MODERNISING MEDICAL CAREERS: OVERVIEW OF PROPOSED SPECIALTY TRAINING FRAMEWORK

Introduction

Modernising Medical Careers (MMC) is a major reform of postgraduate medical education agreed by all four UK Health Ministers. It is intended to improve the quality and safety of patient care through better education and training for doctors. The overall aim of MMC is to develop high quality, well-trained doctors who can deliver the care and treatment patients need in the modern NHS. This will be realised through structured training programmes that make full use of service experience.

Current work is focussed on developing training structures and assessing how they can best be utilised to achieve NHS service goals and to provide doctors with an improved educational experience and satisfying careers.

MMC Proposal

This diagram summarises the intended future structure of the MMC proposals:

**UK MMC Career Framework Proposal**

Run-Through Training

Reformed specialty training will deliver a workforce of practitioners, trained to the level of the Certificate of Completion of Training (CCT). This will make possible the improvement of both productivity and the performance of teams that currently depend on doctors at, for example, SHO level who have yet to complete their training.
A workforce including CCT-holding doctors will be produced mainly through managed programmes of “run-through” training leading directly from the Foundation Programme launched in August 2005. Run-through programmes will focus on helping doctors to achieve the competences set out by the specific curriculum for that programme once they have successfully competed for and gained entry to it. Subject to satisfactory demonstration of progress, all doctors who begin run-through programmes will leave the programme with a CCT. Given that programmes will be more broadly-based in early years, doctors must understand that their career options will be determined by service requirements.

The duration of training in individual specialties, including GP training, is not fixed and will depend on the rate that each individual doctor can demonstrate competences. Competences are to be interpreted broadly, under the seven headings of Good Medical Practice, not only the ability to perform techniques.

**Time-Limited Training Contracts**

As well as run-through training, there will be an alternative training provision, which would comprise time limited fixed term contracts likely to be no more than two years in length. These years will offer doctors training with competences defined through curricula specifically for these years, which may map onto the equivalent specialty training curricula. One objective is to prepare the individual to undertake a service post although there will be further opportunities for these doctors to compete for run-through programmes.

This alternative form of training will not be the primary training route or a required step to specialty selection. In fact, these programmes may give further exposure to a range of clinical specialties and may in some cases differ significantly from the early specialty training programmes. Nevertheless competences gained could be taken into account if a doctor leaving time-limited training obtains a run through post.

Although these posts will provide some competences, there will not be any competitive advantage in undertaking a time-limited post as opposed to competing directly for entry into specialist (including GP) training. It is likely that time-limited posts will cover less specific specialty ground than run-through posts. Trainees leaving F2 will in principle only apply for a time-limited post if, following competition after F2, they do not gain admission into a specialty training programme. It may also be that the trainee did not gain admission into the programme of their choice and wishes to try again at a future date. Some, for whatever reason, may not wish to apply for specialty training from F2.

**Career Posts**

There is currently a ‘skill gap’ between those in trust doctor or “SHO equivalent” posts and staff grade doctors. The time-limited programmes proposed above provide one way of bridging that gap. Alternatively doctors in these posts may apply for run through training.
Good employers will choose to develop further the competences of staff in such posts to enable them to seek further promotion through competition, but as in any employment situation, the primary aim of the post is to undertake the job required. Doctors in service posts who do develop the necessary competences will be able to apply to the Postgraduate Medical Education and Training Board to gain access to the Specialist Register via the Article 14 route.

As a general principle, all posts designated as career posts will contain opportunities to undertake continuous professional development to develop competences, as well as service functions.