

School of Medicine Report for Training Committees and Faculty Groups

Last Updated: 10th February 2013

Head of School:

- My Deanery days are:
 - 2nd and 4th Tuesdays of the month
 - 1st and 3rd Thursdays of the month
 - Every Friday
- I have heavy clinical commitments on my non-Deanery days, so I will be more likely to be able to attend RTCs etc if they are held on one of my Deanery days.
- I will update this written report regularly for use if I cannot attend RTCs and for use at Faculty Group meetings. The most recent report (and previous reports) can be downloaded from the trainer section of the website
https://www.eoedeanery.nhs.uk/medical/page.php?page_id=2212

Shadow LETB:

- Which of the current Deanery functions will remain in the LETB and which will be devolved to Local Workforce Partnerships is still not very clear
- **Email:** The “eoe.nhs.uk” email accounts are being closed and all shadow LETB staff are moving to “nhs.net” accounts. If you want to be sure that your emails are read, please use the recipient’s “nhs.net” email. Mine is i.barton@nhs.net

Administrative Support:

- There is still a recruitment freeze for permanent staff and there are still a number of temporary staff in the secondary care team; please continue to be supportive to them
- Hannah Keen’s final day was 8th February and I am sure you will all join with me in thanking her for her hard work
- If you need support from the secondary care team in the Shadow LETB, please contact Philomel Pike (philomel.pike@nhs.net)

Website:

- Please review your Speciality’s/Trust’s section of the website regularly to ensure it provides up to date information relevant to current trainees and those considering applying for a post with you. When you want to make changes, please liaise with Sarah Amery, whose new easy to remember email is eoempd.mpd-webofficer@nhs.net

Quality Management:

EoE Deanery: Head of School of Medicine Report

- The dates for the **2013 GMC Trainee Survey** are Tuesday 26 March 2013 (census date) to Wednesday 8 May 2013. Any patient safety concerns relevant to your speciality or Trust which will be forwarded to you during this period.
- If you wish to carry out a local survey of your training programme using the **Bristol on Line tool**, please contact Nikolett Muller (Nikolett.Muller@nhs.net). The School strongly recommends you do this

ARCPs

- The Chairman of every ARCP panel must have attended the Deanery's **Revalidation for Doctors in Training** course. If you have not yet completed this training, please contact Monika Kovacs (Monika.Kovacs@nhs.net)
- If you anticipate that a trainee is going to receive an unfavourable outcome (3 or 4), please send me details so that I can arrange for one of the Deputy Deans or me to be present if appropriate
- If an ARCP panel feels that a trainee should receive an outcome 3 or 4 and there is no Deanery representative present, please do not issue an outcome. Save the ARCP form in draft and re-convene a panel at a later date with appropriate Deanery representation
- The School presented a case to the Shadow LETB to retain face to face ARCPs; I am chasing up the outcome of this consultation

Posts currently occupied by London Deanery trainees

- The posts formerly occupied by London Deanery trainees will now be filled with trainees from one of the two North London LETBs – North Central & East (NCEL) and North West (NWL). We will need to establish agreements with these two bodies to try to ensure that the posts are filled equitably and that we get feedback on the quality of training in these posts

Review of Distribution of Training Posts

- All training programmes have been asked to take part in this and approximately half have responded so far; this is a large piece of work but at the end of it we hope that our training posts will be distributed in a way which delivers all the training curricula in the optimal way

FfIT:

- The School was able to utilise all of its £125k FfIT allocation for this financial year by the January 31st deadline. Items funded included simulation equipment and training sessions, mock PACES, licences for Medical Masterclass, and Low Cost, High Volume Training Days
- We are hoping for a similar allocation next year

Recruitment

- There appear to be about 1200 ST3 posts in the RCP-coordinated specialties available in 2013 with a similar number of trainees completing CMT; vacancy rates are therefore likely to be higher
- The 2013 ST3 round 1 recruitment window will be from 8th April until 9th May
- MRCPI will be accepted as an equivalent exam to MRCP(UK) for 2013 recruitment but not for 2014
- The Joint Working Group on Speciality Numbers have agreed the following changes in post numbers for 2013 in England in the physicianly specialties: Allergy +2; Clinical Genetics -2; Dermatology +6; Gastroenterology -5; Geriatrics +15; Renal -6; Respiratory -10; Endocrinology & Diabetes -5; Medical Ophthalmology +2. Decisions about which LETBs will lose posts will be based on weighted capitation. CMT numbers will be preserved
- The DH has stopped the recruitment of locally-appointed LATs nationally

Medical Training Initiative

- Please remember that the first stage in this process is to complete an application form and to seek Deanery approval. If you have any queries, please contact Lynsey Poole (Lynsey.Poole@nhs.net)

Heads of School Meeting RCP: 19th December 2012

The following items not discussed elsewhere in this report were discussed (taken from the minutes as I was unable to attend for personal reasons):

- From December 2012, MRCP and SCE results will download directly in to trainees' ePortfolios
- Some Schools are arranging "tasters" for CMTs and the possibility of these being made nationally available is being promoted so that trainees can get a taste of different areas of the country.
- Dr Alison Amos and Brigadier Peter Fabricius are heading a Department of Health working party to examine the difficulties in Acute Care (including the role of the medical registrar) and they have requested representatives to join the working group. Most of the solutions will be longer term; however a short-term solution would be to approach the Border Agency to remove the restriction to employing foreign doctors.
- Post CCT Fellow posts should deliver training additional to that delivered in the speciality's curriculum; Curricula should be developed with specialist society/SAC input; the JRCPTB will have a regulatory role
- WPBA pilot: This is likely to continue for a further year in the current three Deaneries, but rolled out to all specialties; Since I agreed that EoE could act as the "control" group, I have not heard anything further
- The GMC's proposal that all trainees must migrate to the most current curriculum was noted
- There is concern that the GMC's proposal that trainees be allowed only two weeks' time out of training (e.g. for ill-health, compassionate leave, maternity leave) per year before needing

to extend training time will be implemented inconsistently across the country; I had already asked for this to be discussed at the next Deanery Heads of School meeting.

- There is growing support nationally for higher specialty trainees to rotate in September.

Ian Barton

Head of School