

Health Education England

Training Recovery Update

29th July 2021

Dear Colleagues,

‘For the NHS to have consultants and GPs tomorrow, we must train them today’

Doctors in training across all medical and surgical specialties have been severely impacted by COVID and our focus in HEE is how best to support them to get their training back on track as quickly as possible. We know that the pandemic has impacted every trainee on an individual and personal level, with no two trainees having the same experience. While many trainees have missed out on essential experiential learning, others have had the opportunity to acquire clinically and professionally relevant skills. Our recovery solutions must therefore be individualised.

We also know that the NHS is under immense pressure to catch up on a backlog of service delivery and that we need to think innovatively about recovery in education and training. In my last message, I shared some examples of ideas gathered from trainees, educators and employers which are helping us to ensure post graduate doctors can progress with their ongoing training and careers.

Those [case studies](#) were a small sample of the ever-growing number of solutions educators are finding which we have made available on the HEE website. Many were surgical case studies, and this week we’re keen to highlight a range of medical speciality solutions, which have also been developed to adapt and adopt as practical examples of effective planning for training recovery.

A significant example of how the pandemic has led to a substantial shift in the way clinical activity is undertaken in medical specialties is the new ‘Online World of Medicine’. Many patient contacts and assessments which were previously conducted in outpatients, are now video and telephone based. While presenting substantial challenges from a clinical point of view, this change also presents a new gap in traditional clinical training which needs to be addressed.

To help prepare trainees to deliver virtual clinics we are working with trainers across primary and secondary care to curate the currently available resources and identify and develop the required additional training resources. A range of different sources are currently available via HEE’s e-Learning for Healthcare platform and from work done by the Medical Schools Council, and we will signpost these to trainees and trainers via a central directory.

Internal Medicine Training (IMT) is leading the development of new resources with an initial training package for trainees delivered on the e-Learning for Healthcare platform. The IMT programme is also developing guidance for trainers in the supervision and assessment of trainees undertaking virtual clinics. Further resources are being

commissioned using immersive simulation technologies, while collaboration with the Royal Colleges and other partners is ensuring that virtual clinic experience is appropriately recognised.

Other solutions for medical specialties include 'Boot Camps' more traditionally associated with surgical training. For example, missed training opportunities in Gastroenterology have left trainees feeling unfamiliar with the basics of endoscopy. A 'boot camp' for gastro and respiratory year 1 trainees will now help to accelerate their familiarity with basic endoscopy processes, ensuring that patient contacts can be focussed on the development of expertise rather than learning basic technical skills. This rapid technical upskilling of trainees will enable more rapid progression in competence and catch up.

By thinking innovatively about building training capacity, optimising learning opportunities and finding training placements that are tailored to individual learning needs, we can all maximise training opportunities while supporting service recovery and so, in HEE, we welcome any new ideas that you have. The fundamental principle is that for the NHS to continue to have consultants and GPs, we must train them today

Best Wishes



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