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SHAPE OF TRAINING

# Securing the future of excellent patient care

Final report of the independent review

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## Training structure for the future

In the report, we describe an approach to training in the future that will develop more broadly trained specialists. The key milestones in this model are outlined below:

- Full registration should happen at the point of graduation from medical school. Measures will need to be put in place to make sure graduates are fit to work as fully registered doctors. They will also be restricted to working in approved training environments.
- Following graduation, doctors will undertake the two-year Foundation Programme. Doctors must have opportunities to support and follow patients through their entire care pathway, both during medical school and in the Foundation Programme.
- After the Foundation Programme, doctors will enter broad based specialty training. Specialties or areas of practice will be grouped together. These groupings will be characterised by patient care themes (such as women's health, child health and mental health), and will be defined by the dynamic and interconnected relationships between the specialties. They will have common clinical objectives, set out in the specialty curricula. How these patient care themes will bridge the boundary between hospital and community care needs to be considered by the UK-wide Delivery Group.
- Across all specialty training, doctors will develop generic capabilities that reinforce professionalism in their medical practice.
- Broad based specialty training, after Foundation Programme, will last between four and six years depending on specialty requirements (and depending on how individuals progress through the curricula).
- During postgraduate training, doctors should be given opportunities to spend up to a year working in a related specialty or undertaking education, leadership or management work (similar to specialty fellowships). This year, which can be taken at any time during training, will allow them to gain wider experiences that will help them become more rounded professionals. It will be included in the timeframe of between four and six years.
- When doctors want to change specialties, either within or between specialty groups, they will be able to transfer relevant competencies they have acquired in one specialty to their new area of practice, without having to repeat the same learning in the new specialty. This will include learning during the optional year and generic capabilities. By recognising previous learning and experiences, retraining in new areas should be shorter.

Undergraduate degree

FOUNDATION PROGRAMME

Postgraduate medical training

BROAD-BASED SPECIALTY TRAINING

Professional practice

Graduation  
Full registration at the point of graduation

- Wide range of training opportunities provided across different specialty areas.
- Includes several 4-6-month placements, in both acute and community settings.

**Clinical academic training**  
Academic training focused on a particular research area combined with broad-based specialty training. Doctors can move in and out of academic training at any point.



All doctors develop generic capabilities in key areas, including:

- patient safety
- communication with colleagues and patients
- teamwork, management and leadership
- evaluation and clinical application of research.

Optional year spent working in a related specialty or undertaking leadership or management work – this can be taken at any time during broad-based training.

Certificate of Specialty Training

Doctors are able to practise with no clinical supervision within multiprofessional teams and networks. They are able to make safe and competent judgements in broad specialty areas.

With further opportunities to:

- maintain capabilities and develop practice through CPD
- enhance career and gain additional expertise through credentialing in special interest areas
- develop depth of knowledge by learning through experience and reflecting on their practice
- move into education, management and leadership roles.

Training duration


• 2 years

• 4-6 years (depending on specialty requirements)

Rest of career

- Within broad-based specialty training doctors can:**
- train across the breadth of specialties
  - theme their training within particular patient groups at any point in the training
  - change specialties by transferring competences within or between groups of specialties
  - combine specialty training with academic research.



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8. Appropriate organisations, including employers must introduce longer placements for doctors in training to work in teams and with supervisors including putting in place apprenticeship based arrangements.
  9. Training should be limited to places that provide high quality training and supervision, and that are approved and quality assured by the GMC.
  10. Postgraduate training must be structured within broad specialty areas based on patient care themes and defined by common clinical objectives.
  11. Appropriate organisations, working with employers, must review the content of postgraduate curricula, how doctors are assessed and how they progress through training to make sure the postgraduate training structure is fit to deliver broader specialty training that includes generic capabilities, transferable competencies and more patient and employer involvement
  12. All doctors must be able to manage acutely ill patients with multiple co-morbidities within their broad specialty areas, and most doctors will continue to maintain these skills in their future careers.
  13. Appropriate organisations, including employers, must consider how training arrangements will be coordinated to meet local needs while maintaining UK-wide standards.
  14. Appropriate organisations, including postgraduate research and funding bodies, must support a flexible approach to clinical academic training.
  15. Appropriate organisations, including employers, must structure CPD within a professional framework to meet patient and service needs, including mechanisms for all doctors to have access, opportunity and time to carry out the CPD agreed through job planning and appraisal.
  16. Appropriate organisations, including employers, should develop credentialed programmes for some specialty and all subspecialty training, which will be approved, regulated and quality assured by the GMC.
  17. Appropriate organisations should review barriers faced by doctors outside of training who want to enter a formal training programme or access credentialed programmes.
  18. Appropriate organisations should put in place broad based specialty training (described in the model).
  19. There should be immediate consideration to set up a UK-wide Delivery Group to take forward the recommendations in this report and to identify which organisations should lead on specific actions.