

## Post-graduate medical training in rehabilitation - training structure

### THE OUTCOME

### Consultant in Rehabilitation Medicine

Has a certificate of Completion of Training given if judged *entrustable* in:  
(based on indicative behaviours for each capability)

### THE CURRICULUM



### THE SYLLABUS

To be entrustable, the trainee should have a number of  
**competencies (n = 39)** in six different **domains**:

Rehabilitation process (n = 4)	Generic Capabilities (n = 4)	Specialist Capabilities (n = 2)	Across- condition (n = 15)	Condition- specific (n = 13)	Research and Scholarship (n = 1)
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Competence is judged on **performance** (behaviours):

*Indicative behaviours are given for each competency, and four grades are used to measure and judge performance*

<b>A:</b>	<b>B:</b>	<b>C:</b>	<b>D:</b>
Observed and performed under supervision	Does simple cases fluently Local supervision, supported if complex	Does most cases Distant support available Direct support occasionally	Competent unaided Including complex cases and unexpected events

### Required learning in each competency

#### Knowledge

Factual material relating to the competence  
Sufficient to allow safe independent performance,  
including managing complex or unusual cases

#### Skills

Abilities relating to performance sufficient to allow  
safe effective performance including when unexpected  
events occur. Skills may be practical, analytic, inter-  
personal, organisational, managerial or other skills

### THE PROCESS

**A mixture of taught & self-directed learning, originating from:**

*Breadth of clinical experience working in rehabilitation, text-books, taught courses, peer group seminars and teaching sessions, reviews, guidelines, and primarily self-directed searching and learning from problems met*