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## SHAPE OF TRAINING

*Approved*

### **Minutes of the meeting on 19 September 2013**

#### **Members present**

Stewart Irvine  
Tony Weetman  
Ian Cumming  
Keith Gardiner (by phone)  
Terence Stephenson  
Paul Phillip (on behalf of Niall Dickson)

#### *Staff Present*

David Greenaway  
Vicky Osgood  
Jessie Moye  
Stuart Carney

#### **Apologies**

Derek Gallen.

#### **Item 1 - The way forward**

1. VO outlined the next stages for the review, once it has been agreed by the SB that the recommendations will be taken forward.
2. VO invited members to provide final comments on the report by 11 October. After this date comments will be incorporated in the report and copy will be sent to interested organisations such as the BMA, NIHR etc.
3. Vicky explained that the launch date for the report is 29 October. This will not be a media event, but a publication of the report online. Members of the executive team will be available on this date to answer questions.
4. Secretariat support for review, provided jointly by the GMC and HEE should continue at the time of publication and after.

5. There is an appetite for taking things forward and quickly, particularly from the CMO's in each of the four countries and the possibility to implement pilots to take this work forward.
6. TW asked if the report could be shared with relevant executive committees. The report can be shared with executive committees and boards, though this is not to be seen as another phase of consultation.
7. VO updated the group on various meetings with CMO's and Ministers in each of the four countries; there was overwhelming message that they support the report and it fits with their direction of travel. Some concerns have been raised around moving full registration to the point of graduation. Emphasis made on the move to generalism and support for credentialing.
8. Report will now go to the Ministers through CMO's in each of the four countries.
9. HEE revised mandate scheduled for late December/early January, which will enable HEE to take a lot of this work forward.

#### *Delivery group*

10. All agreed delivery group should be the way forward but it needs government buy in from the four countries.
11. This group could be formed by the Sponsoring Board organisations, but must include representation from the BMA and a direct employer contribution from each of the four countries if possible.
12. Certain elements of the report will be taken forward much faster in some areas of the UK; this will need to be effectively managed. Implementation should be UK wide.
13. There must be a line of accountability for the delivery group. Scrutiny could be constructed around the CMO's.
14. Next phase of the work will be around reviewing and creating the curricular around generic professional capabilities and identifying the groupings of specialties. Important to recognise the difference between curricular and syllabus, syllabus being more detailed and for the royal colleges to update, with curricular being approved more widely by the GMC.

#### **Item 2 – Draft of final report for discussion**

15. There is a sentence in the report which says 'doctors should be able to progress at their own rate'. We do not want to be encouraging doctors in training to

decide how long they want to train for. This needs adapting to include 'within the overall training programme'.

#### *Full registration at the point of graduation*

16. HEE support this recommendation. General support from the board.
17. Views on national licensing exam varied. HEE aligned this with the move to full registration at graduation, as a national exam would provide a test of safety. Important that we ensure people are safe to practice at the point of graduation and that there are relevant assurances in place to the public and profession. MSC do not support a national exam. Existing assessments and tests such as SJT's and prescribing skills exams should be enhanced to ensure this safety.

#### *Foundation Programme*

18. The board agreed that foundation programme should continue to exist in its current structure.
19. There is a financial constraint; unfortunately this has not been undertaken in the course of the review due to time pressures.
20. There was a discussion about those who do not get into foundation training. There will still be a degree of supervised practice in the new model. Currently you cannot progress to higher training unless you have a completion of foundation training, which allows some control over who can and cannot progress.
21. Suggestion of revalidation two years after beginning foundation training. Some form of this already exists where a person has taken time out of a recognised training programme, they must show they are still fit to practise.

#### *Certificate of Specialist Training (CST)*

22. The report recommends the length of this training to be four to six years; there have already been suggestions to increase this to seven years, particularly for the craft specialties.
23. Members agreed the duration of CST should be four to six years.
24. Optional year out within the six years, rather than in addition. This needs more clarity, should not be encouraging research for the sake of research. Also need to be clear that this is not a year out of programme.
25. Four year GP training not explicit in report and is not in the recommendations. Members were happy with reference to this in report, rather than being part of any recommendation.

26. CST should not be perceived as a sub consultant grade; this has already been made clear in the report. Should be more explicit that those with a CST are eligible to be appointed to consultant grade. We have been careful not to allocate the new model to existing levels due to the current on-going negotiations.

27. Members questioned the standing of CST in other countries.

#### *Academic training*

28. Importance of flexibility for academic training. Academics will maintain a generalist practice, yet there are those who want a career in a niche area of research. There should be flexibility in the system to allow for those very few people to go down that route. This should be detailed in the academic training annex.

29. There must be a parallel route for academic training.

#### *Alternative routes to registration*

30. This does not appear in the final report as we were asked to look at training and those on alternative routes are not within training.

31. Credentialing routes should be made available to those who are not 'in training'. This should also apply to overseas doctors.

32. Should be stated more explicitly in report that CESR will have equivalence with what we are now proposing.

#### *Credentialing*

33. Members agreed that credentialing should be applied nationally in the four countries and quality assured by the regulator.

### **Item 3 – Presentation by David Greenaway**

34. As a number of elements of the report had already been discussed by the board, DG presented slides on the recommendations in the report, the group then discussed the recommendations in more detail.

#### *Recommendations*

35. Generic capabilities framework – the recommendation should be more explicit about what we mean by these capabilities, such as communication, safety, quality improvement etc.

36. Within a competency based framework there has to be scope for people to accelerate through a niche training pathway, although this may be an exception, this

extra degree of flexibility should be possible within the new structure of training. This should be made explicit in the annex.

37. Implementing broad based training is the penultimate recommendation, yet it is the thrust of the entire report, confusing that this recommendation is at the end, but is due to the structure of the report. This element should be emphasised more in the executive summary.

38. Recommendation 15, credentialing and CPD should be two separate recommendations.

39. Any reference to a delivery group should be referenced as a 'UK wide delivery group'.

#### *Next steps*

40. Concerns were raised that the work undertaken and proposed model of training is not affordable. Members highlighted that this should not get in the way of stopping the direction of travel.

41. Members have until 11 October to feedback any additional comments on the report. Publication date is currently 29 October; DG will be available for comment on 29<sup>th</sup> and sponsoring board organisations offered to be available on the 29<sup>th</sup>. On day of publication sponsoring board organisations to give statement outlining their support and continued commitment to this work.

**Action:** JM to circulate slides to SB members to share with their organisations.

#### **Item 4 – AOB**

42. None.

This was the final meeting of the Shape of Training Sponsoring Board.

Members have until the 11 October 2013 to comment on the final report.