



**FACULTY OF
PUBLIC HEALTH
MEDICINE**

ROYAL COLLEGE OF
PHYSICIANS OF IRELAND

International Clinical Fellowship Programme in

PUBLIC HEALTH MEDICINE

OUTCOME-BASED EDUCATION – OBE CURRICULUM



This ICFP curriculum in Public Health was developed in 2025 by Dr Niamh Bambury (Consultant in Public Health Medicine – Health Service Improvement), Dr Anna Clarke (Consultant in Public Health Medicine) and the RCPI Workplace Education Team. It is approved by the Specialist Training Committee and the Faculty of Public Health.

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Table of Contents

1. INTRODUCTION	3
1.1. ICFP Overview	4
1.2. Entry Requirements for ICFP	4
1.3. ICFP in Public Health	4
1.4. Training Programme Duration and Organisation of Training	5
1.5. Programme Management.....	6
1.6. ePortfolio	6
2. CORE PROFESSIONAL SKILLS	7
3. SPECIALTY SECTION.....	8
Domain 1 – Health Protection	9
Domain 2 – Health Intelligence.....	10
Domain 3 – Health Improvement	11
Domain 4 – Health Service Improvement.....	12
Domain 5 – Strategic Leadership and Management in PHM.....	13
Domain 6 – Public Health Advocacy and Policy	14
Domain 7 – Health Economics	15
4. COMPLEMENTARY TRAINING AND EDUCATIONAL ACTIVITIES	16
4.1. Training Activities.....	16
4.2. Educational Activities.....	16
5. ASSESSMENT GUIDELINES.....	17
5.1. Formative Assessment	17
5.2. Summative Assessment	17
5.3. Assessments in Use at RCPI	17
5.4. Recording Assessments on ePortfolio	17
6. SUMMARY TABLE OF EXPECTED EXPERIENCE	19
Progress Log	21

1. INTRODUCTION

This section includes information on the structure and management of this Clinical Fellowship Programme (ICFP). For specific policies and procedures, please contact your Programme Coordinator.

1.1. ICFP Overview

The International Clinical Fellowship Programme (ICFP) provides a route for overseas doctors wishing to undergo structured and advanced postgraduate medical training in Ireland. The ICFP enables suitably qualified overseas postgraduate medical Trainees to undertake a fixed period of active training in clinical services in Ireland.

The purpose of the ICFP is to enable overseas Trainees to gain access to structured training and active clinical environments, to enhance and improve the individual's medical training and learning and, in the medium to long term, the health services in their own countries.

This ICFP will allow participants to access a structured period of training and experience as developed by the Royal College of Physicians of Ireland (RCPI) to specifically meet the clinical needs of participants as defined by their home country's health service.

Core elements of all programmes include:

- Care that is appropriate, effective and compassionate in dealing with health problems and health promotion.
- Medical knowledge in the basic biomedical, behavioural and clinical sciences, medical ethics and medical jurisprudence and application of such knowledge in patient care.
- Interpersonal and communication skills that ensure effective information exchange with individual patients and their families and teamwork with other health professionals, the scientific community and the public.
- Appraisal and utilisation of new scientific knowledge to update and continuously improve clinical practice.
- Capability to be a scholar, contributing to development and research in the field of the chosen specialty.
- Professionalism, with particular emphasis on developing competencies in the practice of public health.
- Ability to understand health care and identify and carry out system-based improvement of care.

1.2. Entry Requirements for ICFP

- Medical degree programme and Internship completion.
- Structured National Residency training completion, including the associated exams.
- Eligible to be sponsored by the doctor's government body.
- Eligible to be registered with the IMC Supervised division.
- One year of experience in the specialty is desirable.
- English exam (OET/IELTS) and preliminary sponsorship are desirable, not mandatory when applying.

1.3. ICFP in Public Health

Consultants in PHM have an advisory and contributory function in health and well-being, health service planning, health needs assessment, evidence-based health policy, health service evaluation, clinical effectiveness, clinical governance, healthcare economic evaluation, clinical audit, inter-sectoral working and reduction of health inequalities.

The ICFP in Public Health is designed to ensure that the Fellow is equipped at the end of training to:

- Work within national and international policy frameworks at many levels
- Deliver comprehensive Public Health Programmes for populations, including vulnerable groups
- Improve and protect health; respond to health threats whether biological, chemical or other; provide surveillance and public health risk assessments, infectious diseases prevention and control and respond to public health emergencies
- Promote health and well-being of the population
- Develop and maintain partnerships with communities, local government and the voluntary sector
- Engage in activities which provide an assessment of the health of the population

Clinical experience for the ICFP Fellow will provide an important background for the domains of public health medicine practice:

- Health Protection
- Health Intelligence
- Health Improvement
- Health Service Improvement
- Strategic Leadership and Management in PHM
- Public Health Advocacy and Policy
- Health Economics

1.4. Training Programme Duration and Organisation of Training

The period of clinical training provided for this ICFP is 3 years.

Full competency in a minimum of three of the seven domains (one to be Health Protection) is required. A minimum score must be achieved in the remaining four domains.

Each post within the programme has a named trainer/educational supervisor and programmes are under the direction of the National Specialist Director(s) of the relevant medical speciality.

Successful completion of this ICFP will result in the participant being issued with a formal Certificate of completion for the International Clinical Fellowship Programme by the Royal College of Physicians of Ireland. This Certificate will enable the participant's training body in their sponsoring home country to formally recognise and accredit their time spent training in Ireland.

Appointed International Fellows are:

- Enrolled with RCPI and are under the supervision of a consultant doctor registered on the Specialist Division of the Register of Medical Practitioners maintained by the Irish Medical Council, and who is an approved consultant trainer.
- Registered on the Supervised Division of the Register of Medical Practitioners maintained by the Irish Medical Council.
- Agreeing on a training plan with their trainers at the beginning of each training year.
- Directly employed and directly paid by their sponsoring state at a rate appropriate to their training level in Ireland and benchmarked against the salary scales applicable to NCHD in Ireland.

1.5. Programme Management

- Coordination of the training programme lies with the Training Department at RCPI.
- The training year usually runs from July to July in line with National Higher Specialist Training programmes.
- Each International Fellow will be issued with a training agreement on appointment to the training programme and will be required to adhere to all policies and procedures relating to ICFP.
- Annual evaluations usually take place between April and June each year.
- International Fellows will be registered to the ePortfolio and will be expected to fulfil all requirements relating to the management of yearly training records.

1.6. ePortfolio

International Fellows will be required to keep their ePortfolio up to date and maintained throughout their Fellowship training. The ePortfolio will be countersigned as appropriate by the supervising Trainer to confirm the satisfactory fulfilment of the required training experience and the acquisition of the competencies set out in the Curriculum. This will remain the property of the International Fellow and must be produced at the End of Year Evaluation meeting. At the End of Year Evaluation, the ePortfolio will be examined. The results of any assessments and reports by the named trainer/educational supervisor, together with other material capable of confirming the International Fellow's achievements, will be reviewed.

2. CORE PROFESSIONAL SKILLS

This section refers to the core professional skills that every International Fellow training in Ireland is expected to comply with. These are detailed by the Irish Medical Council as Guidelines for Good Professional Practice.

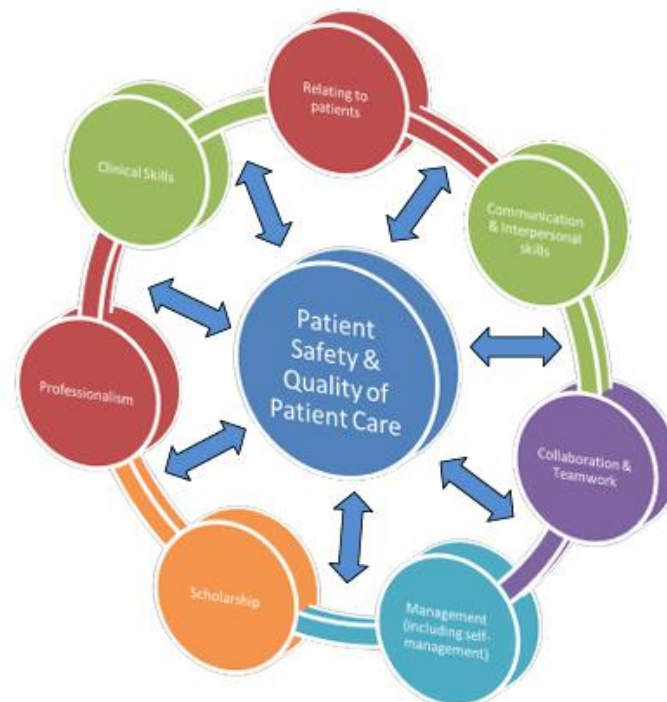
*The Medical Council has defined **eight domains of good professional practice**.*

These domains describe a framework of competencies applicable to all doctors across the continuum of professional development from formal medical education and training through to maintenance of professional competence. They describe the outcomes which doctors should strive to achieve and doctors should refer to these domains throughout the process of maintaining competence.



Comhairle na nDochtúirí Leighis
Medical Council

Eight Domains of Good Professional Practice as devised by Medical Council

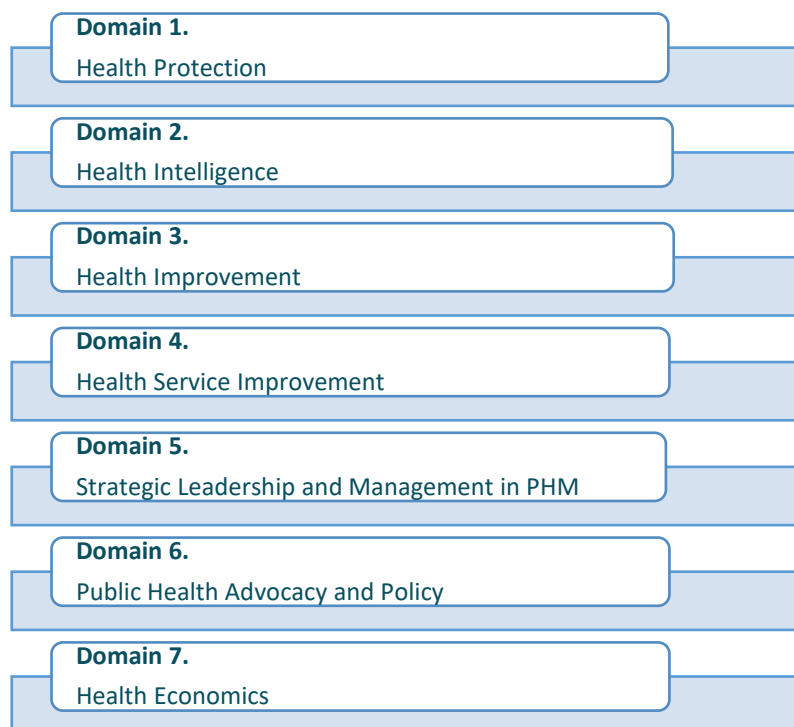


3. SPECIALTY SECTION

This section includes the Specialty Training Domains that the International Fellow should achieve by the end of the ICFP.

Each Training Domain is broken down into specific and measurable Training Outcomes. Per each Training Outcome, International Fellows can record workplace-based assessments (DOPS, MiniCEX, CBD) and feedback opportunities on ePortfolio.

Training Domains



Domain 1 – Health Protection

By the end of this Fellowship, the International Fellow is expected to develop the knowledge and skills needed to contribute to health protection activities across All-Hazards.

OUTCOME 1 – INTERPRET AND USE LEGISLATION TO PROTECT HEALTH

Demonstrate an understanding of key MOH legislation and statutory roles in PHM and apply MOH and other relevant legislation effectively to protect health.

OUTCOME 2 – INVESTIGATE AND CONTROL INFECTIOUS DISEASES

Contribute to the investigation and control of avoidable infections through activities such as surveillance, contact tracing, and providing effective immunisation and IPC advice, from policy to practice levels.

OUTCOME 3 – PROTECT THE PUBLIC FROM ENVIRONMENTAL THREATS

Support public health response to environmental threats through activities such as performing risk assessments, communicating risks, developing public health medical advice for professionals and the public, and participating in the surveillance and investigation of reported clusters.

OUTCOME 4 – DEMONSTRATE KNOWLEDGE TO MANAGE PUBLIC HEALTH EMERGENCIES

Demonstrate knowledge of national and regional structures and processes for managing public health emergencies.

OUTCOME 5 – EVALUATE AND MONITOR HEALTH PROTECTION PROGRAMMES

Evaluate and monitor the effectiveness and impact of health protection programmes, using appropriate data sources and indicators to inform continuous improvement.

Domain 2 – Health Intelligence

By the end of this Fellowship, the International Fellow is expected to acquire the knowledge and skills necessary to use data and evidence effectively to inform public health priorities and guide health service planning and decision-making.

OUTCOME 1 – KNOW AND USE KEY HEALTH-RELATED DATASETS

Identify and use relevant health-related datasets in public health practice.

OUTCOME 2 – APPLY RESEARCH METHODOLOGIES

Understand and apply appropriate research methodologies in routine practice.

OUTCOME 3 – ANALYSE, INTERPRET AND EFFECTIVELY COMMUNICATE DATA

Independently analyse and interpret data using appropriate analytical tools, and communicate findings clearly to a variety of audiences.

OUTCOME 4 – APPLY GOOD INFORMATION GOVERNANCE

Apply principles of good information governance (e.g. GDPR, Health Research Regulations 2018, FOI) in all aspects of data handling and sharing.

Domain 3 – Health Improvement

By the end of this Fellowship, the International Fellow is expected to acquire and develop the knowledge, skills and attitudes required to deliver public health medicine input and support to promote health. This should be achieved through a range of means, including health needs assessment and health improvement initiatives. This work should have a particular focus on primary prevention and reducing health inequalities.

OUTCOME 1 – SCOPE A HEALTH NEEDS ASSESSMENT

Scope and contribute to a health needs assessment, and present the evidence base for preventive and health improvement interventions.

OUTCOME 2 – EVALUATE HEALTH IMPROVEMENT INITIATIVE/PROGRAMME

Complete an evaluation of a health improvement initiative/programme using appropriate methodologies, with a particular focus on how it addresses health inequalities.

OUTCOME 3 – ADVOCATE FOR PUBLIC HEALTH PRINCIPLES AND ACTION

Advocate for public health principles and actions to improve the health of the population or a subgroup.

OUTCOME 4 – DEMONSTRATE KNOWLEDGE OF THE PRINCIPLE OF SCREENING

Understand the principles of screening and the epidemiology of screening-amenable conditions.

OUTCOME 5 – ADVOCATE FOR THE REDUCTION OF HEALTH INEQUITIES

Recognise the historical development of structural, racial and ethnic inequities within communities and the changes needed to overcome injustice and inequality.

Domain 4 – Health Service Improvement

By the end of this Fellowship, the International Fellow is expected to acquire and develop the knowledge, skills and attitudes required to design and deliver services based on population need and preferences of the community. This should be done using a health systems approach through a range of means, including health needs assessment and evaluation. The Fellow, therefore, will have an understanding of the need for equitable services that are accessible and integrated between home and the acute services, and that the impact of these services is monitored in terms of population health outcomes and equity.

OUTCOME 1 – UNDERSTAND HEALTH SYSTEMS FRAMEWORKS

Describe and interpret international and national health systems frameworks, e.g. WHO publications on health systems and health systems performance, and key Irish strategy documents.

OUTCOME 2 – UNDERSTAND POPULATION HEALTH NEEDS METHODOLOGIES

Apply and interpret methodologies used to assess population health needs.

OUTCOME 3 – EVALUATE HEALTH SERVICES

Apply service evaluation methodologies to assess health service quality, outcomes, and impact.

OUTCOME 4 – INTERPRET AND APPLY QUALITY IMPROVEMENT METHODOLOGIES

Interpret and apply quality improvement methodologies as they apply to patient safety.

OUTCOME 5 – DESIGN A QI PROJECT

Demonstrate the ability to design a QI project, with clear aims, SMART objectives, measurable outcomes, and a structured approach to implementation and evaluation.

Domain 5 – Strategic Leadership and Management in PHM

By the end of this Fellowship, the International Fellow is expected to acquire the knowledge, skills and attitudes necessary to effectively:

- Manage self, people, teams and resources.
- Work in partnership with others.
- Influence key stakeholders across a range of organisations/sectors.
- Lead teams and work programmes/projects.

OUTCOME 1 – APPLY LEADERSHIP PRINCIPLES

Demonstrate knowledge of, and apply leadership principles and theories, to public health practice.

OUTCOME 2 – WORK AS PART OF A TEAM

Work effectively as part of multidisciplinary teams.

OUTCOME 3 – IDENTIFY AND ENGAGE WITH KEY STAKEHOLDERS

Demonstrate the ability to identify, engage, and collaborate with key internal and external stakeholders across public health practice.

OUTCOME 4 – LEAD A PROGRAMME OF WORK

Demonstrate the ability to effectively lead a defined programme of work.

Domain 6 – Public Health Advocacy and Policy

By the end of this Fellowship, the International Fellow is expected to acquire the knowledge and skills to advocate for the health of the population and to form and implement policy as it applies to public health.

OUTCOME 1 – USE INFLUENCING AND NEGOTIATING SKILLS

Use influencing and negotiating skills in a variety of settings to advocate for action on a public health issue of local, national or international importance.

OUTCOME 2 – UNDERSTAND METHODS USED IN POLICY FORMATION, IMPLEMENTATION AND EVALUATION

Demonstrate understanding of methods used in the formation, implementation, and evaluation of national and international strategies and policies.

OUTCOME 3 – APPRAISE HEALTH POLICY, STRATEGY AND IMPLEMENTATION PLAN

Critically appraise health policy, strategy and implementation plans.

Domain 7 – Health Economics

By the end of this Fellowship, the International Fellow is expected to acquire the knowledge and skills to apply the principles of health economics to inform resource decision-making.

OUTCOME 1 – DEMONSTRATE KNOWLEDGE OF HEALTH ECONOMIC PRINCIPLES

Describe key health economic principles and their application in the healthcare environment.

OUTCOME 2 – APPLY KNOWLEDGE OF HEALTH ECONOMIC PRINCIPLES

Apply health economic principles to support resource allocation and decision-making at local, regional, or national levels.

4. COMPLEMENTARY TRAINING AND EDUCATIONAL ACTIVITIES

4.1. Training Activities

Specific requirements for this ICFP are outlined in the final section of this document ([Summary Table of Expected Experience](#)).

4.2. Educational Activities

The International Fellow will also be invited to attend all **Public Health Study Days** and is eligible to complete the **HST Taught Programme in Public Health**.

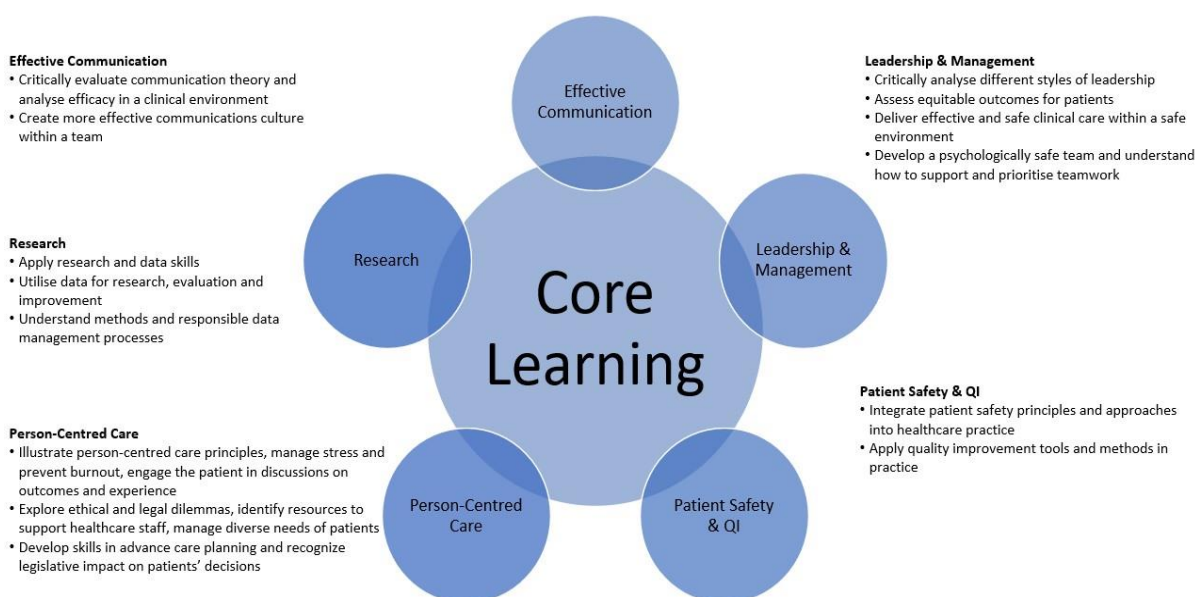
The RCPI Taught Programme consists of a series of modular elements. Content delivery is a combination of self-paced online material, live virtual tutorials, and in-person workshops, all accessible in one area on the RCPI's virtual learning environment (VLE), RCPI Brightspace.

The live virtual tutorials are delivered by Tutors related to Public Health and they will use specialty-specific examples throughout each tutorial.

International Fellows can be assigned to a tutorial group with the HST Trainees from the Faculty of Public Health starting in July.

The assigned supervisor/clinical lead determines whether it is appropriate for the International Fellow to attend the Taught Programme or portions of it.

The diagram below illustrates the content covered by the Taught Programme.



5. ASSESSMENT GUIDELINES

The progression of the International Fellow throughout the programme is monitored and evaluated making use of both formative and summative assessments.

5.1. Formative Assessment

- Focuses on continuous feedback and developmental growth.
- Includes multiple opportunities for reflection, discussions, and skill evaluations throughout the training period.
- Helps identify areas for improvement and supports ongoing learning.

5.2. Summative Assessment

- Provides a final judgment of competency at various stages of training.
- Involves formal evaluations and workplace-based assessments.
- Used to assess whether the trainee meets the necessary standards to progress in training or achieve certification (e.g. examination).

5.3. Assessments in Use at RCPI

RCPI employs a variety of assessments with different focuses. For Public Health Medicine, these are the assessments in place:

- Discussion of clinical cases: this can be formally evaluated via Case Based Discussion (CBD) and it is mostly used to assess clinical judgment and decision-making.
- Informal Feedback: this can be gathered by different trainers, colleagues and recorded via Feedback Opportunity Form available on ePortfolio.
- Mandatory Evaluations: these are bound to specific events or times of the academic year. For these at RCPI we use the Quarterly Assessment/End of Post Assessment and End of Year Evaluation.

5.4. Recording Assessments on ePortfolio

It is expected that assessments are logged on an electronic portfolio. Every International Fellow has access to an individual ePortfolio where they must record all their assessments. By recording assessments on this platform, ePortfolio serves both the function of providing an individual record of the assessments and tracking International Fellows' progression.

Below is a table of all the assessments available for this ICFP and a brief explanation of each.

ASSESSMENTS

CBD Case Based Discussion	<p>This assessment is developed in three phases:</p> <ol style="list-style-type: none"> 1. Planning: The International Fellow selects two or more medical records to present to the Trainer who will choose one for the assessment. International Fellow and Trainer identify one or more training goals in the curriculum and specific outcomes related to the case. Then the Trainer prepares the questions for discussion. 2. Discussion: Prevalently, based on the chosen case, the Trainer verifies the International Fellow's clinical reasoning and professional judgment, determining the International Fellow's diagnostic, decision-making and management skills. 3. Feedback: The Trainer provides constructive feedback to the International Fellow. It is good practice to complete at least one CBD per quarter in each year of training.
Training Opportunity Assessment form	Designed to record as much feedback as possible. It is based on observation of the International Fellows in any clinical and/or non-clinical task. Feedback can be provided by anyone observing the International Fellow (peer, other supervisors, healthcare staff, juniors).
MANDATORY EVALUATIONS	
QA Quarterly Assessment or EOPA End of Post Assessment	<p>As the name suggests, the Quarterly Assessment recurs four times in the academic year, once every academic quarter (every three months).</p> <p>It frequently happens that a Quarterly Assessment coincides with the end of a post, in which case the Quarterly Assessment will be substituted by completing an End of Post Assessment. In this sense the two Assessments are interchangeable, and they can be completed using the same form on ePortfolio.</p> <p>However, if the International Fellow will remain in the same post at the end of the quarter, it will be necessary to complete a Quarterly Assessment. Similarly, if the end of a post does not coincide with the end of a quarter, it will be necessary to complete an End of Post Assessment to assess the end of a post.</p> <p>This means that for every specialty and level of training, a minimum of four Quarterly Assessment and/or End of Post Assessment will be completed in an academic year as a mandatory requirement.</p>
EOYE End of Year Evaluation	The End of Year Evaluation occurs once a year and involves the attendance of an evaluation panel composed of the National Specialty Directors (NSDs); the Specialty Coordinator attends too, to keep records of and facilitate the meeting. The assigned Trainer is not supposed to attend this meeting unless there is a valid reason to do so. These meetings are scheduled by the respective Specialty Coordinators and happen sometime before the end of the academic year (between April and June).

6. SUMMARY TABLE OF EXPECTED EXPERIENCE

This table offers a blueprint of all the activities that are part of this ICFP and it summarises the type and frequency of the expected experience that should be completed and recorded on the ePortfolio.

Expected experience	Number expected/Further clarification	Reporting Period
Personal goals form	At the start of each training post	Once per post or annually
Competency log	1	Annual
Quarterly assessments (QAs)/End of post (EOP)	3 QAs +1 EOP (year-long post) or 2 QAs + 2 EOP (2 six-month rotations)	4/year
End of year evaluation	1	Annual
On call		
On call rota	On a 9-5 basis. To be agreed upon with the trainer at the beginning of each post.	Annual
Examinations		
MFPHMI Part I	More information here: https://www.rcpi.ie/Faculties-Institutes/Faculty-of-Public-Health-Medicine/Fellowship-and-Membership	By end of year 3
Teaching		
Delivery of Public Health related teaching to undergraduate/postgraduate/multidisciplinary team	1	Annual
Educational Activities		
Study days (online/in person)	4	Annual
National/International meetings (attendance)	2	Annual
Additional qualifications (MPH)	1	By end of year 1
Medical secretary of committee or membership of a committee	2 (separate committees)	By end of year 3
RCPI HST Taught Programme on Brightspace	-	As modularised by RCPI
RCPI Specialty Specific Courses on Brightspace		By end of year 3
Research and Audit		

Presentation at regional/national/international meeting (oral/poster)	1	Annual
Audit/Quality Improvement project	1	Annual
Journal club/Grand rounds (Attendance)	4	Annual
Publications	1	By end of year 3

Progress Log

This Log can be used to track Trainees' progression in each Outcome addressed by the curriculum.

It is recommended to keep this document updated and to use it during each Quarterly Assessment meeting to guide the discussion between Trainee and Trainer. After updating the Log during the meeting, it is recommended that Trainees upload a copy of the document on ePortfolio as an attachment to the Quarterly Assessment Form.

Quarterly Review Scoring guide: M = Minimal P=Partial F=Full/Exceptional – = Not addressed or observed

Trainee name: _____

Year of training programme		Year 1				Year 2				Year 3			
Trainer initials													
Quarterly Review		1	2	3	4	1	2	3	4	1	2	3	4
Domain 1	Health Protection												
LO1	Interpret and apply public health legislation.												
LO2	Contribute to infectious disease control activities.												
LO3	Support environmental public health responses.												
LO4	Understand public health emergency structures and processes.												
LO5	Evaluate and monitor health protection programmes.												
Domain 2	Health Intelligence												
LO1	Use key health-related datasets in practice.												
LO2	Apply research methods in public health contexts.												
LO3	Analyse and communicate data effectively.												
LO4	Apply good information governance in data use.												
Domain 3	Health Improvement												
LO1	Contribute to health needs assessments.												
LO2	Evaluate health improvement programmes.												
LO3	Advocate for public health action.												
LO4	Understand screening principles and conditions.												
LO5	Recognise and advocate to address health inequities.												

Trainee Name: _____

	Year of training programme	Year 1				Year 2				Year 3			
	Trainer initials												
	Quarterly Review	1	2	3	4	1	2	3	4	1	2	3	4
Domain 4	Health Service Improvement												
LO1	Interpret health systems frameworks and strategies.												
LO2	Apply population health needs assessment methods.												
LO3	Evaluate health service performance and impact.												
LO4	Interpret and apply quality improvement methodologies as they apply to patient safety.												
LO5	Design and plan a quality improvement project.												
Domain 5	Strategic Leadership and Management												
LO1	Apply leadership principles in public health.												
LO2	Work effectively within multidisciplinary teams.												
LO3	Engage with internal and external stakeholders.												
LO4	Lead a defined public health programme.												
Domain 6	Public Health Advocacy and Policy												
LO1	Use influencing and negotiating skills to advocate for health issues.												
LO2	Understand methods used in policy formation, implementation, and evaluation.												
LO3	Appraise health policies, strategies, and plans.												
Domain 7	Health Economics												
LO1	Describe key health economic principles.												
LO2	Apply health economic principles to support decision making.												

Trainee

Trainee name: _____

Year	Quarter	Signature SpR	Date	Signature trainer	Date
1	1				
	2				
	3				
	4				
2	1				
	2				
	3				
	4				
3	1				
	2				
	3				
	4				