

EXECUTIVE SUMMARY OF THE MEETING OF THE ACADEMY OF MEDICAL ROYAL COLLEGES ON 7/8 SEPTEMBER 2005

Doctors in Iraq

The Academy considered a letter from Mr Nick Boyd, Head of the International Division of the Department of Health, which indicated that Government funding had now been identified in order to support a programme of training and development for Iraqi clinical staff. This followed a visit to Iraq, and subsequent reports, from Dr Bill Kirkup the Acting Deputy Chief Medical Officer, which helped to define the proposed model of clinical training and secure the necessary funding.

The Chairman suggested that he liaise with Professor Neil Douglas and Mr Paul Hunter in order to explore the possibility of drawing together a consortium that could tender to undertake this work. It was pointed out that the General Medical Council should be involved in this process.

Professor Dunlop indicated that this issue would also be discussed at the next meeting of the Joint Consultants Committee and agreed to liaise with the Chairman on this matter.

The Academy also considered a letter from Dr Edwin Borman, Chairman of the BMA International Committee, also drawing attention to the need for training and personal development. Dr Borman point out that there was an urgent need for evidence based distance learning resources and accessible, concise clinical guidelines. If any member of the Academy felt able to provide distance learning packages they were asked to contact Dr Borman direct.

Confidentiality and Consent

The Chairman reported that he and Dr Wilkie had written a joint letter to Mr Richard Thomas at the Information Commissioner's Office regarding *The Care Record Guarantee* guidance, which it was felt would greatly inhibit teaching and training to the detriment of the care of patients in the long term. It would also inhibit doctors from consulting with their colleagues, particularly in case management discussions.

Professor Husband reported that her College had received a reply to Dr Paul Dubbins' letter regarding *The Care Record Guarantee* from Mr Harry Cayton, Chairman of the Care Record Development Board. Mr Cayton indicated that he welcomed the broad support for the Care Record Guarantee. The Development Board appreciated the important role that radiology played in treatment and diagnosis and it was not their intention that *The Care Record Guarantee* would hinder the training of staff as long as appropriate patient confidentiality was being respected.

The Board had several practicing doctors, some actively involved in teaching, associated with the Care Record Development Board and Mr Cayton suggested it might be helpful to meet with one of them.

It was agreed that a small group, which would include the Chairman, Professor Griffiths, Professor Husband, Professor Sir James Underwood and Dr Wilkie should meet Mr Harry Cayton in order to discuss the matter further. It was agreed that Professor Husband should lead this group and agree a convenient date.

Faculty of Medical Management and Leadership

The Academy considered a letter dated 22 July 2005 from Mr Andrew Foster, Director of Workforce at the Department of Health, requesting the Academy lead some work to see if there were support for a Faculty of Clinical Management and Leadership.

The Chairman reported that he was setting up an initial meeting with Professor Dame Carol Black, Dame Gill Morgan from the NHS Confederation and Dr Jenny Simpson from the British Association of Medical Managers to consider how this might be taken forward and would report back to the next meeting of the Academy.

Modernising Medical Careers UK Strategy Group

The Academy considered a letter from Dr David Salter, Acting Chief Medical Officer, Welsh Assembly Government, inviting the Academy to nominate two representatives (one each from primary and secondary care) to the MMC UK Strategy Group.

The Academy agreed that the Chairman should automatically be a member of the group. This would currently mean that a representative from primary care was also needed and Dr Mayur Lakhani agreed to be nominated. If, in future, the Chairman of the Academy came from primary care, then a representative from secondary care would be sought.

The Chairman reported that there had been a meeting of MMC earlier in the day and that certain proposals regarding the overall plan for training of general practitioners, hospital specialists and public health doctors would be available on the MMC website on Friday 10 September.

It was stressed that entry criteria for ST1 should be agreed as soon as possible since doctors had already been recruited into F1 and would need clear guidance on their future training.

Professor Douglas requested that all Colleges/Faculties, which had not already done so, should ensure their revised training programmes were sent to MMC as soon as possible.

Cholesterol Testing

The Academy considered the response from Professor Parveen Kumar, Chairman of the Medicines Commission UK in respect of over the counter statins.

In her letter, Professor Kumar indicated that the Medicines Commission did discuss the Academy's letter and stated that:

- The Commission had no remit to cover the issues raised and suggested the following course of action:
 - Concerns relating to advertising should be reported to OFCOM
 - Issues relating to appropriate training of pharmacists and advice to customers should be referred to the Royal Pharmaceutical Society of Great Britain

The Chairman agreed to write to OFCOM and the Royal Pharmaceutical Society of Great Britain and also to pursue the issue of quality assurance of cholesterol testing.

National Patient Safety Agency – Educational Module to Support Teaching of Patient Safety Issues in the 2nd Foundation Year

The Academy considered a letter from Dr Maureen Baker, head of postgraduate professional education at the National Patient Safety Agency, regarding the proposal to develop online material on patient safety for doctors in their second foundation year.

It was proposed that the Royal College of Physicians of London would lead on this work on behalf of the Academy and it was understood that Dr Patrick Cadigan, Director of General Professional Training at the College, had spoken to Professor Douglas about this initiative.

Dr Snashall indicated that the Council of Heads of Medical Schools had already undertaken work in this area and agreed to send information to Professor Douglas, in order to avoid unnecessary duplication.

Parliamentary and Health Service Ombudsman

The Academy considered a letter dated 3 August 2005 from Ann Abraham, Parliamentary and Health Service Ombudsman, regarding the naming of NHS staff in investigation reports. Ms Abraham stated that it would be helpful, in most cases, to name NHS staff against whom there had been a complaint, especially where the complainant already knew the name of the individual concerned. It was also felt helpful to name those where, if they were not named, it would be difficult for the complainant to understand the Ombudsman's decision. It was the intention of the Ombudsman to continue to use job titles where their use was regarded as effective as using the individual's name.

The views of the Academy were sought regarding these proposals and the Chairman indicated that the Royal College of Paediatrics and Child Health would have reservations regarding this issue in respect of child protection cases. Others might also have reservations.

It was agreed that, before responding, it would be helpful to discuss the matter at the next meeting of the Joint Consultants Committee and the secretariat agreed to send the correspondence to the JCC secretariat. Once the matter had been debated at JCC it would be considered again at a future meeting of the Academy.

Meeting with the Secretary of State

The Chairman reported that the date of the next routine meeting with the Secretary of State had been agreed and would be on 14 November 2005 between 2.15 – 3.00pm.

The Chairman asked all members of the Academy to suggest topics for discussion, which could be considered at the next meeting of the Academy on 27 October 2005. Once the topics to be discussed had been finalised, a small group could be nominated to attend.

The Postgraduate Medical Education and Training Board (PMETB)

It was agreed that it would be helpful if the Academy and PMETB could develop a high-level Concordat and Professor Rubin and the Chairman agreed to liaise in order to produce a draft that could be considered by both organisations.

The Future of the Academy's Education Committees

The Academy considered a paper from Professor Douglas regarding the current structure of its Education Committees.

There was currently a small strategic Education Committee with members and educationalists from the Colleges and Faculties as well as the chairmen of the two subcommittees (Specialty Training Committee and Foundation Training Committee). There were also representatives from the Academy's Patient/Lay Group, Trainee Doctors' Group, Conference of Postgraduate Medical Deans, General Medical Council and the Postgraduate Medical Education and Training Board.

The Specialty Training Committee was composed of College/Faculty training leads and trainees. It had liaised with Modernising Medical Careers and it had also provided the General Medical Council's Performance Assessment Implementation Group with contacts for specialty related work.

The Foundation Training Committee, which was adopted by the Academy after it was set up, had produced the Foundation Curriculum and was leading its revision in 2006. The membership was being reviewed to ensure that all Colleges/Faculties and trainees were represented.

Professor Douglas suggested that an Assessment Committee should also be convened which would comprise assessment leads from each of the Academy's constituent members, plus appropriate education, trainee and lay input. Professor Douglas indicated that the lack of such an assessment group had hindered work with

PMETB, developing joint policies and could assist in the initial work of the Medical Assessment Partnership Board.

It was suggested that such a group be set up and meet once, in order to establish its remit, and then, where possible, undertake work via an e-group. Professor Douglas agreed to progress this matter.

Medical Assessment Partnership Board

Professor Douglas reported that the Medical Assessment Partnership Board, of which he was Chairman, had had its first meeting on 6 July 2005, the Minutes of which were included in the agenda papers.

The Board's membership was made up of representatives from the Academy, Conference of Postgraduate Medical Deans, Council of Heads of Medical Schools, General Medical Council, National Clinical Assessment Authority, Postgraduate Medical Education and Training Board and the Royal College of General Practitioners.

The Board had agreed its Terms of Reference, which were as follows:

The Medical Assessment Partnership Board will facilitate collaboration between bodies involved in the assessment of medical professionals within the United Kingdom and abroad. The Board aims to improve and share expertise, minimise reduplication and develop joint approaches to assessment.

The Board agreed that it should concentrate on principles, not operational matters, and considered a number of areas for collaboration.

The following four were agreed:

- Sharing of banks and question production techniques
- Specifically designed assessment premises
- Workplace assessment
- The work of psychometricians

Professor Douglas agreed to keep the Academy informed on the progress of the Board.

Common Approaches to Appraisal and Revalidation

Dr Alastair Mason joined the meeting to give a presentation on the work he was undertaking for the Academy on common approaches to appraisal and revalidation.

Dr Mason indicated that all members of the Academy had now responded to his request for information on revalidation and he reported that he had gathered examples on good practice such as templates for peer assessment, patient surveys, self declaration forms, certification of continuing professional development, national audits and invited service reviews. He went on to say that the Colleges had been concentrating on standards rather than how evidence was gathered.

It was stressed that there was an urgent need to identify what evidence doctors should gather in order to facilitate their revalidation.

Dr Lakhani expressed concern that work on this project should not be allied too closely with the General Medical Council's model of revalidation.

The Chairman indicated that he would discuss the work the Academy was undertaking with the Chief Medical Officer to ensure the work plan was acceptable to him.

It was agreed that the Academy would continue with the project and the next steps would involve:

- Development of the evidence required of a practitioner's probity and health
- Development of the evidence about a practitioner following 360° feedback
- Assessment of criteria for continuing professional development
- Identification of processes that manage risk, assure safety and improve the quality of services
- Identification of factors to help recognize doctors at risk of not being fit to practise

The Academy's Perception Audit

Professor Dame Carol Black gave a presentation on the future role of the Academy and asked members of the Academy to consider the full report from the BPRI. Following discussions, it was agreed that in order to move forward a work plan should be drawn up. This work plan could be used as a basis for discussions between the Chairman and Mr Andrew Foster, Human Resources Director of the Department of Health.

Items suggested during the meeting included:

- Medical Management
- Revalidation
- Training of Cancer Specialists
- European Working Time Directive
- Service Provision
- Non-medical practitioner roles
- Health Inequalities
- Safe Sedation
- Molecular Medicine

The Academy agreed that in order to take these matters forward the secretariat would need to be increased and that a researcher and public relations expert should be engaged.

Dame Carol asked all members of the Academy to send her their suggestions, which should be generic, topical and ideally link with the Department of Health's plans for the delivery of healthcare and training and education.

She would then convene a meeting of the small Academy working group she chaired that had commissioned the perceptions audit in order to produce a draft plan that could form the basis for discussions. Members of the working group were Professor Bill Dunlop, Professor Rod Griffiths, Mr Paul Hunter, Mr John Smith and Professor Sir James Underwood.

Training of Cancer Specialists

The Academy considered the Minutes of the meeting on 15 July 2005, which had been convened to discuss the training of cancer specialists and was chaired by Professor Dame Carol Black. Professor Niall O'Higgins' letter regarding the training of doctors who treated cancer, which he believed was sub-optimal, had prompted the meeting. Dr Mike Richards, from the Department of Health, was also present.

It was noted that some universities and medical schools had no specific programme, nor was surgical oncology a recognised specialty in the United Kingdom.

Professor O'Higgins believed that it should be mandatory that all trainee specialists involved in cancer care should spend time as full-time doctors in other specialty departments. Thus medical oncology and radiation oncology trainees should spend time in surgical oncology and all surgeons involved in cancer care should spend time in radiation therapy and chemotherapy. The group believed that this was important in order to improve training and benefit patients.

Dr Richards indicated that he would find it helpful to be able to communicate with a committee that was 'the voice of cancer' that brought together all those with an interest in the treatment of cancer.

Dame Carol asked if the Academy would be prepared to endorse the suggestion and it was agreed that an Intercollegiate Cancer Committee should be established, under the auspices of the Academy, which would include representatives from all relevant Medical Royal Colleges and Faculties and a wide range of clinical groups, including nursing and allied health professionals.

Dame Carol agreed to contact Dr Richards to let him know the Academy's decision and discuss how the Committee might be resourced. The Chairman also agreed to discuss this Committee with Mr Andrew Foster since it could be included in the Academy's future work plan.

Intercollegiate Academic Board of Sport and Exercise Medicine (IABSEM)

The Academy considered correspondence from Professor Charles Galasko, Chairman of the Intercollegiate Academic Board of Sport and Exercise Medicine, which indicated that the Specialist Training Authority (STA) had accepted the training programme of IABSEM. STA had contacted the Department of Health to report that agreement had been reached on the content of the curriculum and to request that the Specialist Medical Order be amended to include Sport and Exercise Medicine.

The Royal College of Physicians of London, via the Joint Committee for Higher Medical Training, would act as a single pathway for channelling CCT recommendations and STA had agreed that this would be easier administratively and avoid the need for a completely new infrastructure to be developed.

The Academy believed that the Board should re-consider how it reported to its constituent bodies and noted that neither the Royal College of Anaesthetists nor the Royal College of Psychiatrists were members.

The Academy noted that the Board would change its name to the Intercollegiate Faculty of Sport and Exercise Medicine and the Chairman agreed to write to Professor Galasko informing him of the Academy's discussions.

The Joint Consultants Committee

Professor Dunlop reminded members of the Academy that there was to be a conference *Breaking with Tradition* on Wednesday 5 October 2005 to which all Presidents had been invited. A further five places were available and details of the conference had been circulated to all members of the Academy so that they could suggest suitable nominees. The names of nominees should be sent to the JCC secretariat.

The Chairman reported that Professor Sir James Underwood, who represented the Academy on the Independent Healthcare Advisory Group, demitted office in November and a replacement was sought.

It was suggested that Professor Sheila Hollins might replace Sir James and the Chairman agreed to discuss the matter with her and then contact JCC if she felt able to undertake this commitment.

Consultation on Code of Conduct for Payment by Results

The Chairman asked all members of the Academy to send their responses to the above to the secretariat. Once these had been received a decision could be reached on whether or not to produce a generic response.

Professor Dunlop reported that the topic would be discussed at the next meeting of the Joint Consultants Committee on 11 October 2005.

Funding for Postgraduate Education in England

The Academy considered a letter dated 17 August 2005 from Lord Warner regarding the above as well as a copy of a letter dated 14 July 2005 that Professor Winyard wrote to Sir Nigel Crisp.

Lord Warner indicated that detailed training budgets were announced on 8 August 2005, which represented an increase nationally of 7.4 per cent over the previous year.

As far as ring-fencing was concerned, the allocations letter to Strategic Health Authorities made it clear that the NHS training budget was provided to sustain the workforce of the future and that continued year on year increases in brokerage to help out with service pressures was unacceptable. The letter also stated that levels of brokerage would be monitored to ensure that the total funds allocated were used for education and training.

Lord Warner also agreed that it was important that changes being introduced through Modernising Medical Careers were appropriately resourced and that £73 million had been allocated for the new Foundation Programmes in 2006/7 and 2007/8.

Whilst it had not been possible to undertake a similar exercise for specialty training programmes, the Department of Health was working closely with Colleges and Faculties to finalise arrangements for implementation in August 2007.

£3.7 million would be allocated this year to meet the infrastructure costs, agreed with the Postgraduate Deans, to support the reforms and the Department of Health would continue to work with the Postgraduate Deans to identify costs in future years.

Professor Winyard indicated that final allocations had still not been made and agreed to keep the Academy informed. He went on to say that it was essential that long-term investment for postgraduate education be sustained. The Chairman indicated that the Postgraduate Deans had the Academy's support in this area.

Adolescent Health – Improving the Transition from Paediatric to Adult Services

The Academy considered the draft report *Improving Transition from Paediatric to Adult Services*, which had been prepared by Professor Sir David Hall on behalf of the Department of Health.

The Department of Health was planning a meeting to promote the programme of work on adolescent transition, which was expected to take place in March 2006. The Department of Health had also allocated funds to develop the project

The Academy was asked to support the draft paper and also provide feedback on the document.

The Academy agreed to endorse the document and the Chairman asked all members of the Academy to send their comments on the draft document direct to Sir David.

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