

Geriatric Medicine

This guidance is to help doctors who are applying for entry onto the Specialist Register with a CESR in Geriatric Medicine. You will also need to read the [Geriatric Medicine Curriculum documentation](#)

Can I get advice before I submit my application?

You can [contact us](#) and ask to speak to the Specialist Applications team for advice before you apply.

What is the indicative period of training for a Certificate of Completion of Training (CCT) in Geriatric Medicine?

The indicative period of training for a CCT in Geriatric medicine is seven years and few applicants would achieve the competencies required for a CCT in a shorter period of time.

The structure of the programme is an indicative two years in Core Medical Training or Acute Care Common Stem (ACCS), followed by an indicative five years of training in Geriatric Medicine. Therefore you need to demonstrate that you have achieved the competencies in each of these areas.

For complete details please refer to the [Geriatric Medicine Curriculum documentation](#).

Submitting your evidence

Do not submit original documents.

All your copies, other than qualifications you're getting authenticated **must** be accompanied by a pro-forma signed by the person who is attesting to the validity and accuracy of your evidence (your verifier). It's very important that you read an explanation of how to do this in our [important notice about evidence](#).

You will also need to submit translations of any documents that are not in English. Please ensure the translations you submit meet our [translation requirements](#).

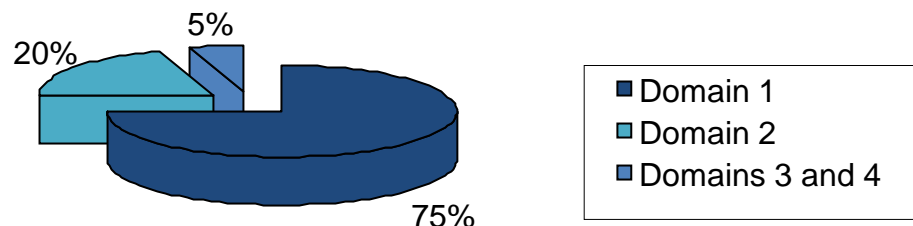
How much evidence to submit

This guidance on documents to supply is not exhaustive and you may have alternative evidence. We recognise that you may not have all the evidence listed here and you may wish to delay submitting an application until you are able to gather it.

Your evidence **must** cover the knowledge, skills and qualifications to demonstrate the required competencies in all areas of the [Geriatric Medicine Curriculum documentation](#). If evidence is missing from one area of the curriculum for example, then the application is likely to fail.

If you have a piece of evidence that is relevant to more than one domain, do not include multiple copies in your bundle. Instead, include one copy and list it in your evidence list under each relevant area, stating that the document is located elsewhere. (For example you might state: "document included in teaching and training section, please cross reference".)

Evidence breakdown



It will help us to deal with your application more quickly if you make sure that you send us only evidence that is directly relevant.

Our guidance on compiling your evidence will help you to decide what is relevant and what is not. We recommend that you read it carefully.

Evidence that is more than five years old will be given less weight than more recent evidence, so you may not need to include it. You shouldn't need to provide more than around 800 - 1000 pages of evidence to demonstrate you meet the requirements of the curriculum. The quality of your evidence will hold more weight in your application.

Types of evidence are divided into four different domains. We recommend that you apportion the evidence you provide with your application as shown in the pie chart.

Domain 1: 75%

Domain 2: 20%

Domains 3 and 4: 5%

It is important to note that you will not be able to compensate for shortfalls in your evidence of training and experience in a particular area of the curriculum by providing extra evidence in other areas.

A message from the Specialist Advisory Committee (SAC) in Geriatric Medicine

Before making your application for CESR in Geriatric medicine you are encouraged to review this document in conjunction with the CCT curriculum in Geriatric medicine. You will need to ensure, through the documentary evidence you provide, that you have demonstrated equivalence to the standards set out in the curriculum.

Some of the common reasons why applications are unsuccessful include:

1. Core medical training competencies: CESR applications in Geriatric medicine need to demonstrate core medical knowledge and an application of this knowledge in practice. MRCP (UK) is the most effective way to demonstrate core medical knowledge; however this alone is not sufficient to demonstrate the breadth of core competencies. In order to demonstrate core competencies applicants need to provide:
 - MRCP (UK) and evidence showing the application of core skills. This evidence could include supervised learning events (SLEs)/workplace based assessments (WPBAs), multisource feedback (MSF), quality improvement projects and direct observation of procedures (DOPS).Or
 - Evidence of rigorous evaluation of core knowledge and clinical skills either by examination or suitable alternative assessment (to the same level as MRCP (UK) or above) and evidence showing the application of core skills. This evidence could include supervised learning events (SLEs)/workplace based assessments (WPBAs), multisource

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Please make sure you are reading the latest version. You can find all the guidance you need at www.gmc-uk.org.

feedback (MSF), quality improvement projects and direct observation of procedures (DOPS).

2. Failure to pass the Specialty Certificate Exam (SCE) in Geriatric Medicine
3. Lack of evidence of formal assessments
4. Submitting evidence from more than five years ago with no recent supplementary information
5. Failure to display evidence clearly – it is vital that your evidence is well organised and clearly structured. You should clearly indicate where in your application the evidence referring to a particular competency can be found. As part of your application you should fill in column four of appendices A,B and C carefully and completely and submit it with your bundle of evidence

Please refer to APPENDIX [A](#), [B](#) AND [C](#) for further details of required competencies.

Anonymising your evidence

It is important that you anonymise your evidence before you submit it to us. You must remove:

- All patient identifying details
- Details of patients' relatives
- Details of colleagues that you have assessed, written a reference for, or who have been involved in a complaint you have submitted.

This includes:

- Names (first and last)
- Addresses
- Contact details such as phone numbers or email addresses
- NHS numbers
- Other individual patient numbers
- GMC numbers

The following details don't need to be anonymised:

- Gender
- Date of birth

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It is your responsibility to make sure that your evidence has been anonymised. Evidence which has not been anonymised will be returned to you. More information can be found on our [website](#).

Domain 1 - Knowledge, skills and performance

Qualifications

<p>Primary medical qualification (PMQ)</p>	<p>If you hold full registration with us, you do not need to submit your PMQ as we saw it when we assessed your application for registration.</p> <p>If you do not hold registration, you will need to have your primary medical qualification independently verified by ECFMG before we can grant you full registration with a licence to practise.</p> <p>You can find out more about primary source verification on our website.</p> <p>You only need to get your primary medical qualification verified by ECFMG. The rest of your evidence should be verified in line with our guidance.</p>
<p>Specialist medical qualification(s)</p> <p>Please provide an authenticated copy of any specialist medical qualifications you hold.</p>	<p>For College examinations the College may confirm details of any examinations you have undertaken.</p> <p>Applicants must demonstrate an appropriate test of knowledge to that required for the CCT which is the Specialty Certificate Examination in Geriatric Medicine.</p> <p>The College has curricula and syllabi for the following:</p> <ul style="list-style-type: none">• A Competency Based Curriculum for Specialty Training in Geriatric Medicine. <p>If your Specialist qualification is covered by this document then curricula/syllabi do not need to be submitted with your application.</p> <p>There are no qualifications from outside Europe that enable automatic entry to the Specialist Register in any specialty. An evaluation is made based on an applicant's whole career and therefore two applicants with the same qualifications but different training and/or experience may not receive the same decision.</p> <p>Please list unsuccessful attempts at examinations (where you have not subsequently been successful) in the application form.</p>

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<p>Curriculum or syllabus (if undertaken outside the UK)</p>	<p>Please provide a copy of your curriculum or syllabus.</p> <p>This should include the requirements of the qualification and must relate to the specialty in which you are applying. The curriculum or syllabus (including assessment methods) must be the one that was in place when you undertook your training.</p> <p>If a formal curriculum or syllabus (including assessment methods) is not available please provide a letter from the awarding body outlining the content of the training programme or examination.</p> <p>For qualifications, we will look to evaluate:</p> <ul style="list-style-type: none"> • where the curriculum covers areas of the CCT curriculum • the complexity of the work undertaken • how examinations are evaluated or quality assured (external assessment). <p>The JRCPTB does not currently have any of documents relating to overseas training programmes and therefore applicants must supply these.</p>
<p>Specialist registration outside the UK</p> <p>Please provide an authenticated copy of details of the registration requirements of that authority.</p>	<p>This will demonstrate what is expected of a registrant by that authority and how your application for registration was evaluated.</p> <p>The JRCPTB does not currently have any of documents relating to specialist registration outside the UK and therefore applicants must supply these.</p>
<p>Honours and prizes</p>	<p>Please provide copies of certificates or letters showing what the prize or honour was for, including the selection and eligibility criteria and pool of eligible individuals.</p> <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.</p>
<p>Other relevant qualifications and certificates</p>	<p>Please provide copies of certificates.</p> <p>For example: degrees or diplomas in relevant areas such as management, business, IT, communication, education or law.</p>

Assessments and appraisals

Appraisals and assessments	<p><u>Appraisal</u></p> <p>All applicants must submit evidence of engagement with the appraisal process. For non-training posts you should provide evidence of ongoing evaluation of your performance.</p> <p>This may take the format of formal appraisals by the department head or line manager (clinical director, medical director, professor).</p> <p>In the UK, a revalidation or appraisal portfolio would be appropriate (if it is completed retrospectively less weight will be given to the information provided).</p> <p>For those applicants working in independent practice it is recommended that an annual appraisal for the last five years is provided and summary documentation of this submitted with the application. Those working in a NHS or managed environment should submit evidence of annual appraisals. Where an applicant is not based in the UK alternative forms of appraisal are strongly advised.</p> <p>Alternative evidence may include letters (written at the time) commenting on your performance. In addition where no formal appraisal or assessment forms are available you must provide information on the method of career review or progression There are many different forms of assessment which form part of the various CCT curricula. Many of these tools are available for those not in training to use.</p> <p><u>Assessments</u></p> <p>Supervised learning events (SLEs) should be performed by a number of different appropriate assessors and include structured feedback and action plans to aid personal development. Your evidence should include:</p> <ul style="list-style-type: none">• 30 Mini-CEX• 30 CbDs• 5 ACATs <p>or equivalent</p> <p>You should refer to the Geriatric Medicine ARCP decision aid, the common competencies (Appendix A) and the core curriculum grid (Appendix B) for further information.</p>
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RITAs, ARCPs and training assessments	<p>Formal records of assessment have been in place in the UK since 1996 (for posts of Registrar, Specialist Registrar, and Specialty Registrar). If you have undertaken training in the UK in these grades you should provide a copy of your formal records. In addition if you held any of these approved training posts (except locum posts), please provide evidence of your training number.</p> <p>If you have undertaken training outside the UK you must provide evidence of formal periodic assessment during your training, for each year of training undertaken This evidence must have been completed at the time the training was undertaken (if it is completed retrospectively less weight will be given to the information provided). If you do not supply formal assessment documents, you must provide the curriculum to demonstrate how you were assessed. A detailed letter of verification from an educational supervisor would satisfy this requirement.</p> <p>If that training was recognised by relevant authorities outside the UK please provide evidence and recognition standards.</p> <p>If areas for development were highlighted please provide evidence to demonstrate that you have subsequently addressed them There are many different forms of assessment which form part of the CCT curriculum. Many of these tools are available for those not in training to use, e.g. via e-portfolio use and structured educational supervisor reports</p>
360° and multi-source feedback	<p>You should submit a minimum of 2 completed Multi-Source Feedbacks, or equivalent. There should be a minimum of 12 raters, including 3 consultants and a mixture of other colleagues of all levels (peers, nursing, auxiliary staff, patients, management). Ideally these would be in the form of multi-source feedback (MSF) assessment and patient surveys, which are available on the UK e-portfolio and may be in the format of letters, references for posts applied for etc.</p> <p>Template forms for MSF are available on the JRCPTB website document library - https://www.jrcptb.org.uk/document-library. Evidence from alternative systems used within the UK or overseas based on a similar methodology will be considered and evaluated individually.</p>
Awards and discretionary points letters	<p>You must provide copies of certificates and letters.</p>
Personal development plans (PDP)	<p>For details of what to include please see NHS appraisal information</p> <p>You must also provide evidence of review of your PDP at appraisal. PDPs normally form part of your annual appraisal system and you should submit them with appraisal documentation.</p>

Logbooks, records of daily clinical practice and portfolios

The evidence you supply here **must** demonstrate that you have achieved **all** the requirements and competencies as set down in the CCT curriculum for your specialty.

Where you have, for a substantial period of time, worked in a specialised area, you should submit evidence that at one stage in your career you achieved the requirements and competencies of the curriculum for your specialty and that have maintained these skills. You will also need to provide evidence that your current specialised practice allows you to meet all of the requirements of [*Good Medical Practice*](#).

Logbooks

All patient names (first and last), contact details (including full address) and any patient ID numbers (such as NHS numbers or hospital numbers) must be removed from your evidence before you submit it to us.

Photocopies of operating lists and theatre record books are not satisfactory evidence of procedures. If you did not complete a logbook at the time you undertook the procedures, you should create a logbook from the information you have. It should contain the following information:

- only procedures that you were personally involved in
- age and gender
- date of the procedure
- full name of the procedure
- your role in the procedure (assisted, performed personally, performed under direct supervision of someone more senior, supervised a junior)
- any critical incidents
- name of the hospital or clinic where procedure was performed
- outcomes data.

For guidance on the most appropriate format for your logbook please refer to www.jrcptb.org.uk where you can obtain a copy of the electronic logbook.

Keeping a logbook as part of everyday practise is recommended. Those who have not completed a log book as they have gone along and are unable to create one, as listed above, should provide educational supervisor reports, evidence of completed WPBAs and courses attended.

Those that have been working less than full time should demonstrate (normally through their log book) that they have undertaken pro rata duties including on-call and other out of hours commitments) required of their full-time colleagues.

It is important that these cover the full range of the curriculum demonstrating the breadth and depth of the specialty. This may mean that you have to go back further than 5 years, although evidence within the last 5 years will be given more weight. Please do not provide logbooks from more than 7 years ago.

All evidence in this area **must** be **anonymised** for individual patient data.

<p>Consolidation, cumulative data sheets, summary lists and annual caseload statistics</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You should provide a summary of the total numbers for the various procedures listed in the logbook. This should be completed annually and include your role in the procedure.</p> <p>It is important that the logbooks cover the full range of the curriculum demonstrating the breadth and depth of the specialty. This may mean that you have to go back further than five years.</p>
<p>Medical reports</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You should provide examples across the breadth of your practice following the Academy of Medical Royal Colleges and NHS agreed format:</p> <p>Standards for the clinical structure and content of patient records</p> <p>You can use these to demonstrate:</p> <ul style="list-style-type: none"> • your involvement or role in cases • the types and complexity of cases you are involved in • your handling of patient paperwork • your respect and protection of confidential information • triangulation with logbook information.

<p>Case histories</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>Case histories that you provide should include:</p> <ul style="list-style-type: none"> • dates • diagnosis • nature of your involvement in the management of the case • which curriculum competencies were involved. <p>You can use these to demonstrate:</p> <ul style="list-style-type: none"> • your involvement or role in cases • the types and complexity of cases you are involved in • your handling of patient paperwork • your respect and protection of confidential information • triangulation with logbook information.
<p>Referral letters discussing patient handling</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>Please provide a variety of copies of letters to cover all aspects of your work and to demonstrate the breadth of your practice. This may include examples of letters:</p> <ul style="list-style-type: none"> • requesting a second opinion • advising clinical colleagues or answering particular questions regarding patient management • from clinical colleagues regarding applicants involvement in patient management. <p>You can use these to demonstrate:</p> <ul style="list-style-type: none"> • your involvement or role in cases • the types and complexity of cases you are involved in • your relationship with your colleagues in other disciplines • your handling of patient paperwork • your recognition of the limits of your professional competence • your respect and protection of confidential information.

<p>Patient lists</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You may wish to include copies of patient lists. You can use these to demonstrate:</p> <ul style="list-style-type: none"> • your involvement or role in cases • the types and complexity of cases you are involved in • your participation in teaching and training (where you are supervising a junior colleague) • the volume of cases you undertake • triangulation with rota, timetable and job plan information • triangulation with logbook information.
<p>Departmental (or trust) workload statistics and annual caseload statistics</p>	<p>You can use these to demonstrate:</p> <ul style="list-style-type: none"> • the size of the hospital in which you work • the volume of work undertaken within your trust and the percentage that you undertake • the range of work that you undertake and that is undertaken within your trust • triangulation with logbook information
<p>Rotas, timetables and job plans</p>	<p>Where you have undertaken a number of roles provide details for each post or role. You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> • details of clinical and non-clinical duties you undertake • your on-call commitment • your participation in meetings and teaching • triangulation with logbook information.
<p>Courses relevant to curriculum</p>	<p>You must provide evidence of the following:</p> <ul style="list-style-type: none"> • Valid ALS certificate • Management training and leadership skills course • Teaching course certificate, or equivalent <p>Any overseas courses will be evaluated in line with UK courses.</p>

Portfolios (electronic or revalidation)

Do not submit your whole portfolio. You need to separate the evidence in it and submit that under the correct headings as set out in this guidance.

Details of posts and duties (including both training and experience posts)

Employment letters and contracts of employment	<p>The information in these letters and contracts must match your CV. They will confirm the following:</p> <ul style="list-style-type: none">• dates you were in post• post title, grade, training• type of employment: permanent, fixed term, or part time (including percentage of whole time equivalent). <p>The content should include evidence of the different work environments/settings defined in the curriculum.</p>
Job descriptions	<p>These must match the information in your CV. They will confirm the following:</p> <ul style="list-style-type: none">• your position within the structure of your department• your post title• your clinical and non-clinical commitment• your involvement in teaching or training. <p>The content should include evidence of the different work environments/settings defined in the curriculum.</p>

Job plans	<p>Where you have undertaken a number of roles, provide details for each post or role. You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• the main duties and responsibilities of the post• your out of hours responsibilities, including rota commitments• that you have covered for colleagues' periods of leave• any professional supervision and management of junior medical staff that you have undertaken• your responsibilities for carrying out teaching, examination and accreditation duties• your contribution to postgraduate and continuing medical education activity, locally and nationally• any responsibilities you had that relate to a special interest• requirements to participate in medical audit and in continuing medical education• your involvement in research• your managerial, including budgetary, responsibilities where appropriate• your participation in administration and management duties.
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Research, publications and presentations

Research papers, grants, patent designs	<p>Please include any research relevant to your current practice.</p> <p>If the research is published - please submit the first page of the published paper.</p> <p>If the research is not published - please provide a summary or abstract of the research.</p> <p>Colleges may undertake web searches to check the information you provide.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• the types and complexity of cases you are involved in• triangulation with logbook information• training in research methodology and/or conduct research• working with colleagues (where research is joint or multi-disciplinary)• Continuing Professional Development (CPD). <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.</p>
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<p>Publications within specialty field</p>	<p>Include a copy of the front page of each publication.</p> <p>More weight is given where:</p> <ul style="list-style-type: none"> • the applicant is first author • the publication has a high impact factor. <p>You should provide evidence of having contributed to the production of clinical guidelines (local or national).</p> <p>You must not change the listing of the authors (the order in which the authors are listed) in papers where there is more than one author.</p> <p>Colleges may undertake web searches to check the information you provide.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> • the types and complexity of cases you are involved in • triangulation with logbook information • working with colleagues (where publications are joint or multi-disciplinary) • CPD. <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge:</p>
<p>Presentations, poster presentations</p>	<p>You may wish to supply invitations to present at national or international meetings to demonstrate your recognition within your specialty. You may also supply feedback from presentations or meeting agendas or programmes that show your participation.</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> • the types and complexity of cases you are involved in • triangulation with logbook information • CPD • teaching and training. <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.</p>

CPD and CME

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<p>CPD record certificates, certificates of attendance, workshops and at local, national and international meetings or conferences</p>	<p>You should provide a variety of these to cover all aspects of your work and to demonstrate the breadth of your practice. Where you have specialised the provision of CPD records covering the other aspects of the relevant curriculum is important to demonstrate the maintenance of your skills. CPD records should include evidence of training in communication skills and participation in management and teaching courses.</p> <p>Please provide details of the events you have attended describing the content. Support this with documentary evidence of your attendance (CPD certificates etc).</p> <p>See the JRCPTB guidelines at www.jrcptb.org.uk.</p>
<p>CPD registration points from UK Medical Royal College (or equivalent body overseas)</p>	<p>Please provide evidence of registration within a formal system. Royal Colleges or Faculties may confirm attainment of their requirements.</p> <p>CPD should include activities both within and outside the institution where you are employed.</p> <p>The Royal College of Physicians guidance on CPD credits confirms that a minimum of 50 CPD credits should be obtained per year, where one credit is based on one hour of educational activity. 25 credits must be from external CPD i.e. outside of the institution where you are working.</p>
<p>Membership of professional bodies and organisations</p>	<p>List the following for your current membership of professional bodies and organisations. Provide documentary evidence showing membership information:</p> <ul style="list-style-type: none"> • organisation name • date of joining • status of membership (member, associate etc) • how membership is achieved (evaluation, examination, is membership restricted or open to all?) <p>Where membership has been attained through an evaluation or examination and you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.</p> <p>See the JRCPTB guidelines at www.jrcptb.org.uk.</p>

Teaching and training

Teaching timetables	<p>Where you have undertaken a number of roles provide details for each post or role, indicate the level of the teaching. You should include evidence of teaching a range of professionals, including undergraduates, postgraduates and other clinical staff. Where teaching is not formal (timetabled) indicate how you participate in teaching.</p> <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.</p> <p>Timetables should include evidence of</p> <ul style="list-style-type: none">• participation in patient education collaboratively with other members of a multi-professional team;• participation in the teaching of allied health professionals
Lectures	<p>Please include evidence showing the audience and topics covered, such as posters advertising event, educational timetable from trust education centre, letter from education centre indicating your involvement in specialty trainee formal education programme. You should also include evidence of attendance or speaking at meetings of 'lay' patient support organisations</p> <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• the types and complexity of cases you are involved in• triangulation with logbook information• CPD• teaching and training• communication skills. <p>Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.</p>

<p>Feedback or evaluation forms from those taught</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>Please provide copies of feedback from teaching events you have participated in.</p> <p>You should submit at least one teaching observation, as well as other positive feedback. Teaching observation forms can be found on the JRCPTB website document library - https://www.jrcptb.org.uk/document-library You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> • the types and complexity of cases you are involved in • triangulation with logbook information • CPD • teaching and training • leadership • relationships with colleagues • communication skills.
<p>Letters from colleagues</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You can use copies of letters from colleagues to demonstrate similar information to feedback forms (see above).</p>
<p>Attendance at teaching or appraisal courses</p>	<p>Please provide documentary evidence that you attended a teaching course, or equivalent, and information on the content of the course including whether they were generic or aimed at medical professionals.</p>

<p>Participation in assessment or appraisal and appointments processes</p>	<p>You may provide the following types of evidence to support this area:</p> <ul style="list-style-type: none">• copies of invitations to appraisals or assessments including attendance at appraisal/assessment courses• evidence of participation in the Deanery ARCP or RITA processes• evidence of participation in appointments for trainees (including invitations to participate and interview panel information, including attendance at interview and appointment related courses). <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• contribution to postgraduate and continuing medical education activity, locally and nationally• any responsibilities which relate to a special interest• participation in administration, management duties• participation in teaching and training• communication, partnership and teamwork• relationships with colleagues (including giving feedback)• leadership
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Domain 2 – Safety and quality

Participation in audit, service improvement

Audits undertaken by applicant	<p>You should provide evidence involvement of 5 audits or quality improvement projects (QIP). This should include:</p> <ul style="list-style-type: none">• 1 x Intermediate care or continuing care project• 1 completed QIP or closed audit loop <p>You should provide evidence of the five stages of the audit process:</p> <ol style="list-style-type: none">1. Definition of criteria and standards2. Data collection3. Assessment of performance against criteria and standards4. Identification of changes (alterations to practice)5. Re-evaluation <p>Evidence you could supply includes:</p> <ul style="list-style-type: none">• audit reports (collections of data alone are not considered as a full clinical audit)• publications• submissions to ethics committee (not satisfactory alone)• presentations of audit work (see above for details required for presentations)• letter from audit or clinical governance lead confirming participation in audit or governance activities• guidelines produced to reflect lessons learned within audit• notes from self-reflective diaries. <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• the types and complexity of cases you are involved in• triangulation with logbook information CPD• communication, partnership and teamwork• relationships with colleagues, patients• leadership• multi-disciplinary working.
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<p>Reflective diaries</p>	<p>Evidence you could submit to support this area:</p> <ul style="list-style-type: none"> • SI self-reports & reflection • AIR self- reports & reflection • Other reflective diaries <p>You can use this document to demonstrate</p> <ul style="list-style-type: none"> • triangulation with logbooks • relationships with colleagues • your recognition of the limits of your professional competence • handling of critical incidents or complaints • how you have changed your practice in the light of experiences (part of audit). <p>As this evidence is self-produced for its content to be given weight it must be supported or triangulated by other evidence.</p>
<p>Service Improvement and clinical governance meetings</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>This area could be demonstrated in a number of ways including:</p> <ul style="list-style-type: none"> • invitations to attend meetings • minutes of meetings demonstrating your attendance and participation in the meeting. <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> • communication, partnership and teamwork • relationships with colleagues • leadership • multi-disciplinary working • participation in audit or clinical governance.

Safety

Health and safety	<p>Please provide evidence to support awareness and following Health and Safety requirements.</p> <p>This can be demonstrated by:</p> <ul style="list-style-type: none">• declaration of health on your application form• attendance at appropriate courses• involvement in infection control (membership of committees etc)• logbook information on infections• audit on infections and subsequent changes in activity.
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Domain 3 – Communication, partnership and teamwork

Communication

Colleagues	<p>Please provide evidence to support your communication with colleagues, both within your immediate team and the wider team (including non-clinical).</p> <p>This can be demonstrated by:</p> <ul style="list-style-type: none">• letters from colleagues (examples of shared cases or “To whom it may concern letters” or testimonials)• letters of correspondence between you and your colleagues, demonstrating collaboration over management of patient care across multidisciplinary teams• management – including organising staff rotas• presentations• copies of appraisals or references written for colleagues (these must be anonymised with relation to colleague data). <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• communication, partnership and teamwork• relationships with colleagues• leadership• multi-disciplinary working• participation in directorate and management meetings• honesty and objectivity. <p>You should provide evidence of working with:</p> <ul style="list-style-type: none">• wider healthcare team including Primary Care, intermediate and secondary care teams• multi-disciplinary teams• community groups. <p>These could be demonstrated using the following types of evidence:</p> <ul style="list-style-type: none">• newspaper articles• local authority / government meeting minutes• extracts from websites
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| | <ul style="list-style-type: none">• job descriptions• articles, publications. |
|--|--|

<p>Patients</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You should include evidence of at least 1 patient survey. Other evidence could include: thank you letters and cards from patients</p> <ul style="list-style-type: none"> • letters from colleagues (examples of cases shared or “To whom it may concern letters” / testimonials) • complaints and responses to complaints. <p>This may include complaints received against your department or a colleague where you have been involved in the resolution. This is to demonstrate how you handle complaints. Having a complaint made against you will not adversely influence your application. You must anonymise colleague information from this evidence.</p> <ul style="list-style-type: none"> • 360° feedback. <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none"> • communication • relationships with patients • honesty and integrity • protecting patient confidentiality. <p>You should provide evidence of working with:</p> <ul style="list-style-type: none"> • wider healthcare team including Primary Care, intermediate and secondary care teams • multidisciplinary teams • community groups. <p>These could be demonstrated using the following types of evidence:</p> <ul style="list-style-type: none"> • newspaper articles • local authority / government meeting minutes • extracts from websites • job descriptions • articles, publications.
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Partnership and teamwork

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Working in multidisciplinary teams

All evidence in this area **must** be **anonymised** for individual patient data.

This area could be demonstrated in a number of ways including:

- invitations to attend meetings
- minutes of meetings demonstrating your attendance and participation in the meeting
- job plans which indicate this as a duty
- appraisals which include this information.

You can use these documents to demonstrate:

- communication, partnership and teamwork
- relationships with colleagues
- leadership
- multi-disciplinary working.

You should provide evidence of working with:

- wider healthcare team including Primary Care, intermediate and secondary care teams
- multidisciplinary teams
- community groups.

These could be demonstrated using the following types of evidence:

- newspaper articles
- local authority / government meeting minutes
- extracts from websites
- job descriptions
- articles, publications.

<p>Management and leadership experience</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You should submit evidence of having attended a:</p> <ul style="list-style-type: none">• Management training course• Leadership skills course <p>You should demonstrate leadership and management in the following areas:</p> <ul style="list-style-type: none">• Education and training• Deteriorating performance of colleagues (e.g. stress, fatigue)• High quality care• Effective handover of care between shifts and teams <p>This area could be demonstrated in a number of ways including:</p> <ul style="list-style-type: none">• invitations to attend meetings• minutes of meetings demonstrating your attendance and participation in the meeting• job plans which indicate this as a duty• appraisals which include this information. <p>You can use these documents to demonstrate:</p> <ul style="list-style-type: none">• communication, partnership and teamwork• relationships with colleagues• leadership• management skills.
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Chairing meetings and leading projects

All evidence in this area **must** be **anonymised** for individual patient data.

This area could be demonstrated in a number of ways including:

- invitations to attend meetings
- minutes of meetings demonstrating your attendance and participation in the meeting
- job plans which indicate this as a duty
- appraisals which include this information
- project reports
- letters from colleagues
- publications or presentations.

You can use these documents to demonstrate:

- communication, partnership and teamwork
- relationships with colleagues
- leadership
- multi-disciplinary working
- participation in directorate and management meetings
- CPD.

Where you have not provided evidence of success in an examination that is a requirement of the CCT curriculum, evidence in this area may contribute to your demonstration of equivalent knowledge.

Domain 4 – Maintaining trust

Acting with honesty and integrity

Honesty and integrity	You can demonstrate this with: <ul style="list-style-type: none">• the declarations on your application form• statements from your referees• appraisal forms• having no restrictions on your registration (UK based doctors)• Certificate of Good Standing (overseas based doctors).
Equality and human rights (including disability, human rights, race, religion and ethnicity awareness and equal opportunities)	You can demonstrate this with: <ul style="list-style-type: none">• evidence of attendance at relevant courses (please provide details of course content)• feedback from patients and colleagues• statements from your referees• testimonials.
Data protection	You can demonstrate this with: <ul style="list-style-type: none">• attendance at relevant courses (please provide details of course content)• feedback from patients and colleagues• your application and evidence being appropriately anonymised.

Relationships with patients

<p>Testimonials and letters from colleagues</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>You may include "To whom it may concern letters".</p>
<p>Thank you letters, cards from colleagues and patients</p> <p>Please ensure that these are anonymised (for individual patient data).</p>	<p>Please provide photocopied pages of thank you cards.</p>
<p>Complaints and responses to complaints</p> <p>All evidence in this area must be anonymised for individual patient data.</p>	<p>This is to demonstrate how you handle complaints. Having a complaint made against you will not adversely influence your application.</p> <p>You may include complaints received against the department within which you worked or one against a colleague where you have been involved in the resolution.</p> <p>You may provide a reflective diary of how you would handle a hypothetical complaint.</p>

Appendices

When submitting your application you need to demonstrate that you have achieved competence in all the areas of the latest curriculum in Geriatric Medicine as well as competence across the GMC domains. These appendices are designed to help you demonstrate this as well as help the assessors evaluate your application. You will need to submit a copy of the completed appendices with your application. These need to be submitted after your CV in your evidence.

- Column 1 lists the competence required in the curriculum, which you need to provide evidence for
- Column 2 lists the GMC domain that this competence covers. You **must** provide evidence for the competency under the relevant domain/s highlighted in this column
- Column 3 lists the types of evidence that you can upload to demonstrate achievement of this competency. This list is not exclusive and other types of evidence can be used if appropriate
- Column 4 In this column you must write which section in your application this evidence can be found. Evidence relevant to more than one competency doesn't need to be provided twice but you must clearly cross reference this in the appendices

APPENDIX A

Common competencies

Common Competencies	GMC DOMAIN	Evidence that can be used to demonstrate competency	Where in your submission is the evidence for this competency? (Give the section)
History Taking	1	Case histories Rotas and timetables Logbooks Reflection Correspondence Referral letters Patient lists and reports CPD certificates Audit/QI Projects Assessments Testimonials	

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		Structured reports Qualifications Appraisals Full MRCP(UK) SCE Other	
Clinical Examination	1	As above	
Therapeutics and Safe Prescribing	1	As above	
Time Management and Decision Making	1	As above	
Decision Making and Clinical Reasoning	1	As above	
The Patient as Central Focus of Care	1,3,4	As above Patient feedback	
Prioritisation of Patient Safety in Clinical Practice	1,3,4,	As above	
Team Working and Patient Safety	1,3,4	As above Multisource feedback Patient feedback	
Principles of Quality and Safety Improvement	1,2	As above	
Infection Control	1,2	As above	
Managing Long-Term Conditions and Promoting Patient Self-care	1,3	As above	
Relationships with Patients and Communication within a Consultation	1,3,4	As above Appraisals Assessments Multisource feedback Patient feedback Structures report Other	
Breaking Bad News	3	As above	
Complaints and Medical Error	2,3	As above	
Communication with Colleagues and Cooperation	1,3,4	As above	

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		Appraisals Assessments Multisource feedback Patient feedback Structures report Other	
Health Promotion and Public Health	1	As above	
Principles of Medical Ethics and Confidentiality	1	As above	
Valid Consent	1	As above	
Legal Framework for Practice	1	As above	
Ethical Research	2	As above	
Evidence and Guidelines	2	As above	
Audit	2	As above	
Teaching and Training	1	As above	
Personal Behaviour	4	As above	
Management and NHS Structure	1,3	As above Teaching Meeting attendance Appraisals Other	
Evaluating Performance and Developing and Leading Services (with Special Reference to Services for Older People)	1,3	As above	

APPENDIX B

Core curriculum grids

Core curriculum grids	GMC DOMAIN	Evidence that can be used to demonstrate competency	Where in your submission is the evidence for this competency? (Give the section)
Comprehensive Geriatric Assessment	1	Case histories Rotas and timetables Logbooks Reflection Correspondence Referral letters Patient lists and reports CPD certificates Audit/QI Projects Assessments Testimonials Structured reports Qualifications Full MRCP(UK)	

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		SCE Other	
Diagnosis and Management of Acute Illness	1	As above	
Diagnosis and Management of Chronic Disease and Disability	1	As above	
Rehabilitation and Multidisciplinary Team Working	3	As above Meeting attendance Meeting minutes Appraisal Other	
Planning Transfers of Care, Including Discharge	1,3	As above	
Delirium	1	As above	
Dementia	1	As above	
Continence	1	As above	
Falls	1	As above	
Poor Mobility	1	As above	
Nutrition	1	As above	
Tissue Viability	1	As above	
Movement Disorders	1	As above	
Community Practice Including Continuing, Respite and Intermediate Care	1	As above	
Orthogeriatrics	1	As above	
Psychiatry of Old Age	1	As above	
Palliative Care	1	As above	
Care of Older People living with Frailty	1	As above	
Stroke Care	1	As above	

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APPENDIX C

Optional Higher Level Curriculum

Optional Higher Level Curriculum	GMC DOMAIN	Evidence that can be used to demonstrate competency	Where in your submission is the evidence for this competency? (Give the section)
Falls and Syncope	1	Case histories Rotas and timetables Logbooks Reflection Correspondence Referral letters Patient lists and reports CPD certificates Audit/QI Projects Assessments Testimonials Structured reports Qualifications Full MRCP(UK)	

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		SCE Other	
Orthogeriatrics and Bone Health	1	As above	
Continence	1	As above	
Dementia and Psychogeriatric Services	1	As above	
Intermediate Care and Community Practice	1	As above	
Perioperative Medicine for Older People	1	As above	
Specialty certificate examination (or equivalent)	1	SCE certificate or alternative certificates	