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# PGC Medical Practice in Adult Learning Disability / HEA4505: Medical Needs of Adults with a Learning Disability module

## Additional information form

**This document should be uploaded as part of an application to the postgraduate certificate in Medical Practice in Adult Learning Disability and the Medical Needs of Adults with a Learning Disability standalone module.**

This is a post-graduate university certificate level training programme. The PGCert consists of two modules of 30 credits each and takes 15 months to complete. The first module, Medical Needs of Adults with a Learning Disability, is clinical, workplace-based, and assessed in the workplace. The second module, Improving Service Delivery within Learning Disability and/or Autism, is academic and assessed by writing up a service development project or audit. Participation in the first module requires attendance at teaching sessions, extensive reading, clinical experience with assessment, and regular input to an electronic learning portfolio.

## Applicant details

| Name |  |
| --- | --- |
| Job title |  |
| Profession |  |
| Grade/Level/Band |  |
| Workplace |  |
| Professional registration number (or state if do not have one) |  |
| Email |  |

## Please provide answers to the questions below

Why do you want to undertake the Medical Practice in Adult Learning Disability training programme? (500 words)

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| --- |
|  |

Please describe your clinical skills and experience in assessing and managing the physical healthcare of adults with a learning disability (250 words)

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How do you intend to apply your learning after completion of the Medical Practice in Adult Learning Disability training programme? Please describe the impact either on your current professional role, or on any professional aspirations (250 words)

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What impact would undertaking the Medical Practice in Adult Learning Disability training programme have on the physical health of people with a learning disability within your place of work? (250 words)

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What impact would undertaking the Medical Practice in Adult Learning Disability training programme have on the teams that you work within? (max 250 words)

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## Clinical Advisor (supervisor)

Applicants must identify a clinical advisor to support them through the training programme. Their role will be to guide the learner to find local learning experiences and enable achievement of the learning outcomes. The clinical advisor will need to meet with the learner at least three times during the first 6 month module and will be responsible for writing a final report outlining the learner’s overall progress and confirming whether the learner has completed the requirements of the module.

A clinical advisor must have:

Full professional registration within their healthcare discipline.

Hold a senior position within their department and have some experience of working with people with a learning disability.

They do not need to be an expert in learning disability or have expertise across every topic area covered in the curriculum but would ideally understand the roles of other professionals and departments who can assist the learner in completing curriculum competencies.

**Please complete the table below:**

| Name of Clinical Advisor |  |
| --- | --- |
| Job title |  |
| Profession |  |
| Workplace |  |
| Professional registration number (or state if do not have one) |  |
| Email |  |

Your application must include a **statement and declaration** from your clinical advisor confirming you will be supported to complete the training programme including accessing learning opportunities and completing the required workplace based assessments (i.e. regular time to access clinical cases over the first 6 month module, including time out of routine work environment to be spent with specialist teams, e.g. community learning disability teams, acute liaison learning disability nurse, GP annual health checks, intellectual disability psychiatry)

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| --- |
| **Clinical Advisor statement of support** |
| **I confirm I will support this applicant to complete the training programme including** accessing the learning opportunities and workplace based assessment required (ie regular time to access clinical cases over the first 6 month module, including time out of routine work environment to be spent with specialist teams, e.g. community learning disability teams, acute liaison learning disability nurse, GP annual health checks, ID psychiatry)  **Signature of clinical advisor:**  **Date:** |

## Employer support

Please provide a statement of support from a senior clinician you work with (either in your workplace or the wider integrated care network)

| Name |  |
| --- | --- |
| Job title |  |
| Profession |  |
| Workplace |  |
| Professional registration number (or state if do not have one) |  |
| Email |  |

Please provide a statement from your employer confirming you will be supported to complete the training programme including attending tutorials, accessing learning opportunities, and completing workplace based assessments (i.e. regular time to access clinical cases over the first 6 month module, including time out of routine work environment to be spent with specialist teams, e.g. community learning disability teams, acute liaison learning disability nurse, GP annual health checks, intellectual disability psychiatry).

|  |
| --- |
| **Employer statement of support** |
| **I** confirm the applicant will be supported to complete the training programme including attending tutorials, accessing learning opportunities, and completing workplace based assessments (i.e. regular time to access clinical cases over the first 6 month module, including time out of routine work environment to be spent with specialist teams, e.g. community learning disability teams, acute liaison learning disability nurse, GP annual health checks, intellectual disability psychiatry).  **Signature of senior clinician at place of work:**  **Date:** |

## Declaration

Please sign below to confirm that you meet the following eligibility criteria.

I declare that:

* I am a doctor/nurse/allied health professional working at a senior level\* and caring for and having clinical responsibility for managing the health of people with a learning disability (you do not need to work specifically in learning disability services and can apply from primary care or secondary care).
* I have made arrangements to access appropriate experiences across all relevant healthcare settings for the duration of this course
* I will be able to undertake the required workplace-based assessments (case-based discussions, mini-clinical examination exercises) and obtain feedback from patients/carers and the multidisciplinary team

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| --- | --- |
| Signature |  |
| Date |  |

\*Doctors working at a ‘senior level’ include:

Consultants or senior resident doctors (ST5+ or equivalent) in any relevant specialty

General practitioners (GPs)

GP resident doctors (ST3 or equivalent)

SAS doctors