

"I would have everie man write what he knowes and no more."—MONTAIGNE

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EDITORIAL

GENERAL PROFESSIONAL TRAINING

The proposals concerning postgraduate education and training set forth in the Report of the Royal Commission on Medical Education are comprehensive and far-reaching. The defects still present in the current system are clearly recognized and the Commission offers a new pattern designed to ensure better co-ordination of training, improved matching of aspirations with abilities and with probable future vacancies in the various branches of medicine.

Following an intern year, somewhat similar to the present pre-registration year but with important differences, particularly in regard to the responsibility of the university in the matter of supervision, the Commission's view is that there should be a period of about three years devoted to general professional training of a rather broad nature. The contents of posts during this year will depend upon the field in which the graduate ultimately hopes to make his career, but he is not prevented from a change of course.

We are here concerned with anaesthetics and reference to Appendix 5 (h) of the Report shows the make-up of posts envisaged as suitable for the general professional training period. It will be seen that the trainee shall progress through a planned series of appointments.

It is recommended that approved posts should be provided in centres able to give advanced academic teaching and that trainees shall be free to attend tutorials, lectures and the like on at least two half days each week. Stress is laid on the need for a central body to ensure a sufficiency of suitable posts and effective training schemes, and also to ensure that the progress of the trainee is competently assessed. The obvious need for more appointments to cover teaching and service requirements is appreciated. Dissatisfaction with the conventional higher examination system has led to the proposal that trainees should be assessed throughout the three years of general professional training, possibly at annual intervals, and on satisfactory completion a certificate should be given. After

this period the doctor would enter the Junior Specialist grade and then progress to Specialist and perhaps Consultant grade, if after further training and experience attainments prove suitable.

Those in our specialty thinking in terms of implementing the Royal Commission's proposals for the period of general professional training will need to consider many aspects, of which the following might strike them as of immediate importance.

In respect of the elective subjects suggested for study in the second year, there are some who will doubt the value to either pupil or host of a period of 6-12 months devoted to research at this stage in a young doctor's career. One might have reservations also in respect of 6 months or a year spent totally working in electronics even as applied to medicine—electronics is only a minuscule section in the training of the anaesthetist, even as anticipated in the new Primary Examination.

More basically, however, there seems a danger that the academic revolution envisaged in this Report might be planned and attempts made to implement it regardless of the fulfillment of the recommendations of Paragraph 80. This paragraph acknowledges that the proposals of the Commission "will make heavy demands on the time of senior staff, particularly in hospitals, and that more appointments will be necessary if both teaching and service responsibilities are to be met."

Assuming that Ministry support for the necessary increase in staffing is forthcoming, will there be a sufficient supply of doctors? With the present plans for increased undergraduate intake it may well be ten years before any substantial improvement in output is felt and there remains the question of the adequacy of these plans.

The improved educational facilities envisaged by the Commission must be warmly welcomed but their realization can only come about by orderly evolution if the standard of hospital service is to be maintained.