

Health Education England

Training Recovery Update

16th July 2021

Dear Colleagues,

'Minimising disruption and avoidable extensions caused by COVID-19'

Post graduate doctors in training work at many different levels across all the different specialities and have been personally impacted by COVID in different ways. Therefore, establishing blanket mitigation policies to address COVID disruptions is not feasible. Instead, educators, heads of schools, and training programme directors have been meeting with over 50,000 trainees on a one-to-one basis, often digitally enabled, to understand their individual competence gaps and mitigate the number and length of extensions. This ensures that all trainees can progress where it is safe for them to do so.

At local (trust training recovery initiatives), regional (targeted support in high-risk specialities), and national levels (enabling specialities and regions to expedite solutions), interventions and opportunities have been identified, and funding has been made available. This has enabled us to work together successfully across the health system, including the independent sector, and make changes which minimise the impact of COVID-19.

Many individualised solutions have been co-developed or co-led by trainees themselves. They aim to address the substantial impact of COVID-19 on experiential learning and the attainment of curriculum competencies, consider how competencies gained in other settings can be recognised and explore possible improvements in the way we train in the future.

Several interventions, particularly those focused on opportunities to realise the benefit of virtual working and learning will not only enable us to support trainee progression now, but also shape longer-term digitally enabled and collaborative working reforms for training and education in the future.

Examples include:

- Using a high-quality electronic simulator to address the reduction in surgical training opportunities whilst building improvements in digital training, enabling trainees to obtain and improve laparoscopic skills in simulated real-life scenarios and elective procedures. We are developing plans to enable this at local, regional, and national training programme level.
- Portability agreements between Trusts, including the independent sector.
- Flexible access to post-mortems across the region.
- Increasing accessibility as HEE's Technology Enhanced Learning (TEL) programme works with surgical leads to develop an e-learning programme to

standardise, consolidate and deliver the knowledge domain aspects of core surgical training.

- Virtual MDTs which are locally, regionally, and nationally accessible.
- Local development of innovative training opportunities for training recovery using fellowships.

We are collating a [wide range of training intervention case studies](#) from across the country. These will be added to over the next few weeks, and we are keen to encourage all employers, educators, and trainees to consider whether any of these solutions will help training progression for them individually or within their local area or region. Also, please share your training recovery suggestions with us at trainingrecovery@hee.nhs.uk

The work across the country on training recovery will reduce extensions and any risks of reduced recruitment numbers, as well as improving training. This is essential for trainee morale and wellbeing, and to maintain the numbers of middle grade decision making doctors, and new consultants and GPs. The success of all the work for post graduate medical training is critical to the NHS as these senior decision makers will be instrumental in delivering service COVID recovery both today, and in the coming years.

Best Wishes



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