Foundation Programme Board (FPB) meeting

Date: Tuesday 11 December 2012
Time: 2:00pm
Venue: Room 8, Westport, Edinburgh and via videoconference across the four Deaneries

MINUTES

Item Action
1. Attendees

South East (Westport):
1. Dr Duncan Henderson (DH) – Chair FPB, South-East FP Lead
2. Ms Marlene Anderson (MA) – Lay representative
3. Craig MacLean (CMacL) - BMA Scotland Scottish Medical School Committee
4. Dr David McQueen (DMcQ) - Director of Medical Education, NHS Forth Valley
5. Prof Gary Mires (GM) – Scottish Deans Medical Education Group
6. Prof Bill Reid (WR) – Liaison Dean

West (2CQ):
7. Dr Andrew Todd (AT) – Chair of FP Curriculum & Assessment Group, West FP Lead
8. Dr Rob O’Donnell (RO’D) – BMA Scotland Trainee representative (FY2)

East:
9. Dr Andrew Russell (AR)– SAMD representative

North (Aberdeen):
10. Dr Kim Walker (KAW) – Foundation School Director, Chair of FP Operations Group, North FP Lead

In attendance: Mrs Eliza Raeburn (ER) (West)

2. Apologies

11. Dr David Bruce (DB) - Foundation Programme Lead - East
12. Mrs Kath Deans (KD) – Foundation School Manager
13. Mrs Anne Dickson (AD) – General Manager – South East Deanery
14. Dr Greg Jones (GJ) – Chair of Academic Sub Group
15. Dr Jason Long (JL) - BMA Consultant Representative
16. Dr Brian Singer (BS) – deputy Foundation Programme Lead – East
17. Prof Paul Padfield - Scottish Government representative

3. Minutes of the meeting held 2pm Wednesday 20 June 2012:

The minutes of the meeting held 2pm Wednesday 20 June 2012 were accepted.

4. Matters Arising

4.1. Additional FY2 GP Posts – Business Case (DH for DB)

There is the potential for GP training to move to four years. This will
require additional funding. If the 4 year programme is implemented it is perhaps less likely that Foundation will get the additional funding required for the creation of new F2 GP posts.

AT advised the West has been exploring opportunities i.e. Care of the Elderly to Community. There is uncertainty on how best to progress, especially as there may be impact on service.

The FPB agreed initiatives which encouraged exposure to Community posts in FY should be strongly supported. A consistent approach across Scotland, coordinated with Curriculum mapping, will need to be agreed.

**Action:**
- Review of Additional FY2 GP Posts to be tabled for review at the March 2013 FPB meeting.

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### Scottish Medical School Graduate Numbers (DH)

FY programme for 2013 intake is oversubscribed. There are 894 Scottish graduates for 804 posts in Scotland. The peak of over production will be 2016, with 965 Scottish graduates predicted for that year.

The number of UK medical school graduates against UK Foundation posts remains an ongoing issue. Funding for extra posts to address this issue has been discussed by the 4 UK Health Depts. No decision has been reached as to whether funding will be made available.

Three options have been presented for consideration:

1. Proceed with existing FY and graduate arrangements ie there will be graduates without a medical post.
2. Fund one year to allow full GMC Registration
3. Fund two years to get trainees to FACD

Further advice will be available after 25 February 2013. The formal response and proposal for a way forward will be determined when individual graduate numbers for 2013 have been finalised.

The FPB needs to agree a strategic plan to address the approaching oversubscription and any potential increase in funded FY posts.

1. **Allocation**

The most equitable allocation will be to follow the 50/25/15/10 basis for W/S-E/N/E, as per Specialty Training. KAW noted that it should be clear not all applicants who remain unallocated on FPAS will be UK graduates.

**Agreed:**

FPB supported the 50/25/15/10 distribution of FY posts.

2. **Foundation Programme Post Distribution**

The FY1 year would likely have a Medical, a Surgical and “A.N. Other” post. KAW advised that as FY no longer requires an appointment in Surgery, it would be preferable to offer FY1 with one appointment to a Medical job and two “Others”. This would be an excellent opportunity to break the historical FY pattern.

AT advised that the West Deanery would not support an FY appointment
in Surgery. There have been previous incidents where FY1 and FY2 trainees had been required to address “front door” queries whilst the senior clinicians are in theatre. This compromises patient expectations and breaches regulations. Until this arrangement is changed, the West will not support additional Surgery jobs in FY1.

The FY2 year will focus on community posts. This will link in with the expectations from the Collins and Cook Reports. Options for two community facing appointments (eg paediatrics, psychiatry) and/or a GP post could be explored.

3. Service

Service will be supportive of extra FY posts. There will need to be a clear message that these posts will be time limited during the likely oversubscription of graduates from 2013 to 2018. Scottish Foundation has an opportunity to utilise extra FY posts to increase community placements, but will need to assess which posts are lost when we return to our original complement.

KAW recommended the additional posts should be where trainees will be offered the best Quality of Training from an educational perspective. All supported this proposal. WR noted that whilst this would be a suitable aspiration, other factors would come into play, such as the overall shape of services.

The FPB agreed further discussion be deferred until March 2013, when there would be better clarity regarding post numbers and funding. This would allow scope for a clear discussion of educational and quality requirements.

KAW reminded all that any review of graduate numbers does not exclusively relate to UK graduates, as Foundation recruitment overseas (mainly EU) applications.

Action:

- FPB members to await further information on 2013 UK recruitment numbers. To be discussed at the March 2013 FPB meeting.
- FP Leads to review and recommend places for additional posts within their individual Deaneries.

4.3. Night Shifts during Foundation Training

DH had presented the issues relating to Foundation posts without night shifts to the UKFPO Board. Some Trusts in England no longer have FY1 doctors undertaking night shifts. There are also a few FY2 rotations where night shifts are limited. The UK Board, including BMA trainee representation, was supportive of this stance. However, they felt it would be difficult to influence Foundation Trusts due to the funding issues involved.

Scottish Foundation mandates FY1 doctors undertaking nightshifts as it is an important part of training. It is noted that NHS Lanarkshire does not have F1’s doing night shifts. This can only be supported in the current
context of those individuals rotating to Units where they undertake night shifts.

5. **Implementing Foundation for Excellence Recommendations**

Initiatives to offer additional Community placements are moving forward. It was agreed that oversubscription/additional posts would help in this area.

Careers Advice - CMacL queried if there was information available relating to the events Medical schools had planned for 2013. GM confirmed that each school will have their own individual programmes. CMacL advised he had received feedback from an Aberdeen medical school student that careers advice had not been forth coming. KAW confirmed the North Deanery has a designated Careers and Advice Foundation Programme Director and will follow up with the individual trainee accordingly.

6. **Minimum requirements for Foundation Teaching Programme (KAW/AT)**

Coordination of a Taught Education and Curriculum Mapping event for 27 March 2013 has begun. This will aim to identify areas of duplication and ensure the new FY1/FY2 curriculum is delivered with a consistent approach across Scotland. Placements will be included in the review. AT noted that most of FP Teaching is still based on the “Rodney Mountain” document, which stipulated the taught programme at the start of the UK Foundation Programme in 2005. The introduction of a new FP curriculum had highlighted it would be timely to engage in a formal review of FP Taught Education.

Subsequent to the DOTS migration to ePortfolio, KAW and AT have initiated a LEARN Editorial Group (LEG). LEG will individually review and register all 100 modules, ensuring they remain suitable for FP purposes. DH/Board agreed that it would be helpful to differentiate mandatory employer modules, eg Child Protection and Equality and Diversity, and training modules eg prescribing.

The first meeting of LEG has been confirmed for 12pm 7 February 2013 (videoconference).

7. **National Training Survey 2012 key findings (DH)**

The National Training Survey 2012 has confirmed that satisfaction amongst trainee doctors increases with seniority, i.e. an FY1 is less happy than an ST. GP was reported as the specialty with the highest level of satisfaction; Surgery received the least positive response.

8. **IT requirements for ePortfolio (DH)**

IT requirements for ePortfolio remains an issue of concern for a number
of Health Boards. The eportfolio Server has, on one occasion, been unable to cope with multiple people logging on. However, it has been identified most problems relate to items 2 and 3:

1) NES Server, especially when experiencing high traffic (NES issue)
2) Internet Browser – specifically the outdated Internet Explorer 6 used by most Scottish Hospitals (Health Board issue)
3) Band width (Health Board issue)

FPB has noted the ongoing concerns relating to ePortfolio.

9. FY2 Destination Survey (KAW)

2012 FY2 Destination Survey report has confirmed that 67% of the total UK FY 2012 output went on to specialty training posts in the UK. One third did not proceed into specialty training in the UK.

There is currently no facility to track when trainees leave the country or when they return. It will be useful to review further and identify why FY doctors do not initially pursue a UK medical career.

The primary reasons FY2 do not return have been identified as follows:

- Geography: Some people want to stay, but their offered post is not within their preferred locale.
- Personal choice or other direction: person determines not to pursue a medical career or chooses another option
- Career break or pursuit of a medical career abroad

The number of trainees going to Australia and New Zealand is fairly stable.

KAW advised that 2012 data on Scottish doctors is currently being collated. Domiciled status has not previously been recorded, which may assist in future reviews.

All Deaneries were thanked for their input towards the snapshot of FY2 progression.

10. Patient feedback pilot (KAW)

Scotland has been approached to support a pilot for Foundation doctors and Patients Feedback. This will review 10 FY doctors who rotate through primary care.

As the East Deanery is already engaged in the SLE project, it was agreed this would not require to take part in the pilot. The West, South East and North Deaneries will need to determine appropriate hospitals for inclusion. A defined individual will also need to be identified who will collate, distribute and collect surveys.

It was noted that the SLE project at the East Deanery is time limited as it reviews the experiences of FY2 who undertake both the new curriculum and old FP curriculum.

Action:
• AT to review Southern General confirm if appropriate to survey and seek suitable administrator to support feedback pilot
• KAW to confirm identified hospitals and primary care rotations by 17 December 2012.

11. FP Annual report (DH)
The completed Foundation Annual Report has been forwarded to the UKFPO.
The full UK report will not be released until expiration of the time for appeal relating to the recent challenge against UK Foundation eligibility criteria (Kapenova challenge). The case was found in favour of DoH and UKFPO.

12. FP groups
12.1. FPA - Academic (KAW for GJ)
Noted – minutes 16 August 2012.
FPB formally thanked GJ, KAW, Jackie Aitken and the Foundation teams for running the FPA recruitment for 2013. KAW reported all had proceeded well.
Three parallel panels were provided at a central Edinburgh university location, all worked efficiently. FPAS had allowed the applicants to book their own slot and this had saved time. A new recruitment system had been used and whilst there were slightly less applicants, all were of a higher calibre. It is anticipated the FY Academic programme will fill all posts.
In summary, a lot of work but a strong, robust assessment. It had been good to use the smaller FPA group to assess the new FPAS recruitment system prior to the main FP intake.
CMacL reported feedback from some students that they had felt overburdened during the FPA application process. This may have related to existing commitments during their four month clinical block. He also enquired whether FPA had a 4 month research block. WR confirmed that each Deanery has a different approach. The North, South East and West don’t have a four month block but do have Academic mentoring and support and additional academic opportunity during their two Foundation years.

12.2. FPC&A - Curriculum and Assessment (AT)
Noted – Minutes of 20 June 2012 and 3 October 2012.

12.3. FPOG – Operations (KAW)
Noted - Minutes 21 August 2012.

13. Shadowing 2013
Agreed:
Shadowing Week 2013 will occur the week before FY1 Doctors commence work in August.
R’OD had received feedback from the NHS Lanarkshire Shadowing
Technical group that agreement had been reached over contractual issues relating to the four funded days of Shadowing. It included a 50/50 split between clinical Shadowing and Corporate Induction. DH clarified that he was unaware of any Deanery / DME input to these discussions. They related to the contractual/technical elements of Shadowing for the funded four days. The Scottish Foundation School, with local DME partners, planned to provide the usual 7 day Shadowing Week which had previously been highly successful. Deaneries should be clear with prospective F1’s that 3 days were voluntary and four days were funded/mandatory. This was obviously an improvement on the previous arrangement of 6 days voluntary and 1 day paid.

**Action:**
- Shadowing 2013 dates to be circulated via Foundation teams.

14. **Surveys and Events policy (KAW)**

Surveys and events are regularly circulated to Deaneries. The majority of these have little academic merit and a poor return rate. The UKFPO has a policy of not advertising to surveys and events to Foundation doctors and the FPB supported the introduction of a similar policy for the Scottish Foundation programme.

**Action:**
- KAW will circulate Survey and Events policy/wording.

Current ePortfolio access allows administrators to add events, updates, or alerts to ePortfolio. There is an assumption that this suggests the information been authorised by the FP. This arrangement needs clarification.

15. **NES ePortfolio Team Advisory Group (FP TAG) – Scottish Members (KAW)**

KD has been requested to seek a Scottish Clinical representative plus administrative contact for FPTAG. Suitable nominations will be sought from the Foundation Programme Directors (FPD).

**Addendum:**

Representatives were subsequently confirmed as:
- Clinical: Dr Julie Cash – FPD (West).
- Administrator: Dr Suzanne Nabavian - Foundation Training and Education Officer (North)

16. **AOCB**

No further business was presented.

17. **Next meeting:**

2013 dates will follow the UKFPO Board. Dates were subsequently confirmed for:
- 2pm Wednesday 13 March 2013, Westport Edinburgh (plus VC)
- 2pm Thursday 20 June 2013, Westport Edinburgh (plus VC)
- 2pm Tuesday 17 September 2013, Westport Edinburgh (plus VC)
- 2pm Thursday 12 December 2013, Westport Edinburgh (plus VC)