

Training and development (GM)

This page provides useful information on the training and development for this specialty and also has tips for people at all stages of their training including medical school.

You will need to complete core training after your two-year foundation programme.

Core training has a choice of two pathways:

- [core medical training](#) ^[1] – CMT, which is a two-year programme
- acute care common stem – ACCS (Acute Medicine), which is a three-year programme

Programmes generally consist of four to six placements in medical specialties which must include direct involvement in the acute medical take. Trainees record their workplace based assessments in an ePortfolio which they continue to use in specialty training.

Applicants for specialty training at ST3 should also hold the full [MRCP](#) ^[2] (UK). Not all applicants who meet the required standard to continue will necessarily be offered a post due to the level of competition.

Trainees enter specialty training in geriatric medicine at ST3 level providing they have adequate breadth of experience. All trainees obtain dual accreditation in geriatric medicine and general internal medicine (GIM) which takes a minimum of five years (ST3-7).

Some trainees elect to undertake an additional one-year training scheme in [stroke](#) ^[3] medicine to achieve sub-specialty recognition. [Stroke](#) ^[3] medicine is a sub-specialty training programme open to neurology, geriatric medicine, acute medicine, rehabilitation medicine and clinical pharmacology trainees. Trainees should express an interest in [stroke](#) ^[3] training before their final year so that the first year of [stroke](#) ^[3] training can be integrated into their main specialty training. A second year of advanced [stroke](#) ^[3] medicine training is required to reach the level required of consultants. Entry to [stroke](#) ^[3] training is by competitive interview.

There are specific academic training programmes that include Academic Clinical Fellowships during core training. These lead to a period of full-time research to undertake a PhD and then to an Academic Clinical Lecturer position where trainees are able to combine clinical and academic work on a 50/50 basis. Out of programme research opportunities are also available to those doing conventional clinical training.

17% of trainees work less than full time (LTFT) at present and good opportunities for LTFT working exist throughout the career path.

- The approved postgraduate training programme for geriatric medicine is available from the GMC.

Getting in tips

It is important to develop your practical skills and interest in geriatric medicine as early as you can. This will also give you valuable experience to add to your CV.

Whether you're a medical student, foundation trainee or doing your core specialty training, there's information below to help you.

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Medical students

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- join your university medical society
- attend conferences for medical students – this will give you an opportunity to network and meet your future colleagues
- get involved with the GMC (General Medical Council), eg medical students can participate in visits to medical schools as part of the GMC's [quality assurance](#) ^[5] process
- consider joining the specialist society for your chosen specialty as a student member, eg British Geriatrics Society ^[6]
- consider becoming a student member of the BMA (the British Medical Association ^[7] is the trade union and professional association for doctors and provides careers advice)
- make your specialty decisions in good time so that you can test it out before committing yourself, eg by using hospital visits and clinical placements arranged as part of your course to ask questions and observe people at work
- choose the topic of your supervised research project carefully to test out your thinking

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Foundation trainees

Expand / collapse

- remember your first priority is to demonstrate that you have developed the personal, learning, clinical, practical and management skills needed by all doctors
- think laterally when applying for rotations – vacancies may not be available in geriatric medicine so apply for a rotation in a related field such as general internal medicine
- talk to your clinical and educational supervisors about particular areas of interest to

- explore
- use full placements to experience specialties that you might be interested in or apply for taster experiences if you can't get a placement
- don't just look at the popular and more glamorous specialties when considering your career choice
- talk with your peers about their career ideas and experiences – you may be able to help each other
- listen to information and advice from more experienced doctors but make your own decisions
- taking part in a [clinical audit](#) [8] is important for your development as a doctor but you may be able to choose an audit project related to a specialty that interests you
- ensure your Foundation e-portfolio has plenty of medical evidence and that this is kept properly up-to-date
- try to gain teaching and management experience
- look at competition ratios (ie the number of applicants to places) critically. Find out what is happening this year and spot any regional differences in competition ratios
- view the careers resources on the Foundation Programme website [9]
- write case reports or make presentations (in acute medicine, for instance) with a geriatric medicine focus.

Core and specialty trainees

Expand / collapse

- ensure a good grounding in general internal medicine
- join the British Geriatrics Society [6] and get help with navigating your way through specialty training
- speak to consultants about what the role is like
- read as much information as you can on the websites of relevant professional bodies
- question your own perceptions and possible negative stereotypes of the specialty
- impress interviewers by showing that your interest in the specialty is intrinsically motivated, ie you are drawn to the work and not just attracted by admiration of someone you have shadowed (You will also be happier in your career in that specialty many years later)
- be prepared to move to where the vacancies are
- continue to develop your practical and academic expertise
- undertake a research project
- try to get some of your work published and present at national and international meetings
- join or start a Journal Club (a group who meet to critically evaluate academic research)
- teach junior colleagues
- take on any management opportunities you are offered

Source URL: <https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/medicine/geriatric-medicine/training-and-development>

Links

[1] https://www.healthcareers.nhs.uk/glossary#Core_medical_training

[2] <https://www.healthcareers.nhs.uk/glossary#MRCP>

[3] <https://www.healthcareers.nhs.uk/glossary#Stroke>

[4] http://www.gmc-uk.org/education/approved_curricula_systems.asp

[5] https://www.healthcareers.nhs.uk/glossary#Quality_assurance

[6] <http://www.bgs.org.uk/>

[7] <http://bma.org.uk/>

[8] https://www.healthcareers.nhs.uk/glossary#Clinical_audit

[9] <http://www.foundationprogramme.nhs.uk/pages/medical-students/your-career-path/resources>