FACULTY OF PATHOLOGY

ROYAL COLLEGE OF PHYSICIANS OF IRELAND

International Clinical Fellowship Programme in

# IMMUNOLOGY

## OUTCOME BASED EDUCATION – OBE CURRICULUM

**This ICFP curriculum in Immunology was developed in 2026 by Dr Caríosa Lee-Brennan and the RCPI Education Team. It is approved by the Immunology Training Committee and the Faculty of Pathology.**

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|---|---|---|---|
| 1.0 | July 2026 | Maurice Kinsella | New curriculum in OBE format |

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# INTRODUCTION

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

## 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, with a view to enhancing and improving the individual's medical training and learning and, in the medium to long term, the health services in their own countries.

This Programme 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:

- Patient 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.
- Ability to understand health care and identify and carry out system-based improvement of care.

## ICFP in Immunology

The International Clinical Fellowship Programme (ICFP) in Immunology provides advanced training in the principles and practice of clinical and laboratory immunology. The programme offers broad exposure to immunodeficiency disorders, allergic diseases, autoimmune conditions, and diagnostic laboratory immunology across a range of clinical settings. It builds on prior medical training and supports the development of higher-level clinical, analytical, and laboratory skills in immunological practice. The curriculum is aligned with RCPI learning outcomes and reflects international standards in immunology training.

## Training Programme Duration & Organisation of Training

The clinical training period under this International Clinical Fellowship Programme (ICFP) is two years. Each ICFP developed by the Royal College of Physicians of Ireland is designed to meet participants' training needs to support the health service in their home country.

All appointees to the ICFP will be assessed by the Royal College of Physicians of Ireland to ensure that they meet the necessary requirements with respect to training and clinical service.

Each post within the programme has a named trainer/educational supervisor and programmes are under the direction of Dr Caríosa Lee Brennan.

Successful completion of this ICFP will result in the participant being issued with a formal Certificate of completion for the International 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 Medical Council in Ireland.
- 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.

## Programme Management

- Coordination of the training programme lies with the Training Department at RCPI.
- The training programme offered will provide opportunities to fulfil all the requirements of the curriculum of training.
- 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.

## ePortfolio

International Fellows will be required to keep their ePortfolio up to date and maintained throughout the programme. 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 Fellow's achievements, will be reviewed.

# 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.*

# SPECIALTY SECTION - Training Goals in Immunology

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

*Each Training Goal 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 Opportunity on ePortfolio*

*In order to achieve the Outcomes it is recommended to agree on the most appropriate type of training and assessment methods with the assigned Trainer.*

## Training Goal 1 - Core Specialty Skills in Immunology

By the end of the Fellowship, the International Fellow is expected to be able to assess and manage patients with congenital and acquired immunodeficiency - antibody and cell-mediated defects, complement deficiency and neutrophil defects at consultant level. Fellows will also be able to investigate and manage patients with autoimmune/rheumatic diseases and systemic vasculitis, and investigate and manage allergy and allergic disease.

### Outcome 1 - Elicit a Focused Clinical History and Examination

Take a detailed and comprehensive history and perform appropriate physical examination, with a focus on allergic and immunological disease.

### Outcome 2 - Select and Interpret Investigations

Select and interpret appropriate laboratory and ancillary investigations, including lung function tests and CT imaging, relevant to immunological and allergic disease.

### Outcome 3 - Formulate a Differential Diagnosis

Formulate differential diagnoses by integrating clinical findings with laboratory and ancillary investigation results.

### Outcome 4 - Prioritise Therapeutic Interventions

Prioritise and initiate appropriate therapeutic interventions for patients with immunological and allergic disease.

### Outcome 5 - Communicate Scientific and Clinical Information

Deliver effective scientific writing and communication across formats including case reports, meeting presentations, scientific papers, patient information leaflets, and SOPs.

## Training Goal 2 - Diagnosis & Management of Immunodeficiency Disorders in Adults & Children

By the end of the Fellowship, the International Fellow will understand the pathophysiology (including the molecular basis) of immunodeficiency diseases and be able to advise on the appropriate use of laboratory tests for diagnosis, treatment, and prevention of primary and secondary immunodeficiency. Fellows will be able to organise and deliver home care therapy, anticipate, prevent, detect, and manage infections in immunocompromised patients and collaborate with colleagues in Infectious Diseases and Clinical Microbiology.

**Specifically, Fellows will demonstrate:**

- An in-depth and up-to-date understanding of inborn errors of immunity and secondary immunodeficiency states and how they are diagnosed, including the genetic and pathological principles underlying these disorders
- An understanding of predisposing factors to recurrent infection that can masquerade as immunodeficiency disorders.
- Proficiency in the therapy of immunodeficiency diseases, evidence-based indications for immunoglobulin replacement therapy, methods of delivery and potential hazards.
- Knowledge of the principles of immunoprophylaxis including advances in the field Investigate immunodeficiency disorders in adults and children (in collaboration with paediatricians and paediatric immunologists) presenting with recurrent or unusual infections or symptoms of immunodysregulation
- Provide advice and support appropriate referrals to international centres when more complex interventions e.g., HSCT are required

**Knowledge base:**

- Clinical features of inborn errors of immunity and acquired immunodeficiency syndromes, Antibody deficiency disorders including CVID, combined immunodeficiencies, severe combined immunodeficiencies- HIV disease, Complement deficiencies, Phagocyte deficiencies, Asplenia, Genetic studies of immunodeficiency syndromes, Assessment of secondary antibody deficiency, Knowledge of sensitivity, selectivity, specificity of laboratory tests, Awareness of the clinical consequences of HIV infection.

### Outcome 1 - Assess Patients with Suspected Immunodeficiency

Take a focused history and clinically assess patients with suspected primary and secondary immunodeficiency.

### Outcome 2 - Advise on Secondary Immunodeficiency

Provide consultative advice on the diagnosis and management of secondary immunodeficiency, including awareness of the clinical consequences of HIV infection, its epidemiology and prevention, current evidence for treatment and techniques required for monitoring HIV-induced disease.

### Outcome 3 - Select and Interpret Immunological Laboratory Tests

Advise on clinically appropriate and cost-effective selection of laboratory tests, including genetic tests, and interpret these in the context of clinical findings.

### Outcome 4 - Manage Immunoglobulin Replacement Therapy

Explain the indications, process and risks of immunoglobulin therapy to patients and manage immunoglobulin replacement including structured home therapy reviews and evaluation of complications in both hospital and home environments.

### Outcome 5 - Prevent and Manage Infection in the Immunocompromised Patient

Anticipate, prevent, detect and manage infections in immunocompromised patients, including prophylaxis, in close cooperation with specialists in infectious diseases, microbiology and virology.

### Outcome 6 - Manage C1 Inhibitor Deficiency

Diagnose and manage C1 inhibitor deficiency, including acute presentations and long-term prophylactic treatment strategies.

### Outcome 7 - Advise on Immunisation and Vaccine Response

Provide consultative advice on immunisation to prevent communicable disease in patients with immunodeficiency and the general population, including management of adverse reactions, contraindications, test immunisation to assess immune competence, and request and interpretation of specific antibody titres and vaccination responses.

### Outcome 8 - Assess and Refer Children with Suspected Immunodeficiency

In collaboration with paediatric immunologists and paediatricians, assess children with recurrent or unusual infections or failure-to-thrive to exclude immunodeficiency diseases and advise on appropriate referrals to tertiary-care centres when complex interventions such as bone marrow transplantation are required.

### Outcome 9 - Deliver Paediatric Transition to Adult Services

Deliver appropriate and structured transition of paediatric patients with immunodeficiency diseases to adult services.

## Training Goal 3 - Diagnosis & Management of Allergic Diseases

By the end of the Fellowship, the International Fellow is expected to be able to diagnose and treat allergic diseases as they present in adulthood. The Fellow will be expected to support the diagnosis of allergic disease in children. Fellows will be able to diagnose, and manage asthma, rhinitis, conjunctivitis and treat patients' allergic diseases. Specifically, Fellows will demonstrate the ability to:

- Diagnose, assemble a differential diagnosis, and provide management of atopic diseases, including basic management of asthma and atopic dermatitis and both basic and advanced management of allergic rhinitis and food allergy.
- Assess and treat patients with allergic diseases, including identification of clinically significant allergens and provision of avoidance advice, performance, and interpretation of tests for sensitisation including skin prick and specific IgE testing, symptom & food diaries and allergen challenges as applied to allergy diagnosis.
- Recognise the clinical sequelae of IgE-mediated food allergy, and to distinguish these from intolerance syndromes
- Be familiar with the advantages and disadvantages of skin prick testing, specific IgE testing, exclusion diets, diet diaries and single and double-blind-placebo-controlled food challenge in the diagnosis of food allergy
- Recognise gastro-intestinal disorders which may mimic food allergy and referral of patients for appropriate specialist investigation
- Recognise anxiety and somatisation disorders which may mimic allergic disease - explain pathophysiology to patients and refer for appropriate care
- Analyse and manage allergic adverse reactions to drugs, including general and local anaesthetics, antibiotics and other drugs
- Be familiar with the principles of drug challenge and desensitisation and provide advice in relation to the use of alternate drugs in allergic patients
- Organise the systematic approach to the identification of aetiology, to explain emergency treatment plans, including self-administration of adrenaline and to provide management plans to patients prescribed adrenaline auto-injectors (written where necessary) with appropriate liaison between immunologist, general practitioner, paediatrician, and school where appropriate

**Knowledge base:**

- Mechanisms, common causes, clinical features, and differentials of anaphylactic reactions, specific IgE testing and skin testing for allergic sensitisation, Natural history of allergic diseases.
- Anaphylaxis, (Chronic & Inducible) Urticaria/Angioedema, Asthma, Rhinitis, Drug & Vaccine allergy, Anaesthetic reactions, Atopic dermatitis, Latex allergy, Venom hypersensitivity.
- Modalities of allergen immunotherapy and the indications and contraindications in adults and children.
- Paediatric Allergy

### Outcome 1 - Elicit an Allergy-Focused Clinical History

Take a detailed allergy-focused history across presentations, including food allergy, drug allergy, rhinitis, venom allergy and other related disorders.

### Outcome 2 - Investigate and Treat Allergic Disease

Identify clinically significant allergens and perform and interpret skin tests, specific IgE testing, symptom and food diaries and allergen challenges in adults, and support paediatric allergy specialists in allergy diagnosis.

### Outcome 3 - Distinguish IgE-Mediated Allergy from Mimic Disorders

Recognise the clinical sequelae of IgE-mediated food allergy and distinguish these from intolerance syndromes and other mimic disorders, including anxiety and somatisation disorders.

### Outcome 4 - Understand and Perform Diagnostic Challenges

Apply the principles of and perform unblinded, single and double-blind-placebo-controlled food and medication challenges in the appropriate clinical settings.

### Outcome 5 - Manage Adverse Drug and Anaesthetic Reactions

Analyse and manage allergic adverse reactions to drugs, including general and local anaesthetics, antibiotics and other medications.

### Outcome 6 - Develop and Deliver Anaphylaxis Management Plans

Organise the systematic identification of aetiology, explain emergency treatment plans including self-administration of adrenaline, and provide written management plans for patients prescribed adrenaline auto-injectors with appropriate clinical liaison.

### Outcome 7 - Apply Principles of Allergen Immunotherapy

Apply the principles of allergen desensitisation in the treatment of allergic rhinitis and venom allergy and demonstrate awareness of emerging indications for immunotherapy in food allergy.

### Outcome 8 - Deliver Paediatric Transition to Adult Services

Deliver appropriate and structured transition of paediatric patients with allergic diseases to adult services.

## Training Goal 4 - Diagnosis & Management of Autoimmune Diseases

By the end of the Fellowship, the International Fellow is expected to be able to diagnose a range of autoimmune diseases, demonstrate an understanding of the immunopathogenesis of these disorders and be able to advise and administer a range of immunosuppressive therapies. Fellows will be competent in monitoring patients with autoimmune disease to prevent/minimise adverse effects of therapy.

Specifically, Fellows will demonstrate the ability to:

- Diagnose, investigate, and manage/undertake appropriate referral for management of connective tissue diseases, vasculitis and autoinflammatory disorders.
- Advise in the management of autoimmune skin diseases
- Undertake immunosuppressive and immunomodulatory therapy

**Knowledge base:**

- Diagnosis and management of Systemic Lupus Erythematosus, Rheumatoid Arthritis and Seronegative Arthropathies, Connective Tissue Disease, Autoinflammatory Disorders, Systemic vasculitis Disorders, Autoimmune diseases.
- Therapies of Autoimmune diseases - Immunosuppressive drugs, principles of high dose IVIg, therapeutic monoclonal antibodies, plasma exchange, use of interferon, and knowledge of precautions applied during the use of such therapies.

### Outcome 1 - Diagnose and Manage Connective Tissue and Vasculitis Disorders

Diagnose, investigate and manage, or refer appropriately, connective tissue diseases including SLE, rheumatoid arthritis and seronegative arthropathies, autoinflammatory syndromes and systemic vasculitis disorders.

### Outcome 2 - Advise on Organ-Specific Autoimmune Disease

Advise on the diagnosis of autoimmune skin, liver, endocrine, gastrointestinal and neuromuscular diseases and other rare autoimmune disorders.

### Outcome 3 - Manage Neuroimmunological and Rare Autoimmune Disorders

Advise on the diagnosis of neuroimmunological disorders and manage or refer appropriately for treatment, including high dose IVIg, plasma exchange, immunosuppressive drugs and biological agents.

### Outcome 4 - Monitor and Minimise Adverse Effects of Immunosuppressive Therapy

Monitor patients with autoimmune disease to prevent and minimise adverse effects of immunosuppressive and immunomodulatory therapy.

## Training Goal 5 - Immunology Laboratory Processes & Procedures

By the end of the Fellowship, the International Fellow is expected to have the skills and knowledge to be able to direct a diagnostic immunology laboratory at consultant level. Fellows are expected to liaise with the laboratory throughout the programme.

Specifically, Fellows will demonstrate the ability to:

- Select appropriate immunology tests, interpret results of the tests, and make clinical
- judgements based on the results.
- Be aware of the advantages and limitations of assays used in the immunology laboratory
- Be able to assess and use Quality Control and Quality Assessment data as it pertains to
- immunology assays
- Be able to investigate laboratory non-conformances in a systematic way
- Have an in-depth understanding of immunology laboratory quality management systems

**Knowledge base:**

- Measurement and analysis of proteins
- Detection of Antibody-Antigen reactions
- Fluorescence microscopy - Indirect immunofluorescence to detect autoantibodies
- Key technologies of molecular biology
- Immunological assays) including measurements of immunoglobulin and other relevant circulating proteins by various methods including turbidimetry, nephelometry, protein immunoblot
- Serum protein electrophoresis by gel and capillary zone methodologies
- Complement components and activation pathways
- Detection of autoantibodies
- Direct immunofluorescence of biopsy tissue
- Flow cytometry
- Oligoclonal antibody detection in CSF
- Principles of Histocompatibility and Immunogenetics
- Laboratory Practice (QC, QA, Assay validation, SOP's, Non-conformance investigation and root cause analysis)

### Outcome 1 - Select, Interpret and Advise on Laboratory Investigations

Select and interpret laboratory investigations relevant to the diagnosis, assessment and monitoring of patients with suspected immunodeficiency, allergy or autoimmunity, and provide clinical advice based on results.

### Outcome 2 - Write Authoritative Laboratory Reports

Write succinct, relevant and understandable reports in response to requests for immunological investigation.

### Outcome 3 - Perform and Interpret Routine Laboratory Procedures

Perform and interpret the results of procedures and investigations in routine use in the immunology laboratory.

### Outcome 4 - Assess Quality Control and Troubleshoot Assays

Assess quality-control data and troubleshoot assays used routinely in the immunology laboratory.

### Outcome 5 - Contribute to Assay Selection and Validation

Contribute to the choice of assay and deliver assay validation in the immunology laboratory.

### OUTCOME 6 - EXPLAIN PRINCIPLES OF TRANSPLANTATION IMMUNOLOGY

Understand and explain the principles, procedures and investigations supporting solid organ transplantation.

## Training Goal 6 - Laboratory Management

By the end of the Fellowship, the International Fellow is expected to have developed foundational skills in the management of a diagnostic immunology laboratory. Fellows will gain relevant laboratory experience throughout the programme, with particular emphasis on quality management, accreditation processes and laboratory improvement activities.

Specifically, Trainees will demonstrate the ability to:

- Manage the processes of the laboratory, including quality management systems, accreditation, QA, and QC

**Knowledge base:**

- Process management, Human Resource management, financial management, Business management and or, Demand Management, Organisational structure in the health service,
- Quality Assurance and Quality Control, Health, and Safety

### Outcome 1 - Apply a Structured Approach to Laboratory Operations and Quality

Manage the routine operation of the immunology laboratory in a systematic manner, applying standardised approaches to assay troubleshooting, quality maintenance and engagement with external agencies such as NEQAS and INAB.

### Outcome 2 - Contribute to Accreditation and Quality Improvement

Contribute to the maintenance of laboratory accreditation and participate actively in the laboratory's quality improvement programme.

### Outcome 3 - Support Strategic Planning and Resource Management

Contribute to strategic planning, undertake option appraisals, prepare a structured resource management case and contribute to demand management, including the development of testing algorithms and evaluation of tests offered.

## Training Goal 7 - Immunological Procedures

By the end of the Fellowship, the International Fellow is expected to be proficient in performing immunological procedures, prescribing and administering immunoglobulin replacement therapy, educating patients on the emergency treatment of anaphylaxis, and performing and interpreting tests of allergen sensitisation.

**Knowledge base**

- Administration of Immunoglobulin (IV)
- Administration of Immunoglobulin (SC)
- Lung function tests: interpretation
- Skin prick testing
- Intradermal testing
- Imaging: appropriate ordering and interpretation
- Protocol for systematic investigation of anaphylaxis
- Protocol for emergency management of anaphylaxis in adults and children
- Management of home therapy programmes
- Understanding of principles and applications of patch testing

### Outcome 1 - Apply Clinical Skills in Immunological Practice

Apply a range of clinical skills as they relate to internal medicine and in particular to the assessment and management of clinical immunological disorders.

### Outcome 2 - Perform and Interpret Allergen Sensitisation Tests

Perform and interpret skin prick testing, intradermal testing and allergy challenge testing as applied to the investigation of allergic disease.

### Outcome 3 - Administer Immunoglobulin Replacement Therapy

Prescribe and administer immunoglobulin replacement therapy and apply the principles of home therapy programme training for immunoglobulin replacement.

## Training Goal 8 - Investigation of Lymphoproliferative Disorders

By the end of the Fellowship, the International Fellow will be able to support the investigation of lymphoproliferative disorders and myelomatosis and refer appropriately. Fellows will gain laboratory exposure to immunophenotyping and immunochemistry as they apply to the investigation of these disorders.

**Knowledge base:**

- Knowledge of presentations, investigations, and diagnosis of:
  - Paraproteins
  - Multiple Myeloma
  - B-Cell malignancies
  - T-Cell malignancies
- Understand and be able to explain principles underlying haematopoietic stem cell transplantation

### Outcome 1 - Investigate and Refer Lymphoproliferative Disease and Myeloma

Contribute to the diagnosis of lymphoproliferative disease and myeloma, including laboratory investigation through immunophenotyping and immunochemistry, and refer appropriately to haematology services.

### Outcome 2 - Investigate and Manage Secondary Immunodeficiency

Investigate and manage secondary immunodeficiency arising in the context of lymphoproliferative disorders and myelomatosis.

# COMPLEMENTARY TRAINING & EDUCATIONAL ACTIVITIES

## Training Activities

The International Fellow is expected to participate in different Training Activities in a variety of settings, such as Outpatient Clinics; Ward Rounds; Consultations; Emergencies/Complicated Cases; Grand Rounds; Multidisciplinary Team Meetings; Clinical Audits.

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

## Educational Activities

The International Fellow will also be invited to attend relevant Immunology Study Days. In addition, the Fellow may access relevant RCPI educational and training opportunities aligned with the training goals of the Fellowship, including the RCPI Taught Programme.

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.

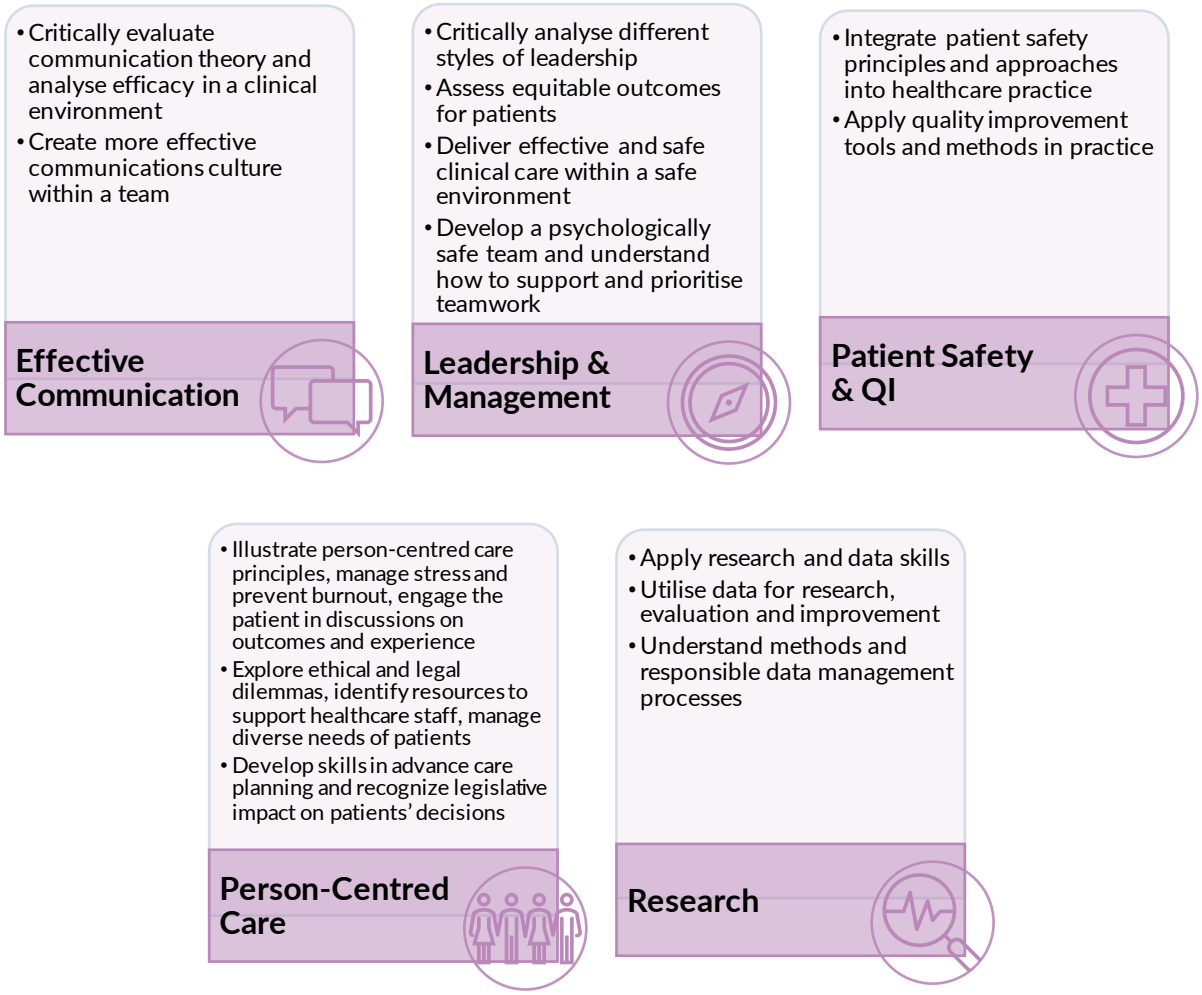
The live virtual tutorials are delivered by Tutors related to Immunology, and they will use specialty-specific examples throughout each tutorial.

International Fellows can be assigned to a tutorial group with the HST Trainees from the Faculty of Pathology 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.

**Core Learning**



# ASSESSMENT GUIDELINES

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

| Formative Assessment | Summative Assessment |
|---|---|
| •Focuses on continuous feedback and developmental growth.<br>•Includes multiple opportunities for reflection, discussions, and skill evaluations throughout the training period.<br>•Helps identify areas for improvement and supports ongoing learning. | •Provides a final judgment of competency at various stages of training.<br>•Involves formal evaluations and workplace-based assessments.<br>•Used to assess whether the Fellow meets the necessary standards to progress in training or achieve certification (e.g. examination). |

## WBAs in use at RCPI

Workplace-based assessments (WBAs) refer to those assessments used to evaluate Trainees' daily clinical practices employed in their work setting. These are primarily based on the observation of Trainees' performance by Trainers.

RCPI employs a variety of WBAs with different focuses:

- Observation of clinical practice: this can be evaluated using structured assessments such as via MiniCEX and DOPS.
- 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 the 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.

## Recording WBAs on ePortfolio

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

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

| WORKPLACE-BASED ASSESSMENTS | |
|---|---|
| **CBD** \| Case Based Discussion | This assessment is developed in three phases:<br>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.<br>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.<br>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. |
| **DOPS** \| Direct Observation of Procedural Skills | This assessment is specifically targeted at the evaluation of procedural skills involving patients in a single encounter.<br>In the context of a DOPS, the Trainer evaluates the International Fellow while they are performing a procedure as a part of their clinical routine. This evaluation is assessed by completing a form with pre-set criteria, then followed by direct feedback. |
| **MiniCEX** \| Mini Clinical Examination Exercise | The Trainer is required to observe and assess the interaction between the International Fellow and a patient. This assessment is developed in three phases:<br>1. The International Fellow is expected to conduct a history taking and/or a physical examination of the patient within a standard timeframe (15 minutes).<br>2. The International Fellow is then expected to suggest a diagnosis and management plan for the patient based on the history/examination.<br>3. The Trainer assesses the overall International Fellow's performance by using the structured ePortfolio form and provides constructive feedback. |
| **Feedback Opportunity** | 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). It is possible to turn the feedback into an assessment (CDB, DOPS or MiniCEX) |
| **MANDATORY EVALUATIONS** | |
| **QA** \| Quarterly Assessment | As the name suggests, the Quarterly Assessment recurs four times in the academic year, once every academic quarter (every three months).<br>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.<br>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.<br>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. |
| **EOPA** \| End of Post Assessment | |
| **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). |

# SUMMARY TABLE OF EXPECTED EXPERIENCE

This table provides a blueprint of all activities included in this ICFP. It summarises the types and frequencies of expected experiences to be completed and recorded in the ePortfolio.

| Experience Type | Required/ Desirable | Expected Frequency |
|---|---|---|
| **Training Plan** | | |
| Personal Goals Plan (Copy of agreed Training Plan for the module signed by both International Fellow & Trainer at the beginning of the Training year) | Required | 1 per year |
| Sample of Weekly Timetable (per post) | Required | 1 per post |
| **Training Activities** | | |
| **Outpatient Clinics** | | |
| General Immunology *(attend minimum of one clinic per week)* | Required | 40 cases/year |
| Allergy Clinics *(minimum of 1 per week)* | Required | 40 cases/year |
| **Ward Rounds/Consultations** | | |
| Allergy Day Ward | Required | 40 cases/year |
| Infusion Day Ward | Required | 20 cases/year |
| Laboratory Consultations | Desirable | 25/year |
| Emergency Consultations | Desirable | 10 cases/year |
| **Chronic Disease Management** | | |
| Management of patients on IVIg | Required | 50 cases/year |
| Management of patients on subcutaneous immunoglobulin | Required | 30 cases/year |
| Management of allergic disease | Required | 100 Cases/year |
| **Emergencies/Complicated Cases (acute immunology problems)** | | |
| Recurrent/unusual infections in immunocompromised adults or children | Desirable | 1/year |
| Acute anaphylaxis – management and prevention | Required | 1/year |
| Infusion reactions | Required | 1/year |
| Acute angioedema | Required | 1/year |
| **Procedures/Practical Skills/** | | |
| Administration of Immunoglobulin (IV) | Required | 1 |
| Administration of Immunoglobulin (SC) | Required | 1 |
| Lung function tests interpretation | Required | 10 |
| Skin prick testing | Required | 100 |
| Intradermal testing | Required | 10 |
| Challenge studies (food or drug) | Required | 10 |
| MDT Meetings | Required | 10/year |
| **Laboratory Experience** | | |
| **General** | | |
| Laboratory Organisation | Desirable | 1 |

| Experience Type | Required/ Desirable | Expected Frequency |
|---|---|---|
| Clinical Liaison & Governance | Desirable | 1 |
| Quality Systems | Desirable | 1 |
| Quality Control & Quality Assurance | Desirable | 1 |
| Accreditation | Desirable | 1 |
| Laboratory Meetings (including quality management, quarterly and annual management reviews) | Required | 2/year |
| **Management Experience** | | |
| Service development, pathway design or MDT coordination | Desirable | 1 |
| **Educational Activities** | | |
| **In-house Activities** | Required | |
| Grand Rounds | Required | 1 |
| Journal Club | Required | 5/year |
| MDT Meetings | Required | 10/year |
| **Formal Teaching Activity** | Required | |
| Lecture | Required | 1 |
| Teaching | Required | 1 |
| RCPI Taught Programme | Desirable | |
| **Research** | Desirable | 1 |
| **Clinical Audit Activities and Reporting** | Required | 1 |
| **Publications** | | |
| Scholarly dissemination (e.g. peer-reviewed publications such as case reports, reviews, or educational articles) | Desirable | 1 |
| Contribution to the development, review, or implementation of clinical protocols, care pathways, or guidelines | Desirable | 1 |
| **Presentations** | | |
| Presentation of clinical, audit, quality improvement, or research work at appropriate national or international conferences. | Desirable | 1 |
| **National/International meetings** | | |
| Attend national or international meeting | Desirable | 1 |
| **Additional Training Activities** | | |
| Liaison with other sites | Desirable | |
| Committee Attendance | Desirable | |
| **Assessments and Evaluations** | | |
| **Workplace-Based Assessments (WBAs)** | | |
| Case Based Discussion | Required | 1/year |
| Mini-CEX | Required | /year |
| DOPS | Required | 1/year |
| **Mandatory Evaluations** | | |
| Quarterly Assessment (1 every 3 months) | Required | 4/year |
| End of Year Evaluation | Required | 1/year |