



Occupational Medicine Specialty Training Curriculum

Implemented August 2022

This document outlines the curriculum to be used by trainees completing postgraduate training in occupational medicine in the United Kingdom (UK).

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	Summary of changes	Date issued

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1. Introduction to the OMST 2022 Curriculum

1.1 What is the OMST 2022 Curriculum?

The Occupational Medicine Speciality Training (OMST) 2022 Curriculum sets the standards and regulations for doctors undertaking postgraduate occupational medicine training. Occupational medicine is a preventative clinical speciality, spanning primary, secondary and tertiary care, which advises employers and workers on the prevention of ill health caused by work. Occupational medicine physicians particularly give advice on the impact of any medical conditions affecting the working age population on a worker's fitness to undertake their specific work activities. The unique skills of occupational medicine specialists include risk assessment of workplaces, identification of workplace hazards and effective communication with workers and employers.

The 2022 Curriculum comprises:

- **Learning Outcomes** that trainees must achieve for the Certificate of Completion of Training (CCT) which capture the skills, knowledge and behaviours required, including the General Medical Council's (GMC) **Generic Professional Capabilities** for all doctors at the end of postgraduate training.
- **OMST 2022 Curriculum Guidance**, which accompanies the 2022 Curriculum, elaborates on the Learning Outcomes, providing **examples** of how to demonstrate satisfactory achievement of these Learning Outcomes.
- A detailed **OMST 2022 Curriculum Assessment Strategy** specifies the range of assessment instruments to be used by trainees to demonstrate, and provide evidence of, their knowledge and skills throughout their time in training.

1.2 Who is the OMST 2022 Curriculum for?

Trainees will use the 2022 Curriculum to support their educational plans and to provide evidence as they progress through their training. This will ensure they are gaining the appropriate experiences and can continue to develop towards becoming a consultant.

Trainers will ensure their trainees are developing in the correct areas, and verify that their teaching covers the right areas.

Tutors will design structured learning programmes and ensure local teaching maps to the OMST 2022 Curriculum.

Lay people will be able to see what specialist occupational physicians work towards in their training.

1.3 How will the Learning Outcomes be achieved?

Learning will take place across a variety of settings, which may vary from trainee to trainee. These may include industrial and service settings in the private, public or military sector. Examples may include:

- The National Health Service
- Private organisations
- The military
- Industrial settings
- Academia

Alongside this, there can be a range of educational approaches to support learning, for example:

- Participation in multi-disciplinary meetings
- Participation in audits and research
- eLearning activities
- Seminars
- Lectures
- Simulation
- External training courses
- Reflective practice
- Self-directed learning

All events in the workplace can contribute to the learning process. Trainees are encouraged to utilise opportunities, as well as manage their study leave, to work towards completing their educational plan.

1.4 How will the OMST 2022 Curriculum be implemented?

Trainees in GMC-approved training posts in ST3 or ST4 will be required to transfer to the 2022 Curriculum from August 2022. The Faculty has undertaken a detailed mapping exercise of the 2017 Curriculum to the 2022 Curriculum, which will allow evidence in the **ePortfolio** that is already linked to the 2017 Curriculum to be moved to sit under the new Learning Outcomes. No evidence already recorded by trainees will be lost. Trainees moving to the 2022 Curriculum must adhere to the 2022 Curriculum only from the point at which they transfer. There is no requirement for ST4 trainees to provide retrospective 2022 Curriculum evidence for their ST3 training year.

Trainees in GMC-approved training posts in ST5 or ST6 will be given the choice of transferring to the 2022 Curriculum or remaining on the 2017 Curriculum. If trainees opt to stay on the 2017 Curriculum, they will need to complete their training within 24 months of the implementation of the 2022 Curriculum. If they are unable to do this, due for example to working **less than full time** or time spent out of programme (**OOP**), they will be given support and guidance to assist them to transfer to the OMST 2022 Curriculum. More information on transition arrangements can be found in the **OMST 2022 Curriculum Transition** document.

For doctors who opt to follow the **CESR** route, they will need to show equivalence in meeting all aspects of the OMST 2022 Curriculum. Those in the latter stages of the CESR process will be given up to a maximum of 24 months, post implementation of the OMST 2022 Curriculum, to complete their application against the old 2017 Curriculum competences.

Within 24 months of the implementation of the OMST 2022 Curriculum, all trainees in GMC approved training posts and all those following the CESR route will need to be fully aligned with the OMST 2022 Curriculum.

1.5 How is the curriculum approved and reviewed?

The GMC is responsible for approving all postgraduate specialty training curricula. The OMST 2022 Curriculum sets the standards by which doctors will be judged in order to be awarded a Certificate of Completion of Training (CCT), allowing them to apply for a consultant post. The GMC requires all postgraduate medical curricula to comply with *Excellence by design: standards for postgraduate curricula (2017)* and to enable

a trainee to demonstrate their Generic Professional Capabilities, supporting the flexibility and transferability of training.

Within the Faculty of Occupational Medicine, the Training Committee (Speciality Advisory Committee) has responsibility for the OMST 2022 Curriculum. The Training Committee (SAC) will consider proposed amendments to the 2022 Curriculum, the 2022 Curriculum Guidance and the 2022 Assessment Strategy through a formal review process, as outlined in more detail within the **OMST 2022 Curriculum Governance** and **OMST 2022 Curriculum Quality** documents. The Faculty seeks regular feedback on the content and operation of its curriculum, through a variety of sources including the National Training Survey and National School feedback.

1.6 Where can I find more information?

In addition to this OMST 2022 Curriculum document, trainees and all those supporting training must be familiar with the **OMST 2022 Curriculum Guidance**, and the **OMST 2022 Curriculum Assessment Strategy** document which provides detailed information on the programme of assessment.

Additional guidance and supporting resources for training and assessment are available on the FOM website at www.fom.ac.uk.

For any further queries related to training locally, please contact your Regional Specialty Adviser (RSA) and the National School of Occupational Health.

For any other queries related to training, including the ePortfolio, please email training@fom.ac.uk

2. Purpose of the OMST 2022 Curriculum

2.1 Introduction to occupational medicine training

Doctors considering specialty training in occupational medicine should refer to the **OMST 2022 Curriculum Flexibility** report for details of the options available. The pathways to registration as a specialist in occupational medicine are shown in Figure 1, below.

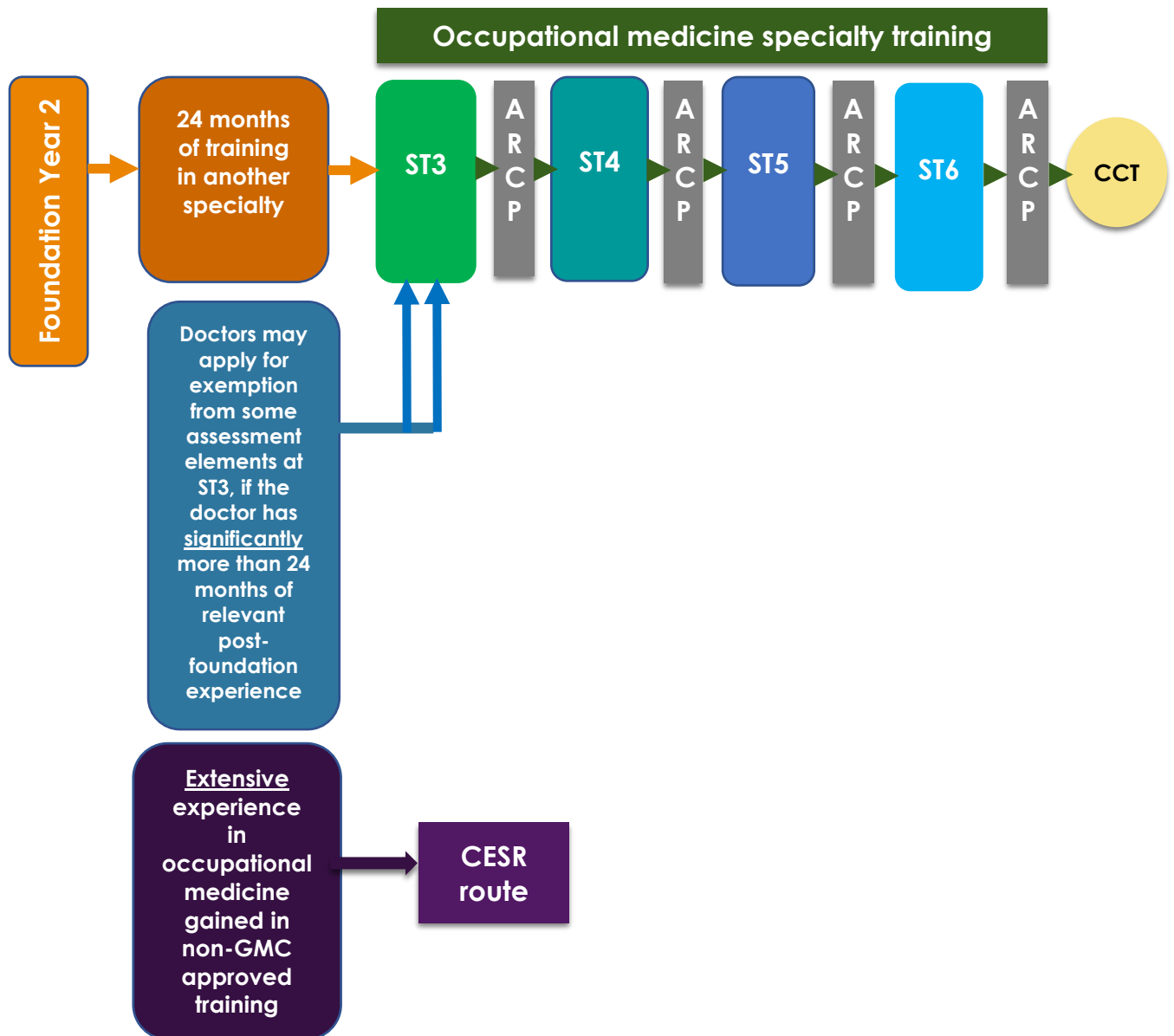


Figure 1: Pathways to becoming a registered occupational medicine specialist

For trainees in occupational medicine training, the critical progression points (CPPs) are:

CPP1: To progress to ST4

Trainees are required to have passed the MFOM Part 1 examination (or have achieved the Diploma in Occupational Medicine).

CCP2: To achieve the Certificate of Completion of Training (CTT)

Trainees are required to have achieved the required capabilities in all the Learning Outcomes AND have passed the MFOM Part 2 examination.

It should be noted that candidates who enter specialty training with a pass in the Diploma in Occupational Medicine (DOccMed) achieved within the last 5 years are exempt from MFOM Part 1 (taken in ST3), but those entering with a core examination in a different specialty are not.

Trainees in a GMC-approved training post will learn and develop the required skills, primarily in the practice environment, across a range of settings. With this in mind, acceptable workplace-based formative assessment and regular engagement with supervisors are vital.

Self-directed learning is a key element to the training programme and could include activities such as reading around a subject, preparing for a teaching session, preparing for a formal assessment activity, or undertaking a literature review. Informal learning activity should still form part of the trainee's ePortfolio, and will contribute towards their educational plan.

In addition to the activities outlined above, trainees will also be able to participate in local training and learning events such as workshops and seminars, lectures, case study presentations, and trainee-led events.

Trainees should be vigilant for opportunities to learn from other health and social care professionals. Working with and learning from these groups will add a richness and diversity to the training programme that would not be achieved otherwise. Examples include working alongside physiotherapists, psychologists, other medical specialists and general practitioners.

The OMST 2022 Curriculum provides a strong foundation for lifelong learning as a specialist occupational physician, and it is recognised that learning does not stop with the gaining of specialist registration. The OMST 2022 Curriculum will support the drive towards excellence in practice, encouraging learners to achieve far above the expected Learning Outcomes.

2.2 The purpose of the OMST 2022 Curriculum

The purpose statement for the OMST 2022 Curriculum was first approved by the GMC in 2019. As a result of the impact of the COVID pandemic, wide-ranging stakeholder feedback since 2019, and the wish to ensure that the 2022 Curriculum meets current and future needs, the original purpose statement has been updated. The 2022 Curriculum also supports the drive to reduce ill-health related job losses as outlined in the 2019 Health is Everyone's Business consultation and 2021 Government response.¹ However, the general principles and majority of content remain unaltered.

The purpose statement addresses the requirements of the GMC's *Excellence by design: standards for postgraduate curricula*, to include a clear statement addressing patient (worker) and service needs, and the scope of practice and level expected of those completing training.

Occupational medicine is the specialty that is concerned with the effect of health on work, the effect of work on health, and return to work after illness or injury as a health outcome.

The OMST 2022 Curriculum provides a framework that enables trainees to acquire the breadth and depth of knowledge, skills and experience needed to become a specialist occupational physician and to demonstrate the behaviours and attributes needed.

The UK working age population is changing. People are living longer and want to, or need to, work for longer. New barriers to engaging in, or continuing in, or returning to, a productive healthy working life are emerging, and the cost of incapacity for work impacts the UK economy, the public purse, society, and communities, as well as individual wellbeing. The link between good health and good work is widely

¹ DWP & DHSC, Government's Response: Health is everyone's business, updated 4 Oct 2021 (www.gov.uk/official-documents)

evidenced through multiple sources, including Waddell and Burton's (2006) seminal work. 'Is work good for your health and well-being?'²

The occupational health workforce is changing too. Flexibility is needed to attract and retain sufficient specialist occupational physicians by creating training pathways that recognise diversity and new patterns of working, and also allow greater movement between generalist and specialist roles to better meet the needs of workers, employers, contractors and doctors.

The alignment of the OMST 2022 Curriculum with the key recommendations of UK Shape of Training Steering Group prepares trainees to respond to these challenges and the changing landscape. It brings greater flexibility, meets emerging needs, and reflects on the roles of the specialist occupational physician as part of a wider multi-disciplinary team which may be involved in providing advice to workers in a variety of employment situations.

The OMST 2022 Curriculum ensures that trainees and potential trainees fully understand what is expected of them, by providing **a clear roadmap to achievement**. Training pathways are given within this document (p.7). The eleven Learning Outcomes are clearly described (p.25) and trainees are signposted to the **OMST 2022 Curriculum Guidance**, which provides examples of the type of evidence that may be submitted. Trainees are also referred to the **OMST 2022 Assessment Strategy** which provides information on the assessment methodologies, instruments used, and provides background details about each type of assessment and the rationale for its use. The 2022 Curriculum also signposts trainees to the **regulations**, and information about **reasonable adjustments**. Progression is outcome-based, rather than time-based.

The objective of the 2022 Curriculum is that, on successful completion, trainees will have acquired the same capabilities and scope of practice as one another, or those entering the specialty through the CESR route, regardless of diversity of background. In the context of an ageing population, migrant workers, health and wellbeing, multiple chronic conditions, and non-traditional ways of working including self-employment and remote working, specialist occupational physicians will:

² Waddell, G. and Burton, A. 2006 *Is Work Good For Your Health and Well-Being?* London, TSO

- work safely;
- work capably;
- work with confidence;
- manage and mitigate risk;
- work both independently and as part of a multidisciplinary team; and
- provide expert advice to others, such as GPs, hospital specialists and physiotherapists.

2.3 Educational supervisors: responsibilities, capabilities and performance

The Faculty of Occupational Medicine (FOM) adopts the roles and responsibilities of educational supervisors from the Gold Guide v8 (2020) and The National Association of Clinical Tutors (NACT 2018). An educational supervisor is defined as:

“a named trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified trainee's educational progress during a training placement or series of placements.”

Within occupational medicine the educational supervisor may be at a different place of work to the trainee.

The educational supervisor is responsible for reviewing evidence to support progression, providing feedback to the trainee, and supporting developmental planning.

FOM aligns the key responsibilities of educational supervisors with those identified by NACT, specifically:

- Being accountable for their professional role of educational supervisor. They can achieve this by understanding the training programme and their role in ARCPs, identifying learning opportunities, and being familiar with local policies for trainee support and development.
- Overseeing their trainee's progression by the development of an educational relationship, committing time and acting as a role model. They will also need to support and direct those less able trainees.

- Meet with their trainee initially to set boundaries, roles and responsibilities, and expectations.
- Meet with their trainee regularly to review progress and professional development, encouraging linkage to the curriculum and the review of ePortfolio evidence.
- Provide honest and constructive feedback.
- Complete the Educational Supervisor's Report in a way that supports progression and developmental prompts. This must be completed in a timely manner to ensure that the ARCP timelines are met.
- Have career discussions with their trainee.
- Provide specific additional support as necessary. This is especially important for less able trainees, where additional support must be discussed and documented with the trainee as soon as possible, and the Director of Medical Education, or equivalent for trainees in non-NHS posts, should be informed. Where appropriate, measures should be put in place with clearly defined written objectives, so that the trainee has the opportunity to correct any deficiencies. Any patient safety risks must be escalated immediately.
- The educational supervisor is expected to update their own professional skills and knowledge, and to attend training to meet GMC requirement. The educational supervisor is also expected to discuss their role as a supervisor as part of their annual appraisal, thereby ensuring a review of their role, and to take part in local teaching initiatives.
- Every trainee will have a named clinical supervisor for each placement.

2.4 Scope of practice and notable exclusions

Trainees are developed through the OMST 2022 Curriculum to help workers to maximise health and wellbeing, minimise work-related illness, and to help employers maximise attendance and performance while minimising risk.

The scope of practice of the specialist occupational physician benefits individual workers, various industries and workforce populations, including the NHS, private

industry, the Armed Forces, the wider community and the environment. Worker safety is of primary importance.

The specialist occupational physician is not normally directly involved with the treatment of acutely ill workers, but usually provides advice to workers, both self-employed and employed, and to employers across the work and employment landscape. The specialist occupational physician may also provide advice to workers and to their treating clinicians in primary, secondary care and community settings.

2.5 High-level outcomes

Trainees wishing to become specialist occupational physicians are required to demonstrate a wide range of knowledge, skills, behaviours, attitudes and communication strategies.

Specialist occupational physicians assess fitness for work in people with chronic diseases, to maximise work ability while minimising risk. They also assess illnesses caused by work, such as occupational asthma and noise-induced hearing loss. They advise on workplace adjustments for workers with disabilities and advise on vocational rehabilitation. They also advise employers and workers on workplace hazards and risk, including noise, vibration, chemical and biological agents and stress. They are involved in health promotion and promoting wellbeing to encourage workers to be 'healthy, happy and here'.

Generic Professional Capabilities, clinical skills and knowledge in occupational medicine are developed and evidenced in the OMST 2022 Curriculum by achievement of eleven Learning Outcomes, which embed the Generic Professional Capabilities:

1. Professional values and behaviours
2. Professional skills and knowledge: communication
3. Professional skills and knowledge: clinical practice
4. Workplace risk
5. Health promotion and illness prevention
6. Leadership and teamworking
7. Patient (worker) safety
8. Quality improvement

9. Safeguarding
10. Education and training
11. Research

The eleven domains embed the Generic Professional Capabilities framework, but each domain also extends beyond this to include the wide range of knowledge, skills, attributes and behaviours required by the specialist occupational physician. For example, the triangular relationship between the worker, the employer and the specialist occupational physician is unique to occupational medicine and it can create potential conflicts of interest, which the curriculum must prepare trainees to manage and overcome.

Doctors who meet the requirements of the **person specification**, and who are successful in the **national recruitment process**, can enter and follow an indicative four-year period of training. During this training period there is a mandatory requirement to pass Part 1 and Part 2 of the Faculty of Occupational Medicine's Membership (MFOM) examination, demonstrate research capabilities, and achieve appropriate capabilities through workplace-based assessments. The MFOM Part 1 examination is normally taken after one year of full-time training in ST3 and MFOM Part 2 can be taken in either ST5 or ST6.

The need for specialists to lead multidisciplinary teams, in a variety of contexts and settings, requires well-honed leadership, management and communication skills. The Generic Professional Capabilities framework provides an excellent starting point for these skills. However, additional specialty-specific elements are required also, given the unique relationship between the specialist occupational physician, multi-disciplinary colleagues, employers and workers.

By the point at which trainees attain their CCT, they will be skilled at diagnosing work-related health issues, diseases and disorders, and advising on the impact of ill health on work. They will have demonstrated wide-ranging and in-depth knowledge of occupational medicine and clinical skills, as well as generic attributes, behaviours and skills, including communication, leadership, innovation and research. Assessment is a mixture of summative and formative assessment. Further details can be found in the **OMST 2022 Curriculum Assessment Strategy**.

The principles of **Good Medical Practice** are embedded in the design of the OMST 2022 Curriculum and excellence, over and above the standards required to progress, is recognised through awards, mentoring and sharing of best practice.

Within occupational health there is a continuing and developing need for multi-disciplinary working in a wide range of settings, and excellent communication skills are vital. The inclusion of the GPCs within the OMST 2022 Curriculum supports this.

Trainees embarking on occupational medicine specialty training are accepted from a wide variety of medical backgrounds. In addition to core medical capabilities, and not including Foundation modules, at least 24 months of training is required before entry.

The OMST 2022 Curriculum recognises that prior learning attained in other disciplines may be transferable to occupational medicine, demonstrating equivalency, and may result in exemption from assessment in one or more elements of the OMST 2022 Curriculum. For example, occupational medicine shares some capabilities with specialties such as General Practice (e.g. the clinical management, communication and consultation), Public Health Medicine (e.g. research and policy development) and General Psychiatry (e.g. communication, consultation, risk management, knowledge of legislative frameworks). These capabilities must be evidenced and an application should be made to the National School of Occupational Health (NSOH). If the Faculty agrees with the NSOH's recommendation, a formal application will be made to the GMC by the NSOH recommending that the trainee joins the training pathway through the **Combined Programme** route.

Doctors may apply from any other specialty, as long as the core capabilities are met. Further details can be found in the **OMST 2022 Flexibility** report.

Recruitment is assessed through a programme of national recruitment hosted by Health Education England, and executed by the NSOH. Trainees for Scotland, Northern Ireland and Wales are recruited through NSOH national interview, subject to agreement with the equivalent bodies. Those recruited to non-NHS training posts are **benchmarked** to ensure that they meet the same criteria for training.

Flexibility options also include less than full time (LTFT) training. Occupational medicine is a discipline that lends itself well to LTFT training, and flexibility in this respect can be accommodated with the agreement of the employer.³

In addition, the **CESR** route is available to applicants with extensive relevant experience who can demonstrate equivalency.

Equality, diversity and fairness are essential elements of any curriculum, and the Faculty's approach is documented in the **OMST 2022 Curriculum Equality and Diversity** document.

Given the variety of entry routes and posts available across the NHS, in the Armed Forces and within industry, the OMST 2022 Curriculum for occupational medicine ensures that the same capabilities must be met by all trainees and that their development equips them for the full scope of practice as a specialist occupational physician.

Although occupational medicine is not a frontline clinical specialty, the inclusion of the GPCs in the OMST 2022 Curriculum supports doctors to develop a range of generalist skills, as evidenced by the recent work of many occupational medicine physicians in national COVID vaccination programmes.

As a general rule, occupational medicine physicians do not work in emergency settings, do not have a therapeutic relationship with patients and do not deliver care. However, the delivery of emergency care and continuity of care are addressed in the Foundation Programme that all doctors must complete and without which they would be unable to train in occupational medicine.

Occupational physicians do not work directly in the community, but may liaise with primary care providers and other associated agencies working in the community.

The OMST 2022 Curriculum provides a more flexible approach to learning, and further details about this can be found in the **2022 Curriculum Flexibility** document.

³ *Adapting for the future: plan for improving the flexibility of UK postgraduate medical training*, GMC 2017

3. Development of the OMST 2022 Curriculum

3.1 Aims of the curriculum review

The redevelopment of the occupational medicine postgraduate training curriculum first began in 2019. Many users of the 2017 Curriculum felt that the structure was cumbersome and complex. The aim of the review was to create a more modern, flexible and user-friendly curriculum that would better meet the needs of trainees, trainers, workers and employers.

The GMC Standards for Curricula and Assessment Systems have been substantially redeveloped also, alongside the publication of Generic Professional Capabilities which must be included in all postgraduate medical curricula. It was important that the review reflected these changes, including moving to an outcomes-based design, and embedding the Generic Professional Capabilities within the OMST 2022 Curriculum.

3.2 Development and consultation

3.2.1 Key groups and individuals

Responsibility for the OMST Curriculum rests with the Training Committee (SAC). In 2019 a Curriculum Review Task and Finish Group was formed with delegated responsibility for setting the direction of the curriculum review and overseeing and approving the review work. The group's terms of reference specified that the group must present a curriculum suitable for the immediate and longer-term health needs of the workplace and the training needs of those wishing to achieve the CCT in occupational medicine. Group membership included the President, the Academic Dean, the Director of Assessment (Examinations), the Director of Training, the Head of the National School of Occupational Health, the FOM Trainee Representative, the Faculty's Chief Executive Officer, and an Independent Educational Advisor. Detailed discussions were held with the Lead Dean, the GMC and other Royal Colleges and Faculties.

3.2.2 Design and development

It is important that the OMST 2022 Curriculum meets the demands of the GMC's *Excellence by design: Standards for postgraduate curricula* and that the Generic Professional Capabilities are integrated. There was already substantial alignment between the 2017 Curriculum and the GMC's Generic Professional Capabilities. Using

these concepts as a guide, the Curriculum Review Task and Finish Group identified eleven curriculum domains which captured the full breadth of skills, knowledge, behaviours and attributes required to practise as a specialist occupational physician, and which would become the basis of the OMST 2022 Curriculum. High-level Learning Outcomes were produced within each of these domains.

The draft content underwent detailed review and refinement by working groups with additional representation from trainees. The assessment strategy was reviewed to ensure suitability for use with the OMST 2022 Curriculum. The final OMST 2022 Curriculum was signed off by the Academic Dean and Head of the National School of Occupational Health, and approved by the Faculty's Board, prior to submission to the GMC. **The 2022 Curriculum Transition** plan explains to trainees and trainers the process of implementation, and the support available.

3.2.3 Consultation

Stakeholder consultation, across the four nations, was a crucial aspect of the curriculum development process. Key groups influencing the development included:

- Trainees, at all stages of their training
- Workers (patients) and groups representing them
- NHS, military and private employers
- Service providers, including NHS Trusts, the MoD and small, medium and large providers
- Training supervisors and those responsible for learning
- Examiners and educational advisers
- Academics
- Lay people
- Statutory bodies
- Professional bodies
- Specialist occupational physicians

3.2.4 OMST 2022 Curriculum philosophy

The Learning Outcome structure, built around curriculum domains that span the entire time in training, also serves to support another core philosophy of the FOM Curriculum:

to support trainees in recognising their progress and development through training, and encourage excellence. There is significant flexibility for trainees in how they demonstrate the Learning Outcomes, having taken a risk-based approach to the **OMST 2022 Curriculum Guidance** with minimal mandatory Professional Capabilities, allowing trainees to reflect on what achievement of the Learning Outcome looks like, and to think creatively about how it can be demonstrated.

The OMST 2022 Curriculum acknowledges that all doctors will have areas of excellence and areas where more development is needed. The OMST 2022 Curriculum supports this by not expecting doctors to progress through all areas at the same speed and by avoiding artificial barriers to progression.

3.2.5. Incorporation of GMC standards

The OMST 2022 Curriculum is designed to support training that is aligned to both **Good Medical Practice** and the **Generic Professional Capabilities**. These standards form the compulsory minimum standard required for all doctors in specialty training, thereby ensuring quality, consistency and flexibility. Through achievement of the Learning Outcomes, trainees demonstrate that they meet the required standard in all Generic Professional Capability domains.

3.2.6 Ensuring fairness and supporting diversity

An equality and diversity impact assessment was undertaken as part of the curriculum review, considering both actual and potential effects of the implementation of the OMST 2022 Curriculum on those with protected characteristics (as defined in the Equality Act 2010) and including less than full time trainees.

The review considered evidence of the actual or potential impact on three distinct strands: curriculum and curriculum guidance content; assessment; and implementation, including transition. The evidence considered came from existing literature and guidance, existing data relating to the current assessments, review by users, and review by lay experts.

The Faculty sought to address issues of equality, diversity and fairness during the development of the 2022 Curriculum in a range of ways, including:

- Curriculum content was authored, implemented and reviewed by a diverse range of individuals.
- Careful consideration was given the development of Learning Outcomes and Professional Capabilities to ensure a clear rationale for mandatory content, and that there are no unnecessary barriers to access or achievement. Beyond these mandatory requirements, the assessment tools can be deployed in a more flexible and tailored manner, meeting the requirements of the individual trainee.
- All OMST 2022 Curriculum documents are published in a font type and size that is appropriate for a wide range of audiences, and optimised for readability. Information regarding the OMST 2022 Curriculum is available through a range of media, acknowledging differing learning styles.
- Similarly, the **OMST 2022 Curriculum Communication** plan and the **OMST 2022 Curriculum Stakeholder Engagement** strategy were designed based on the recommendations made in relevant literature, noting that best practice requires careful consideration of how to reach all sections of the intended audience.
- The Faculty of Occupational Medicine and National School of Occupational Health encourages and supports flexible training, and are confident that the move from a time-based to a capability-based training curriculum will better support those in less than full time training.

The Faculty of Occupational Medicine is committed to the following actions to continue to enhance its existing work in relation to ensuring equality, diversity and fairness in the delivery and review of the curriculum:

- To use feedback from trainers and trainees to identify any actual or potential impact on trainees with protected characteristics that may arise once the OMST 2022 Curriculum is in use.
- To continue to review the nominations and appointment process to Faculty positions responsible for the curriculum, examinations and assessments, ensuring equality of opportunity and access.

- To implement a range of measures to improve the quality and quantity of the data sets that the Faculty holds related to protected characteristics for all those involved in training and assessment, enabling more comprehensive analysis and reporting. Outcomes will be monitored to identify any trends that may pose a concern with regards to equality, diversity or fairness.
- To continue to deliver up-to-date training and refresher training related to equality and diversity for all specialist occupational physicians with a role in occupational medicine examinations and assessments.
- To continue to gather regular feedback from trainees and trainers on their experience of the OMST 2022 Curriculum, with a view to identifying and removing any potential areas of bias or discrimination.

3.2.7 Quality assurance and continual improvement

Any curriculum needs to be supported by a robust quality assurance and improvement framework to promote improvement of the trainee learning experience, and to ensure that the curriculum content, delivery, assessment and implementation are monitored and reviewed in a planned, systematic and appropriate manner.

The Faculty's quality infrastructure for training and assessment is based on the Plan, Do, Check, Act (PDCA) cycle, introduced by Deming. In the context of the programme of assessment, this means planning for effective assessment processes, executing those processes, reviewing and evaluating including data analysis and multi-source feedback, and implementing any required changes.

The **OMST 2022 Curriculum Quality** framework will continually evolve to meet changing standards and in response to the outcome of monitoring and reviewing activity, ensuring resources are developed in the areas of most need and/or risk.

3.2.8 Curriculum governance

The Training Committee (Specialty Advisory Committee) monitors the performance of the OMST 2022 Curriculum, and reports to the Board of Trustees via the Academic Dean. Further details can be found in the **OMST 2022 Curriculum Governance** document.

4. How to use the OMST 2022 Curriculum

The OMST 2022 Curriculum is critical for ensuring the standards and consistency of training. It must be referred to throughout training, as trainees progress towards achievement of the **Learning Outcomes**. The OMST 2022 Curriculum should be used to help to design training programmes locally that ensure all trainees can develop the necessary skills, knowledge, and behaviours across a range of occupational contexts. The OMST 2022 Curriculum is designed to ensure it can be applied in a flexible manner, meeting service needs as well as supporting each trainee's own tailored educational plan.

Supporting the 2022 Curriculum is **OMST 2022 Curriculum Guidance**, which provides more detail of the underpinning expectations, gives **examples** of how achievement might be demonstrated and evidenced, and lists the **Professional Capabilities** for each Learning Outcome.

Trainees are encouraged to consider innovative ways of demonstrating how they have met the Learning Outcomes. Doctors following a programme of training in occupational medicine will have different strengths and areas of interest, and so may be able to demonstrate achievement of some Learning Outcomes at different rates by optimising the learning opportunities presented in the workplace.

Trainees and trainers should also be familiar with the **OMST 2022 Curriculum Assessment Strategy**.

4.1 Preparing for the ARCP

Trainees are strongly encouraged to record evidence against the Learning Outcomes throughout the year, including engaging in active reflective practice to support their own development.

Prior to the Annual Review of Competency Progression (ARCP), trainees must ensure that they have recorded relevant evidence against the Professional Capabilities, and any other evidence that demonstrates their progression towards, or achievement of, the Learning Outcomes.

The supervisor will review and comment on whether the trainee is on target to achieve, or has achieved, the Learning Outcome(s), and will suggest specific areas

of focus for the following year to ensure that the trainee achieves the Learning Outcome(s) by the required period. The examples contained within the **OMST 2022 Curriculum Guidance** act as useful prompts for this.

4.2 Requirements for curriculum delivery

The requirements for curriculum delivery have not changed as a result of the OMST 2022 Curriculum and the implementation of the GMC's *Promoting excellence: standards for medical education and training* (2017). This stipulates that all training must comply with the following ten standards:

Theme 1: Learning environment and culture

S1.1	The learning environment is safe for workers and supportive for learners and educators. The culture is caring, compassionate and provides a good standard of care and experience for workers, carers and families.
S1.2	The learning environment and organisational culture value and support education and training, so that learners are able to demonstrate what is expected in Good Medical Practice and to achieve the learning outcomes required by their curriculum.

Theme 2: Educational governance and leadership

S2.1	The educational governance system continuously improves the quality and outcomes of education and training by measuring performance against the standards, demonstrating accountability and responding when standards are not being met.
S2.2	The educational and clinical governance systems are integrated, allowing organisations to address concerns about worker safety, the standard of care, and the standard of education and training.
S2.3	The educational governance system makes sure that education and training is fair and is based on the principles of equality and diversity.

Theme 3: Supporting learners

S3.1	Learners receive educational and pastoral support to be able to demonstrate what is expected in Good Medical Practice, and to achieve the learning outcomes required by their curriculum.
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Theme 4: Supporting educators

S4.1	Educators are selected, inducted, trained, and appraised to reflect their education and training responsibilities.
S4.2	Educators receive the support, resources and time to meet their education and training responsibilities.

Theme 5: Developing and implementing curricula and assessments

S5.1	Medical school curricula and assessments are developed and implemented so that medical students are able to achieve the learning outcomes required for graduates.
S5.2	Postgraduate curricula and assessments are implemented so that doctors in training are able to demonstrate what is expected in Good Medical Practice, and to achieve the learning outcomes required by their curriculum.

4.3 Assessing the OMST 2022 Curriculum

The programme of assessment comprises a wide range of assessment instruments which must be used to develop skills and assess capability. The assessments are a mix of formative and summative; centrally and locally set and administered; and knowledge, skills and capability-based assessments capture a wide range of evidence which can be integrated to reach a judgement as to the trainee's suitability for progression. The assessments also provide trainees with the opportunity to obtain developmental feedback.

Further information on all assessment instruments can be found within the [OMST 2022 Curriculum Assessment Strategy](#).

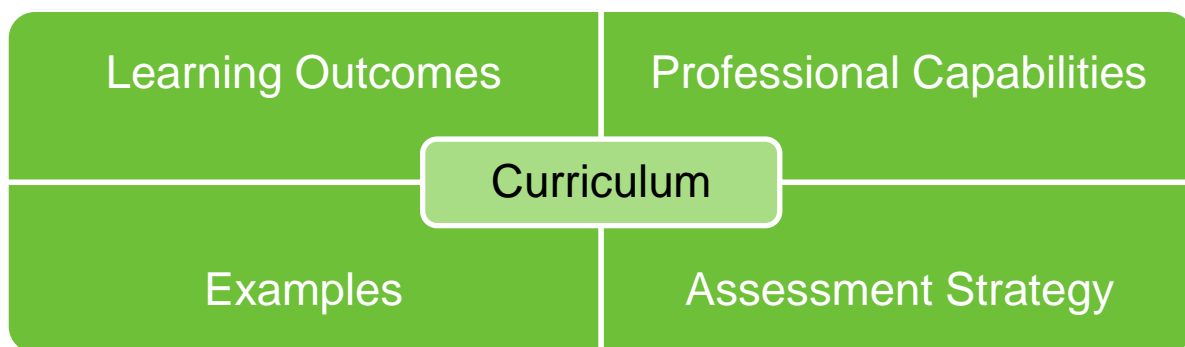
5. The OMST 2022 Curriculum

5.1 Components of the OMST 2022 Curriculum

The OMST 2022 Curriculum provides a framework for training, articulates the standard required to work at a consultant level, and consists of Learning Outcomes which specify the standards that trainees (and CESR applicants) must demonstrate to ultimately attain specialist registration.

5.1.2 How should trainees use the OMST 2022 Curriculum?

There are five component parts of the OMST 2022 Curriculum:



Occupational medicine trainees are required to demonstrate achievement of all **Learning Outcomes** by the end of their training period.

Professional Capabilities are mandatory capabilities which must be evidenced by the trainees in their ePortfolio, and count towards the Learning Outcome.

The 2022 Curriculum Guidance includes, for each Learning Outcome, a series of **examples** that provide ideas of evidence and give a range of clinical contexts which trainees may use to support their achievement of the Professional Capabilities. Examples are intended to act as prompts to the trainee and trainer as to how the overall Learning Outcomes might be achieved, or how the evidence base could be broadened. They are not intended to be exhaustive, nor to be used as a checklist, and excellent trainees may produce a broader portfolio or include evidence that demonstrates deeper learning. It is not expected that trainees provide ePortfolio evidence against every individual example. The aim of assessment is to provide evidence against every Professional Capability and Learning Outcome.

5.2 Learning Outcomes

The Learning Outcomes required for all trainees working towards a CCT in occupational medicine are shown in Table 1 (below). Within the OMST 2022 Curriculum and throughout the OMST 2022 Curriculum Guidance, the **Learning Outcomes** are mapped to the **Generic Professional Capabilities** (GPCs).

Learning Outcomes		
1	Professional values and behaviours and professional knowledge GPC 1 & 3	Adopts a self-regulatory approach to professional behaviour, demonstrating and role modelling the professional attributes required by a specialist occupational physician.
2	Professional skills and knowledge: communication GPC 2	Communicates effectively verbally and in writing with workers, employers, worker representatives, colleagues and other stakeholders, across a range of workplace environments, demonstrating effective listening skills, cultural awareness and sensitivity.
3	Professional skills and knowledge: clinical practice GPC 2	Assesses and manages workers, with respect to work and the workplace, taking in to account history, diagnosis, human factors principles, clinical examination and relevant investigations.
4	Workplace risk GPC 2	Accurately identifies, assesses and manages workplace hazards and risks across a range of settings.
5	Health promotion and illness prevention GPC 4	Promotes and advises on physical and psychological health and wellbeing in the workplace and wider community, as well as prevention of work-related ill health.

Learning Outcomes		
6	Leadership and team working GPC 5	Demonstrates a range of leadership behaviours and role models the ability to respect others, working effectively in a multidisciplinary team and within a management structure.
7	Patient (worker) safety GPC 6	Applies knowledge, clinical skills and professional values to the provision of high quality, safe worker management and investigates, reports and resolves risks to workers and stakeholders.
8	Quality improvement GPC 6	Independently applies knowledge of quality improvement processes to undertake projects, audits and evaluation studies to improve effectiveness, safety, efficiency and the overall experience of stakeholders.
9	Safeguarding GPC 7	Applies knowledge to identify safeguarding issues, thereby taking responsibility for raising concerns, getting advice and taking appropriate actions.
10	Education and training GPC 8	Demonstrates knowledge, skills and attitudes to provide effective teaching and learning opportunities, including supervision, training, assessment and mentorship in the occupational health setting.
11	Research GPC 9	Engages with research and promotes innovation.

Table 1: OMST 2022 Curriculum Learning Outcomes

Glossary of Terms

ARCP

The Annual Review of Competency Progression is the point at which evidence is reviewed and a decision made regarding whether or not a trainee may progress to a higher level of training.

Assessment

An event where an evaluative judgement is made regarding a trainee's knowledge or skills.

Assessment can be formative and can help to guide learning and prompt reflection. It can also be summative, where an overall judgement regarding competence, fitness to practice, or qualification for progression to higher levels of responsibility is made.

Capability

The ability to do something in a competent way.

Critical progression points

Key points in the curriculum where trainees will transition to a higher level of responsibility or enter a new area of practice. These points are frequently associated with increased risk, and assessment must be robust.

Curriculum

The framework that lays out the intended aims and objectives, content, experiences, learning outcomes and processes of a programme or course of learning.

Curriculum guidance

A supporting document to be used in conjunction with the 2022 Curriculum document. The 2022 Curriculum Guidance document includes the Professional Capabilities and Examples. It is designed to guide trainees and trainers in what must be evidenced, and suggest evidence which may help the trainee to demonstrate their achievement of the Learning Outcomes.

Educational supervisor An appropriately trained trainer that is responsible for overseeing the supervision and management of the trainee's learning journey.

Employer A person or entity that employs one or more people to work for a salary.

ePortfolio The online learning tool used by trainees and their supervisors to log their activities and evidence, and to monitor progress through the 2022 Curriculum.

Example Examples of ways of gaining evidence, across a range of clinical contexts, which may support a trainee's achievement of the Professional Capabilities. Examples are intended to provide a prompt to the trainee and trainer as to how the overall outcomes might be achieved. They are not an exhaustive list, and the excellent trainee is likely to produce a broader portfolio or include evidence that demonstrates deeper learning. It is not expected that trainees provide ePortfolio evidence against every individual example (or a set quota); the aim of assessment is to provide evidence against every Professional Capability.

General Medical Council (GMC) The General Medical Council is the regulatory body which governs medical education within the United Kingdom. All curricula for postgraduate medical education must be approved by the GMC.

Generic Professional Capability Framework (GPCF) A matrix of educational outcomes that describe educational and critical capabilities that underpin core professional practice in the United Kingdom. Produced by the GMC in 2017.

Good Medical Practice (GMP) The core ethical guidance that the GMC provides for doctors.

Learning Outcome

Learning Outcomes are statements that set out those essential aspects of learning that must be achieved. For the purpose of this document, these are the outcomes which the trainee must demonstrate they have met to be awarded their Certificate of Completion of Training (CCT) in occupational medicine.

Out of Programme

An opportunity for trainees to take time out from their training to pursue other interests or to gain further experience. This could include research activities that involve working abroad. Out of Programme requests are not automatically granted and must be agreed with the deanery.

Professional Capability

These are mandatory capabilities which must be evidenced by the trainee, in their e-portfolio, to meet the Learning Outcome. Professional Capabilities are also mapped to the GMC Generic Professional Capabilities.

Programme of assessment

The programme of assessment demonstrates how all Learning Outcomes can (or must) be achieved.

Protected characteristic

The Equality Act (2010) defines groups who are protected by law from suffering discrimination, harassment, victimisation, or some other inequality of opportunity. The protected characteristics are: age; disability; gender reassignment; marriage and civil partnership; pregnancy and maternity; race; religion or belief; sex; and sexual orientation.

Quality assurance (QA)

The oversight of education and training to ensure that it meets the required standards and that organisations are complying with their own and external policies, procedures and regulations.

SLE

Supervised learning event, also known as a workplace-based assessment, in which a supervisor assesses activities in the workplace.

Transition

The process by which existing trainees will move from the 2017 Curriculum to the OMST 2022 Curriculum.

Worker

This term has the widest meaning and includes the self-employed and contract workers and is recognised internationally. The term 'employee' is avoided as the specific legal meaning is too narrow and excludes a number of people to whom occupational health professionals will provide services.



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