

# What will the future Service look like ?

1. **STREAMLINING** Care across Primary and Secondary care with trainees following these pathways
2. **CENTRALIZATION** and training following service development
3. **EXPLICIT FUNDING** for accredited units

# What will the future Service look like ?

1. 2 to 1

2. Foundation consultants and senior registrars

3. Breathless Physician

# What will the future training look like ?

**1. WORKFORCE – mainly in community (GPs & specialists)**

**2. EDUCATION – communication, simulation, reach for the stars**

**3. SERVICE – unscheduled care, scheduled care, community care**

# What will the future Training look like ?

1. Flexibility in models whilst being valued and supervised
2. Intermingling service and training
3. “Metacompetency” - professionalism

# Return to work after prolonged absence ?

1. All off for prolonged time need “assessment” for return to work
2. Distinguish Pre + Post CCT
3. Develop Deanery Good practice Guidance

# How will technology transform medical education?

1. Expand Deanery activity – Twitter/Facebook
2. Podcasts / Apps
3. MEF Project

# Remediation for failed revalidation

1. For trainees, ARCP should provide sufficient for revalidation but MD/DME need to communicate closely
2. Should Intrepid be used to record this information
3. Deanery (PSU) should market specific areas of expertise for remediation; funding depends on the nature of the problem

# Wessex Educators' Forum at the Haven

*“Excellent Training, Excellent Care – Wessex  
Deanery Fit for the Future ?”*

**The Haven Hotel 2012**