JOINT TRAINEES' STATEMENT ON SHAPE OF TRAINING

Issued on behalf of the Trainees' Committees of the Royal College of Physicians of Edinburgh, Royal College of Physicians and Surgeons of Glasgow, Royal College of Physicians of London, Royal College of Surgeons of Edinburgh and the Scottish Academy Trainee Doctors' Group.

Following the Shape of Training workshops we feel now is the time to reiterate our position. High quality patient care is our priority. We welcome many aspects of the Shape of Training Review; broad-based training programmes in the early years of training, apprenticeship-based training, transferable competencies and greater flexibility during training. However, the proposals will not solve the current problem at the front door of medicine. If we get this wrong it will have a disastrous impact on future recruitment of doctors, and therefore patient care. We must not forget the lessons of Modernising Medical Careers (MMC). Excellent training ensures high quality and safe care for our patients. In order to achieve this it is essential to:

- **Train doctors capable of delivering high quality patient care**
  Managing risk and uncertainty are key skills for all doctors. Developing these skills requires both **training *and* experience**. Future Certificate of Specialty Training (CST) holders must have equivalence in training and experience to current Certificate of Completion of Training (CCT) holders; a CST must not be perceived as a lesser qualification. We must produce doctors capable of delivering the high quality of care our patients expect. This cannot be delivered in a shorter time frame than currently exists.

- **Ensure workforce sustainability**
  Unscheduled care is challenging and stressful and is not best served by tired and demoralised doctors. Sustainability must be built into any new proposals in order to attract and retain the best doctors. Medicine must be seen as an attractive career pathway.

- **Properly evaluate proposed changes prior to implementation**
  It is essential that any proposals to alter training be fully evaluated, with evidence to demonstrate that they will improve patient care. We advocate pilot studies and gradual change as opposed to a "big bang." It is vital that we learn from existing examples of evolutionary and effective practice e.g. the well-established links between primary and secondary care in diabetes and care of the elderly.

- **Avoid creation of a two-tier training system**
  Significant unanswered questions remain in terms of access, quality control, funding and the development and delivery of credentials. These need to be definitively addressed before radical changes are implemented. Credentialing must not be used as a lever to shorten training and create a two-tier system; instead it must be linked to workforce planning and have robust mechanisms for quality assurance.

- **Ensure stability and security for existing trainees**
  Significant unresolved issues remain around the transition period for current trainees into the new system. The General Medical Council requires all trainees to switch to any new curriculum that is introduced; this will be challenging if major changes were rapidly implemented. Any changes to the current system of medical training must be phased in to avoid destabilisation of the medical workforce and compromise of patient care; stability and security are vital for existing trainees to avoid attrition and exacerbation of the current recruitment crisis.

Many of the unintended consequences of MMC arose from rapid implementation and lack of proper debate. We wish to continue working with the Shape of Training Implementation Board to ensure that we continue to train doctors capable of delivering high quality patient care.

Dr Rosemary J Hollick, Chair, *Royal College of Physicians of Edinburgh (RCPE) Trainees and Members' Committee*
Mr Alex Vesey, Chair, *Royal College of Physicians and Surgeons of Glasgow (RCPSG) Trainee Committee*
Dr Ruth Dobson, Chair, *Royal College of Physicians of London (RCPL) Trainee Committee*
Mr Richard McGregor, *Royal College of Surgeons of Edinburgh (RCSEd) Trainee Member of Council and Chair of RCSEd Trainees Committee*
Dr Rachael Swann, *Chair, Scottish Academy Trainee Doctors' Group*

31 October 2014

Contact: Graeme McAlister, RCPE – g.mcalister@rcpe.ac.uk