



ROYAL COLLEGE OF  
PHYSICIANS AND  
SURGEONS OF GLASGOW

<b>CONSULTATION:</b>	Draft recommendations from GMC Dual Specialty Project Action Group to improve the national consistency of Dual CCT Training Programmes
<b>ORIGINATING SOURCE:</b>	General Medical Council
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HS/CMC

24 April 2013

Mr Andy Knapton  
GMC

Dear Mr Knapton

**GMC Recommendations on Dual CCT**

The Royal College of Physicians and Surgeons of Glasgow is pleased to have the opportunity to comment on the above consultation. These views are submitted on behalf of the Royal College of Physicians and Surgeons of Glasgow.

We are grateful for the opportunity to contribute to this consultation and support the moves to formalise arrangements for dual accreditation.

We endorse the majority of this document with the following caveats:

- We expect that mapping for existing specialties will be needed but that the work required prevents consideration of this as a wholesale move. We suggest that such mapping should be done at the time of updating of any existing curricula.
- We are unclear as to how trainees will record their progress against the competencies. Currently this is often done electronically through an e-portfolio. Recording training for each specialty from the curricula onto separate e-portfolio entries could be time consuming and inefficient.
- LEP's would only be able to provide training to trainees undergoing dual accreditation if they were accredited to train in both specialties. Individual hospitals unable to do this could be ineligible to have some trainees. This might have implications for service.
- We are unsure and would like clarification about the suggestion in recommendation (6) that some posts could be advertised on a restricted basis to a deanery and or specialty to enable for example local trainees to be recruited to limited training opportunities.

Yours sincerely

Professor Hazel Scott  
*Honorary Secretary, RCPSG*