'Hepatology training over the next 4 years'

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Evolution of hepatology training in UK

- 2003-2014 local recruitment to specialist training posts (15) all within or linked to transplant centre
- Hepatology ATP year integrated into training (2010 curriculum) with subspecialty accreditation in Hepatology
- 'Academic' route separate due to CL constraints
- Both require 24 m total, not more than 6 m level 1 with curriculum completion core/advanced hepatology
- 3 m minimum in level 3 transplant centre (6 m until 2010)
- QA process 2013 via GMC
- Move to national recruitment to improve transparency and access to posts

Evolution of hepatology training in UK

- First intake 2014 via national process for 'ATPs'
- Ranking system based on trainee preference
- All posts filled each year, with backfill if drop-out
- Allowed entry into ST5/67 until 2021 then ST6/7 only
- 50% trainees remained within home region
- 2022/23 expansion to all regions bar KSS and NI
- Closer to 25% of trainees in hepatology (BSG/BASL)
- Ratified level 2 and enhanced level 1 centres increasing to ensure capacity in each region

Shape of Training

- GMC enforced a reduction in specialty training for Group 1 specialties from 5 years to 4 years
- New 2022 curriculum developed
- 'CCT in gastroenterology and hepatology' for all
- Desire to incorporate hepatology within the curriculum ie 2 yrs gastro / 2 yrs hepatology with 25% GIM
- 3 m minimum transplant centre experience important component of hepatology training even if destined for DGH
- Full colonoscopy training would not be expected but flexi sig accreditation achievable via ST4/5 lower GI endoscopy training

Gastroenterology/Hepatology wine glass model CCT Gastroenterology/Hepatology/GIM Therapeutic ST7 DGH Hep/GIM ST7 Complex Gastro/GIM OGD ST6 Tertiary Hep = ATP year ST6 Colonoscopy ST5 Core hep/nutrition/endoscopy/GIM ST4 Gastro/immersive endoscopy/GIM IM 3

Where are we now?

- Hepatology no longer 'subspecialty' and therefore 'accreditation' gone (all get CCT in gastro/hep)
- New hepatology trainees will be identified by pathway chosen
- Trainees need to make an earlier decision re hepatology and get core hep completed in ST4 or 5
- Aim is 25% trainees do hepatology
- HEE have insisted on regional allocation with regards to trainees entering hepatology
- Post CCT training in transplant / HPB endoscopy

The process ahead

- Updated information on BASL/BSG websites
- Expectation is 25-26 posts across all regions in E&W, all linked to transplant centre for minimum 3 m, NI trying to fund a post and Scotland will have several posts but configuration TBA
- ST5/6 hep-interested trainees complete 'information form' see websites / return before Xmas
- Regional allocation process will ensue in January/February
- Trainees can opt to do an ATP in another region if desired
- National 'wash up' to look at empty posts
- Allowance for personal circumstances where possible