







Trainee progression in August 2020 and beyond

Dear colleagues,

The past few weeks and months have been unlike anything our health and care systems have seen before, with unprecedented pressure on the structures and people that the public depends upon to care for them. Our four countries are now starting to move past this peak of the virus outbreak, with the Prime Minister announcing last week that we are past the peak in England. And crucially, that the NHS has not been overwhelmed in reaching this point.

We, the four statutory health education bodies for the United Kingdom, are proud of and incredibly grateful for the enormous contribution that has been made by doctors in training to the health service across our countries during this first phase of the pandemic.

The support of senior colleagues across the system, not least the Royal Colleges, has played a central role in enabling the NHS throughout the UK to meet the challenge of caring for patients during this difficult time. For your respective contributions, flexibility and leadership; thank you.

As we move past the peak, we must now ensure that doctors in training are enabled to progress their careers in the way that they would expect and deserve, and in the way that our systems need as we begin delivering the recovery and renewal phase. Collectively, we are hearing from trainees that this is a matter of great importance to them as they continue to make their valuable contributions to clinical services.

Together, we have moved with pace, purpose and agility over the last few months. It is clear that we must all continue to do so as we move forward. We have implemented new ways of doing things, reduced bureaucracy and maintained collective focus on quality and safety. While certain processes, including college examinations, have traditionally been set as milestones for trainees to progress, we are continuing to ask for maximum flexibility to support the service to receive the doctors it needs, in the right place and at the right time.

For example, we know that trainees set great store by the ARCP process: delivering this using modern technology where possible is a positive step forward for the whole system, not just in these exceptional times. Our Medical Directors and Deans are working with all the colleges to ensure we deliver annual reviews on time, unless there are exceptional reasons for delay, and that these are fair for trainees and informed by College's knowledge of the required standards for working clinically. With respect to college examinations, where possible we ask that remote access to machine marked exams is delivered. We are committed to assisting colleges in doing this across the summer to ensure progress and that no group of trainees is disadvantaged. Where new ways of delivering examinations are possible, such as moving to multi-site, low number diets, again we stand ready to assist and ensure that together we deliver the right solution for our trainees and the health service.

If doctors in training are prevented from progressing due to our systems and processes not keeping pace with the context in which we now find ourselves, there will not only be an impact on the service and patient care now, but also on these young doctors' careers for the foreseeable future, and on the future intake of doctors into each specialty.

This is a challenge to our whole system, and so must be met through cross-system ownership. We will continue to depend on the colleges to work with us to deliver clear and flexible alternative approaches to progression for all of our trainees. In so doing, we can minimise the risk to our health services of delayed progression, rapidly inform and assure our service leaders and doctors in training about proposed solutions, and demonstrate clearly that we are working together to support them at a time when their contribution is arguably greater than ever.

Yours sincerely,

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