseen.

The role of the Educational Supervisor (ES) is to nurture and support PAIID sub-specialty trainees to explore and develop the specific areas of interest within their chosen sub-speciality and also the required training in the other strands of PAIID, whilst ensuring they are equipped with appropriate access to resources and experiences to progress through all the allied curriculum areas to a high standard and work competently as a consultant in PAIID.

Less than Full Time (LTFT) trainees

Sub-specialty trainees may be LTFT, however only one trainee can be allocated to each sub-specialty National Training Number. The remainder of the post may be filled by another trainee in a non-sub-specialty training post (SPIN trainees are ideal to co share a slot). Please provide early information regarding weekly activities to allow selection of working days where possible.

Sub-specialty trainees can switch to LTFT at any stage of training and this should be discussed with the Deanery. Trainees are now able to switch to LTFT working without providing a reason for their choice (further information on the [RCPCH LTFT web pages](#)).

Academic posts

From August 2020, nationally recruited (NIHR) Academic Clinical Lectureships (ACLs) are considered “in addition” to the training posts and the clinical rota, and will be allocated Monday-Friday slots only, as they have a different Trust funding stream.

Out of hours work for general paediatric competencies should be negotiated with individual Trusts on a rotation by rotation basis with the ES and trainee. It is an opportunity to help fill gaps in the rota, and avoid the Trust having to employ locums.

Out of Programme (OOP) opportunities

OOPs cannot be requested to start at the beginning of sub-specialty training. If this is required, a deferment should be requested at the time of the initial [sub-specialty application](#). Any OOPs should commence at least six months after commencement of sub-specialty training. Please note there is a possibility that the original sub-specialty training post may not be available after an OOP and this must be taken in to account on application.

OOPs cannot be requested in the final 12 months of training prior to Certificate of Completion of Training (CCT). Up to date information on the variety of OOPs available and when/how to apply is available in the [GOLD guide](#).

If a trainee/supervisor feels a future OOP has the potential to be eligible for time to count towards training, they should **contact the CSAC** to discuss suitability and the process of approval **prospectively**. The CSAC will provide comment on the suitability for time to be counted from a PAIID perspective. General paediatric capabilities also need to be considered, and therefore advice should be sought from the relevant TPD.

Academic trainees cannot undertake OOP. Any additional training needs to be incorporated into their research time or discussed with CSAC and the local deanery.

The role of the College Specialty Advisory Group (CSAC)

ARCPS

- The CSAC will have yearly reviews of each trainee to inform PAIID progress for the deanery ARCP which will rely on the ES report.
- Individual interim meetings between trainees and the CSAC can and will be arranged if concerns about training or career progression are raised by trainee or supervisor.

Signing off for CCT

- The CSAC will be guided largely by ES reports on the RCPCH ePortfolio (induction, mid-point and end of post reviews). Therefore the CSAC depend on the ES' thorough review of the trainee's portfolio and [Supervised Learning Events \(SLE\)](#). Where

applicable concerns must be raised as early as possible, and information provided of any measures you/the trainee's department have made to facilitate progress.

Supporting Educational Supervisors

- The CSAC are always happy to be contacted by ES for advice on the supervision of any PAIID sub-specialty trainee.
- The CSAC will arrange an annual sub-specialty ES online meeting where all sub-specialty supervisors will be invited to attend for a general and an allergy, ID or immunology specific update.
- If you are experiencing difficulties in satisfactorily completing your ES roles in relation to support provided by your Trust (e.g. inadequate protected SPA time for trainee supervision) please contact the CSAC as soon as possible.

Supporting Trainees

- The CSAC will support trainees to proactively interact with their local training teams to maximise access and for the protection of PAIID training activities. The CSAC also undertake a two-yearly trainee survey for feedback on training and training centres to ensure trainees are well supported to successfully complete their sub-specialty or academic training.

Feedback

- We will aim to seek regular (biannual) feedback from our trainees regarding the training process, experience and training centres. This will be summarised, in our annual update, where potential support, new initiatives and solutions can be discussed.

Induction Meeting

At their induction meeting we encourage trainees/supervisors to:

- Review recent PAIID progression, end of placement and Deanery ARCP reports.
- Review remaining PAIID curriculum requirements to focus short and medium-term goals.
- Review any generic paediatric curriculum items in which the trainee may want to gain additional experience.
- Discuss logistics of how/when trainees can schedule rota time for specific curriculum requirements such as:
 - Laboratory experience days
 - Specialist clinic attendance/observation
 - Opportunities for SLEs
- Discussing rotation specifics:
 - Study leave & internal opportunities
 - START plans
 - Expected CCT date, any OOP plans
 - Management & Leadership opportunities
- Discuss academic requirements: ensure that there is communication/alignment between academic supervisor and ES.

For trainees in their **final 12 months** they should ensure that there is a focus on discussing the following areas:

- Opportunities/Inclusion in consultant meetings, consultant management activities.
- Stepping up roles and opportunities specific to that sub-speciality - where registrar activity can be replaced by 'stepping up' activity.
- Signpost to any regional/national NHS management or governance training for new NHS consultants.
- Where feasible protection of time for CCT/consultant role preparation activity, with degree of reduction in some general registrar activities as capacity allows.
- START assessment and opportunities for safeguarding time for any remedial/upskilling activities that may be required.
- Career opportunities, consultant post opportunities and applications.
- Opportunities for additional review of portfolio three to six months in advance of final ES review and report.
- Interest/recommendations regarding completing training early.

Information regarding approaching a [CCT](#) and the [CCT calculator](#) can be found on the RCPCH website.

Supervisor/supervision requirements

Educational Supervisors:

ES for PAIID trainees should have completed their Deanery specific mandated yearly training updates, following their Deanery specific initial training programme to be an ES.

It is recommended that every trainee receives a minimum of one hour a week allocated for one to one supervision. This protected time should be incorporated into your [job plan](#) as a sub-specialty ES as per HEE regulations.

Any training centre approved by the PAIID CSAC should provide the above supervision structure, but fixed sit down sessions may not always be needed. Additional training and supervision may be achieved through discussion and support at MDTs, 15 min reviews at the end of a ward round, telephone catch-ups at the end of a clinic, review of clinic letters before posting, support in preparing for a clinic, joint triaging of referrals etc., and via remote activity.

Area Specific Recommendations

ALLERGY:
<ul style="list-style-type: none">• A minimum of two allergy clinics a week, up to a maximum of four for a FT trainee.• Specified attendance in clinical immunology by means of ward round or clinics which can be paediatric or adult. Trainees also find it useful to organise specific immunology teaching sessions to ensure that they cover curriculum requirements.• Attendance at a broad range of specialist and joint allergy/speciality clinics with dedicated time pre-scheduled into weekly rotas (<u>minimum of five clinics</u> of each of the core allied sub-specialties by the end of the training period). Clinics include, but are not limited to, paediatric gastroenterology, respiratory, dermatology, ENT, ophthalmology, immunology, as well as transition and adult allergy. Weekly MDT, Regional allergy group meetings.

<ul style="list-style-type: none"> Laboratory experience via specific laboratory time, microbiology ward rounds and organised teaching.
IMMUNOLOGY:
<ul style="list-style-type: none"> Minimum of 15 outpatient clinics and 10 MDT in six months, to include two BMT protocol planning meetings and four long-term follow up clinics. Immunology lab time. Defined time for discussion/teaching at the end of ward rounds. Time for discussion/teaching at the end of MDTs. Review of clinic lists pre-clinic, and complex patients/management plans post clinic.
INFECTIOUS DISEASES:
<ul style="list-style-type: none"> Infection control, Antibiotic Review Group/OPAT and Stewardship meetings/rounds. TB, general ID, HIV meetings/clinics, rheumatology/complex respiratory/adding up to 20 clinics per six months. Immunology and microbiology lab time of a minimum of six weeks. Defined time for discussion/teaching at the end of ward rounds and MDTs. Review of clinic lists pre-clinic, and complex patients/management plans post clinic. Review/discussion of external referrals/consults at a defined time each day.

Annual Review of Competency Progression

The CSAC will need completed Clinical and ES reports a minimum of two weeks prior to the ARCP process to allow the CSAC enough time for reviewing progression via the CSAC progression form on the RCPCH ePortfolio.

For trainees taking time out for research, the Out of Programme Research/Academic Supervision form on ePortfolio should also be completed prior to the ARCP. Preparing for your ARCP guidance can be found on the [RCPCH website](#).

Please review synapse page for other required paperwork.

Supervised Learning Events, Workplace based assessments and curriculum tagging

There are no minimum numbers of SLEs. Trainees and supervisors should aim for quality not quantity. A useful SLE will stretch the trainee, act as a stimulus and mechanism for reflection, uncover learning needs and provide an opportunity for the trainee to receive developmental feedback.

Please review the appropriateness of tagged items and completion of the competencies during your mid-point and end of placement review with the trainee. Each SLE or ePortfolio item can only be tagged to one (max two) curriculum item. Multiple tagging will not improve the quality of their portfolio.

Examples of all SLEs can be found within the [PROGRESS curriculum](#).

Curriculum Capabilities

At the start of their rotation, please clarify with the trainee how parts of their PAIID rota can be protected for achieving curriculum capabilities gaining exposure in the other sub-specialist areas – e.g. micro rounds, rheumatology etc.

This should be within allocated clinical days for the trainees. Off days/annual leave/study leave should not be used for these activities. Trainees should not be required to swap into clinics on other days to attend specialist clinics during admin time as this often leads to administrative activities being pushed into OOH activities.

For all trainees

Cancellation of one week blocks of registrar activity at least twice per rotation to allow trainees to organise: laboratory time/clinic observation/ day-case/ adult allergy in those slots.

Cancellation of clinics well in advance for mandatory and essential training specified events.

Secondments in related PAIID specialties must be planned early e.g. immunology experience for allergy, six weeks in immunology for ID and 12 months in immunology for immunology trainees.

Trainees are required to demonstrate evidence of understanding and experience of laboratory tests and investigations found in the trainee's guide to CCT in PAIID.

Courses and Conferences

Trainees must attend 75% of BPAIIG training days, so please consider pre-emptively cancelling all trainee clinics. CSAC will aim to send these dates to you in advance, and dates can also be found on the [BPAIIG](#) pages.

These training days and learning points should be recorded using development logs in the RCPCH ePortfolio.

Trainees may be supported by their Deanery to attend up to one international conference in their Level 3 training. Early discussion of study leave requirements can facilitate administrative team arrangements.

Study Leave

Trainees can use the following codes for requests for study budget:

Mandatory course: Use code PAED0015

Optional course: Use code PAED0004

Study leave process: <https://lasepgmdsupport.hee.nhs.uk/support/home?studyleave>

Study leave FAQs: <https://lasepgmdsupport.hee.nhs.uk/support/solutions/7000016490>

NB. Trainees are NOT required to request study leave for: laboratory visits and experience, observing in specialist clinics or any other items listed within the curriculum requirements for PAIID competencies. These activities should be arranged within the trainee's PAIID rota.

Although not mandatory we recommend trainees are supported to attend the following:

ALLERGY:
BSACI annual meeting, BSACI trainee days, EAACI/PAAM/FAAM meetings European allergy exam: http://www.eaaci.org/activities/eaaci-exam/upcoming-exam.html We encourage trainees to undertake the EAACI exam. Please support trainees in the attendance of conferences associated with the exam as possible (e.g. submission of abstract for qualification for junior member travel scholarship)
IMMUNOLOGY:
UK PIN (Primary Immunodeficiency Network) bi-annual meeting ESID (European Society of Immunodeficiency) bi-annual meeting ESID Summer school https://esid.org/In-Focus/ESID-Summer-School-2019 Advanced Immunology Winter school https://esid.org/News-Events/Scientific-meetings/Advances-in-Primary-Immunodeficiency-Winter-School
INFECTIOUS DISEASES:
ESPID www.espid.org ; ECCMID/ESCVID www.escmid.org Oxford Hot Topics in Infection and Immunity in Children https://www.paediatrics.ox.ac.uk/upcoming-events/event-1 Paediatric ID diploma/MSc: https://www.conted.ox.ac.uk/about/pgdip-in-paediatric-infectious-diseases

These training days and learning points should be recorded using development logs in the RCPCH ePortfolio. The CSAC encourage reflections based on all learning events.

Considerations to acute changes in rota due to unforeseen circumstances

Change in weekly timetabled activities:

The CSAC recognises that since mid-2020 the previously stated trainee weekly schedules submitted by sub-specialty training centres (during sub-specialty centre applications) may have had to undergo substantial changes, including reduced face-to-face outpatient speciality activity and reduced time within speciality. RCPCH guidance can be found [here](#).

ES may support trainees through:

- Advocating for sub-specialty trainees (if redeployed) to be prioritised for return to at least some sub-speciality activity.
- Undertaking SLEs related to PAIID with trainees based on patients seen during redeployment.
- Building in a transition phase of return to the full sub-speciality timetabled activities, which allows trainees to catch up on any lost time for specific PAIID activities e.g. Laboratory visits, observing specialist clinics.

The CSAC are happy to consider accepting different and innovative ways of accomplishing the curriculum competencies. Please consider:

- Joining consultant video/phone clinics or specialist nurse clinics in the virtual format.

- Trainees can arrange to catch up with an adult speciality senior trainee/consultant to discuss patients from their adult clinic list.
- Arrange a virtual session with the laboratory team or when laboratory teams may be arranging virtual teaching.
- Join a virtual 'Micro round' or 'AMS board round' or ward round with any allied specialty.
- Any format of 'clinic' or patient reviews (video, audio, face-to-face) can count towards clinical experience.
- Virtually join in on a Hub clinic (where consultant is supporting a GP).
- Arrange to virtually join allied speciality teams when they triage outpatient referrals - if these are timetabled department activities (can be used as CBD opportunity).
- Webinars in related specialties.

Optimising the learning experience in PAIID

ES can help to maximise the achievement of their trainee potential through:

1. Facilitating ease of access to experiences and resources required for their training. Optimise learning opportunities, creating a good learning environment and being creative in learning experiences.
2. Supporting the development of their interest areas where capacity allows.
3. Highlighting areas where targeted upskilling may be required and supporting personal development in these areas.
4. Overseeing sustained achievement of generic paediatric capabilities.
5. Capitalising on peer observation and feedback also including that of other health professionals and colleagues.
6. Ensuring adequate meetings with trainees to check progress and develop educational reports for CSAC reviews and ARCPs.

Feedback

The PAIID CSAC is committed to supporting ES and PAIID training centres to support trainees to continue to complete their PAIID training to an exceptional level as services continue to adapt in this time.

Therefore, if you have any suggestions, issues or think of anything you feel the CSAC can support you, other ESs, training centres or trainees with, do please reach out to any of the CSAC team.