

Curriculum 2024 Guide for Special Interest Professional Module (SIPM): Medical Education (ME)

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1. The Medical Education SIPM

This SIPM is aimed at learners with an interest in medical education. Medical education skills are essential in obstetrics and gynaecology, and they are a requirement of the Core Curriculum. Learners who undertake this SIPM will develop their knowledge and skills beyond the 'core' expectation, and will be able to competently organise, contribute toward and support departmental and/or affiliated medical school educational activities. This SIPM aims to increase the opportunities for clinicians to develop a specialised understanding in planning and delivering medical education.

As a learner progresses through the SIPM, they will be exposed to and participate in a wide variety of teaching and assessment scenarios. Learners will also participate in educational events to further develop their training.

Throughout training, learners will need to reflect on whether a teaching activity has gone well, learn from positive and negative experiences, and use this to improve their own skills.

Before signing off on this SIPM, the Educational Supervisor will decide whether the learner is meeting expectations for the completion of each Medical Education Capability in Practice (CiP). More detail is provided in Section 5 of the [Special Interest Training Definitive Document](#).

2. Design of the SIPM

The Medical Education 2024 SIPM is made up of four Medical Education (ME) CiPs. If undertaking the module full time, it is expected to take 18–24 months. However, this timeframe is indicative as training is entirely competency based.

This SIPM is not required for certificate of completion of training (CCT), but will develop the learner's professional skills in the field of medical education.

Here is the GMC-approved Medical Education SIPM:

3. Capabilities in Practice (CiPs)

Medical Education CiP 1: The doctor demonstrates the ability to provide teaching and training to healthcare professionals and facilitates learning.

Key skills

Descriptors



Demonstrates awareness of different ways of teaching and learning	<ul style="list-style-type: none">• Can identify different learner needs and show how to address them.• Can define what needs to be learned and identify appropriate learning outcomes.• Can demonstrate the application of learning and teaching principles in the design of a course, unit, module or subject area.
Presents and runs a variety of teaching sessions	<ul style="list-style-type: none">• Can run teaching sessions for groups of different sizes.• Uses a broad range of educational methods and technologies (including virtual reality and simulation) to achieve intended learning outcomes.• Achieves rapport with an audience, gives clear presentations and facilitates small group teaching.• Adopts a flexible approach to teaching clinical and generic skills in a variety of settings, including wards, theatre, clinics and simulation.• Can organise appropriate teaching programmes.
Understands the principles of feedback and its importance for learners and teachers	<ul style="list-style-type: none">• Uses suitable and effective feedback models.• Can have “difficult” conversations.• Promotes and encourages self-awareness in learners.• Is aware of the importance of seeking, receiving and responding to feedback about learning and teaching.
Establishes safe and effective learning environments	<ul style="list-style-type: none">• Assesses individual needs and plans appropriate training programmes.• Organises and performs supervision and educational meetings for learners.• Recognises the importance of learner wellbeing and can refer them to a support network, if needed.
Describes a range of learning methods that can be used in learning and teaching activities	<ul style="list-style-type: none">• Uses a broad range of educational methods and technologies to achieve intended learning outcomes, including small group, large group, face-to-face and online sessions.



	<ul style="list-style-type: none"> Develops a library of innovative learning resources.
Supports learners to be involved in the design and delivery of teaching	<ul style="list-style-type: none"> Involves learners in planning and delivering teaching in clinical practice (e.g. experiential learning). Understands how to develop a “community of practice”.
Recognises the importance of reflection on practice to develop teaching skills	<ul style="list-style-type: none"> Actively seeks feedback on their teaching and uses it for personal development. Evaluates their teaching practice and provides evidence of this. Evaluates teaching programmes. Responds appropriately to feedback on teaching and uses this to improve educational process. Demonstrates the ability to encourage reflective learning within a training session.
Evidence to inform decision – examples of evidence (not mandatory requirements)	
<ul style="list-style-type: none"> Diary of teaching sessions that have been delivered and groups who have been taught Structured feedback on sessions from an assessor and adult learners e.g. using a form like this one from the Joint Royal Colleges of Physicians Training Board: https://www.jrcptb.org.uk/documents/evaluation-form-teaching-and-presentations Reflection on sessions using Plan Do Study Act (PDSA) tool, e.g. https://learn.nes.nhs.scot/2274/quality-improvement-zone/qi-tools/pdsa 	<ul style="list-style-type: none"> Attendance of a relevant medical education course Evidence of learning how to teach online (e.g. a certificate of completion of eLearning for health (https://portal.e-lfh.org.uk)) Modules on Educator Training Resources (https://portal.e-lfh.org.uk)
Mandatory requirements	
No mandatory evidence	
Knowledge criteria	
<ul style="list-style-type: none"> Understand how to use different teaching methods, their appropriateness, advantages and disadvantages Understand how to train in different clinical settings and optimise the learning environment Understand the importance and principles of feedback Understand how to develop effective learning environments and learner support systems Understand how to design and organise a teaching programme 	



- Understand the concept of a “community of practice”
- Understand the principles and importance of reflective practice
- Understand the principles and importance of evaluating a teaching session or programme

Medical Education CiP 2: The doctor is able to assess learning.

Key skills	Descriptors
Understands the purpose and principles of assessment	<ul style="list-style-type: none"> • Demonstrates an understanding of the difference between appraisal and assessment. • Understands the role of different methods of assessment. • Demonstrates how assessment should address learning outcomes. • Understands the difference between formative and summative assessments. • Is aware of the limitations of assessment, including principles of reliability and validity. • Is aware of the evidence surrounding differential attainment in examinations and assessment.
Awareness of how to develop assessment processes	<ul style="list-style-type: none"> • Can select and apply appropriate assessment methods. • Can compile and mark assessments of knowledge, practical skills and attitude.
Can contribute to monitoring and improvement of assessments	<ul style="list-style-type: none"> • Is aware that robust assessment practices are important for developing courses and effective educational practice. • Contributes to continuous monitoring and improvement of assessments, for example in teaching programmes.
Demonstrates awareness of fair, equitable recruitment and selection processes	<ul style="list-style-type: none"> • Has completed appropriate Equality, Diversity and Inclusion (EDI) training and is aware of the role of unconscious bias. • Is involved in the recruitment process at a medical school or trust level. • Demonstrates an awareness of differential attainment in relation to recruitment and in medical education in general.
Evidence to inform decision – examples of evidence (not mandatory requirements)	
<ul style="list-style-type: none"> • Reflective practice • Evidence of involvement in undergraduate examinations • Structured feedback from an assessor and adult learners on at least three sessions where they have performed an assessment of another person 	<ul style="list-style-type: none"> • RCOG Learning on how to complete WPBAs • Attendance of a relevant medical education course • Completion of EDI training



<ul style="list-style-type: none"> Reflection on sessions using PDSA tool – e.g. NHS Education for Scotland (NES) template: https://learn.nes.nhs.scot/2274/quality-improvement-zone/qi-tools 	
Mandatory requirements	
No mandatory evidence	
Knowledge criteria	
<ul style="list-style-type: none"> Understand the principles of appraisal and how it differs from assessment Understand the principles of assessment and its different methods and their advantages and disadvantages Understand EDI principles in relation to recruitment and selection in medical education 	

Medical Education CiP 3: The doctor understands the requirement for educational scholarship and evidence-based practice.	
Key skills	Descriptors
Understands key educational theories and principles	<ul style="list-style-type: none"> Is aware of, and can describe, different theories of adult learning. Links theories with medical education and understands their relevance to teaching in medicine.
Aware of relevant literature	<ul style="list-style-type: none"> Completes literature search in relation to education research project or quality improvement project (QIP). Can critically evaluate educational literature and apply this learning to their educational practice.
Describes different paradigms of medical education research	<ul style="list-style-type: none"> Can describe different approaches to medical education research (e.g. qualitative versus quantitative methodology).
Designs an appropriate educational research project or QIP	<ul style="list-style-type: none"> Formulates appropriate research questions. Uses appropriate educational methodology to answer research questions. Understands the principles of critical appraisal and peer review.
Evidence to inform decision – examples of evidence (not mandatory requirements)	
<ul style="list-style-type: none"> Postgraduate Certificates/Diplomas/Masters as evidence of learning (optional) Is a trainee representative at trust or deanery education training 	<ul style="list-style-type: none"> Completion of QIP relating to quality control/management of education Attendance at relevant medical education course



meetings with trainers (e.g. NHS England (NHSE)/Health Education and Improvement Wales (HEIW)/NHS Education for Scotland (NES), or Northern Ireland Medical and Dental Training Agency (NIMDTA) local office, school board or similar)	
Mandatory requirements	
No mandatory evidence	
Knowledge criteria	
<ul style="list-style-type: none"> • Understand principles of adult learning • Understand key educational theories • Understand basic educational research skills 	

Medical Education CiP 4: The doctor understands the organisational structures which support training and the role of leadership and governance within medical education.

Key skills	Descriptors
Manages self so they can develop educationally	<ul style="list-style-type: none"> • Manages personal educational time effectively. • Demonstrates management of local educational programmes and resources.
Demonstrates respect for patients, learners and other educators	<ul style="list-style-type: none"> • Can develop and maintain a high-quality learning environment both at undergraduate and postgraduate level. • Reflects on how respect is generated and maintained in the context of medical education. • Demonstrates fairness for all and promotes excellence in medical education.
Understands and delivers educational outcomes	<ul style="list-style-type: none"> • Demonstrates how educational outcomes are achieved locally. • Has an understanding of how poor performance in learners, educators or educational programmes can be managed. • Is aware of how to assess and manage trainees requiring extra support and how to seek advice.
Develops skills to become an educational leader in the	<ul style="list-style-type: none"> • Develops skills to deliver training programmes. • Understands the importance of developing and supporting trainers. • Develops generic leadership skills.



future and provide educational leadership	<ul style="list-style-type: none"> • Demonstrates understanding of professionalism in their role as an educator. • Participates in relevant RCOG/deanery meetings.
Knows how to seek support and advice to achieve the best outcomes in medical education	<ul style="list-style-type: none"> • Understands the structure of postgraduate education within hospitals, deaneries and colleges, and where and how to ask for help and advice. • Describes a real or hypothetical case report of a trainee in need of support or a poorly performing training department, and the measures taken to assist and improve the situation.
Works within the structure of postgraduate medical education and training	<ul style="list-style-type: none"> • Is aware of statutory requirements (e.g. Gold Guide, General Medical Council (GMC) standards and curricula). • Can describe roles and responsibilities of statutory and other regulatory bodies and links to good patient care. • Is aware of quality control, management and assurance processes for education at local, regional and national levels. • Contributes to a local educational governance framework.
Evidence to inform decision – examples of evidence (not mandatory requirements)	
<ul style="list-style-type: none"> • Is a trainee representative at trust or deanery education training meetings with trainers (or NHSE/HEIW/NES or NIMDTA school board, or similar). Providing redacted agenda and list of attendees as evidence. 	
Mandatory requirements	
No mandatory evidence	
Knowledge criteria	
<ul style="list-style-type: none"> • Understand principles of organising local educational programmes • Understand how postgraduate education is organised locally, regionally and nationally • Understand key principles of educational governance 	

4. GMC Generic Professional Capabilities (GMCs)

The key skills in the Medical Education CiPs also map to a variety of [generic professional capabilities](#) (GPCs). When providing evidence of their progress in this SIPM, learners should make sure that it also displays progress/capability in the GMC GPCs, such as dealing with complexity, teamwork and leadership, and knowledge of patient safety issues.



Mapping to the GPCs

Domain 1: Professional values and behaviours

Domain 2: Professional skills

Domain 3: Professional knowledge

Domain 4: Capabilities in health promotion and illness prevention

Domain 5: Capabilities in leadership and team-working

Domain 6: Capabilities in patient safety and quality improvement

Domain 7: Capabilities in safeguarding vulnerable groups

Domain 8: Capabilities in education and training

Domain 9: Capabilities in research and scholarship

Learners can expect to be assessed on their wider skills as a medical professional, their skills in medical education and those relating to knowledge and processes of medical education. Evidence showing progress in these areas will result in the learner progressing through the SIPM.

To help learners and Educational Supervisors determine what acceptable progress looks like, there is a Statement of Expectations for each Medical Education CiP.

	Statement of Expectations for the Medical Education SIPM
Meeting expectations for the Medical Education CiP1	Learners meeting expectations will be able to demonstrate an awareness of different styles of teaching and learning. They will be able to apply this awareness to run a broad range of teaching sessions, utilising different educational methods and technologies. They will understand the importance of feedback, and use this to support learners in the design and delivery of teaching. The learner will have a reflective approach to developing their teaching skills.
Meeting expectations for the Medical Education CiP2	Learners meeting expectations will have an awareness of the development of assessment processes, as well as an understanding of the purpose, principles and uses of tools of assessment. They will engage with continuous monitoring of these processes to ensure a fair and equitable approach to assessment.
Meeting expectations for the Medical Education CiP3	A learner meeting expectations will show an understanding of key educational theory as applied to medical education. They will be able to describe the approaches used within medical education literature, and utilise quality improvement methodology to improve educational delivery.
Meeting expectations	A learner meeting expectations will be capable of self-managing their educational personal development. They will develop skills in educational leadership and deliver on educational outcomes. They will know how to

**for the Medical
Education CiP4**

work within the structure of postgraduate medical education, seeking support as appropriate to achieve the best outcomes in medical education.

The CiP knowledge criteria show the processes/frameworks a learner should understand and the professional knowledge they must have if they want to deliver medical education. This is more in-depth than the knowledge base expected for the MRCOG. The key skills and descriptors outline the expected learning outcomes for the SIPM. However, learners will not experience the entire range of possible scenarios during their training for this SIPM; therefore, after completing the module they should continue their learning and skill development through their independent practice in this field.

5. Evidence required

As learners progress through SIPM training, they are expected to collect evidence that demonstrates development and acquisition of the key skills and knowledge. This evidence will be reviewed by the SIPM Educational Supervisor when they are making their assessment for each CiP. Examples of types of evidence a learner may use to show progress in the SIPM are given below. **Please note that this list shows possible, not mandatory, types of evidence** (see Section 5 in the [Special Interest Training Definitive Document](#) for more detail).

If workplace-based assessments are listed, then at least one must be presented as evidence. The emphasis should be firmly on the **quality** of evidence, not the quantity.

• Case-based discussions	• Attendance at relevant conferences and courses
• Reflective log of teaching practice	• Quality improvement activity in medical education
• Local, Deanery and national teaching	• Evidence of teaching feedback
• Teaching observations	• RCOG Learning and other eLearning

6. Career guidance

Learners can undertake any of the three SIPMs. There is no 'protected' training time allocated to undertake SIPMs, and they are not required for CCT. The Medical Education



SIPM can be undertaken at any stage during the training programme. The most appropriate stage to consider undertaking this SIPM will be from ST3 onward, so that learners can focus on the medical education skills in the core curriculum before embarking on the SIPM, where they will develop those knowledge and skills to a higher level. Learners aspiring to take on medical education roles in their consultant career should undertake this SIPM.

For further careers advice, learners should have a discussion with their SITM Director.

7. Further resources

The further resources listed below can be found on the [RCOG Curriculum 2024 webpages](#):

- [Essential Curriculum Guide](#)
- [Special Interest Training Definitive Document](#)
- (containing the 2024 curricula for SITMs and SIPMs)

Find out more at
rcog.org.uk/curriculum2024



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