The Academy identified six Principles for reintroducing healthcare services to be used as an aid to promote safe and effective healthcare as we move into the next phase of the COVID-19 pandemic, that of beginning to recover and restore life in general as well as health and care services. The delivery of care will, undoubtedly, become more difficult with more conflicting demands and added pressures. The concentration of medical resources to accommodate Covid cases has moved to a gradual restoration of more complex planned care in an endemic situation with a backlog of people needing interventions and new ways of delivering care becoming more accepted.

Therefore, as the situation evolves, it has become ever more important to maintain clear, recognisable ways to address the need to maintain a trained workforce.

During the pandemic education and training have upskilled the NHS workforce and made them 'Covid ready' in a way that has demonstrated both the value and quality of excellent basic education for all healthcare staff in this country.

However, the need for a return to training, education and professional development in order to provide the essential pipeline of healthcare staff and proper career progress for medical staff as well as to learn from and reflect on the COVID-19 pandemic must not be overlooked even in the context of increased service pressures and likely reduced productivity.

The Academy has written to all involved in the delivery of medical education to ask education and training are included in plans to restore services.

We would like to highlight the following:

— All service plans to restore and re-model services must include attention to education and the need for dedicated time to deliver high quality supervision and teaching — including in previously unrecognised locations, such as independent sector facilities and in dealing with backlogs.

— New mechanisms for education, training and assessment must be developed and operationalised as a matter of urgency. Work is already underway by many Colleges and others and this forms a basis for the way forward.

— Ensuring there is patient understanding and support for the continued need for training and its delivery in different forms.

— Recognition of potential additional time and space requirements for training to accommodate distancing requirements.

— Time for Continuing Professional Development, reflection and appraisal must be allocated as a matter of urgency to consolidate the learning from COVID-19 and to provide opportunities to support staff.

— Finding ways to capture the various new multi-disciplinary team delivered services and to provide training to maintain and grow these.
— Recognition of the backlog in medical research and difficulties in delivering clinical research alongside the need to address the effect of COVID-19 on academic training is vital.

— The need to capture the experience and learning of trainees who have worked and learned through the pandemic.

— The Academy Trainee Doctors’ Group has produced a document on education and training.