

The General and Specialist Medical Practice (Education, Training and Qualifications) Order 2010

The Postgraduate Medical Education and Training Order of Council 2010

Consultation Questions

Response Form

Please fill in and / or tick the appropriate response

The Medical Schools Council responses to the questions are indicated in Blue.

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Summary of the consultation

A summary of the response to this consultation will be made available before or alongside any further action, such as laying legislation before Parliament, and will be placed on the Consultations website at <http://www.dh.gov.uk/en/Consultations/Responsestoconsultations/index.htm>

I do not wish my response to be passed to other UK Health Departments

I do not wish my response to be published in a summary of responses

Please indicate all the countries to which your comments relate: *UK-wide*

Are you responding: - *on behalf of an organisation*

If you are responding on behalf of an organisation, please supply the following details: Other- Membership Organisation, representing Medical Schools

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Consultation Questions

Reason for joint consultation on the draft orders

Q1: Do you support the proposed approach which puts the overarching framework into the Medical Act 1983 and the details into subordinate legislation to be made under new powers in that Act?

Support

Comments

No further comments

Problems caused by the current split of responsibilities between two Bodies

Q2: Do you agree that responsibility for all medical education and training, together with the associated legal powers, should be vested in a single body?

Agree

Comments

As indicated in the Medical Schools Council's response to the Tooke review, we believe that:
'The plan by MMC to contrive a two year Foundation Programme was grafted on to the pre-MMC PRHO year, with the undesirable result that the responsibility for determining standards in the Foundation years now lies between two bodies, the GMC and PMETB. It would be better to have a more co-ordinated linkage between undergraduate and postgraduate curricula and to insist that responsibility for determining standards lies with a single body, the GMC.'

Q3: Do you agree that PMETB merging into GMC is the preferred method of creating an ideal regulatory body in medical education?

Agree

Comments

We are supportive of the merging of responsibilities - it should create a more streamlined process for the regulation and quality assurance of medical education. The GMC has had a highly effective Education Committee which is now reconfigured in the new arrangements for the GMC. Based on its experience and innovations in regulation it is difficult to think of another body that is as well placed.

Q4: Do you agree that the cost drivers and benefits identified in the impact assessment are the main cost and benefit drivers of the options set out?

Agree

Comments

No further comments

Transition to the new arrangements

Q5: Do you agree that it makes sense to merge the two bodies before waiting for the outcome of the comprehensive review of the system?

Agree

Comments

This is something that was recommended in the Tooke report and would help the work of developing the strategies to improve postgraduate training recommended therein.

Q6: Do you agree that it makes sense to integrate procedures in respect of both undergraduate and postgraduate education where possible, unless there are compelling reasons not to do so?

Agree

Comments

Universities already have an important role in F1 and there are other examples of integration between these two aspects of medical education, such as the development of portfolio base learning and student assistantships, so integrating procedures would be sensible.

Q7: Do you agree that in merging PMETB's statutory functions with those of the GMC, the Council should continue to have the flexibility to organise those new functions in such a way as to carry them out efficiently and effectively and should not be required to replicate the same statutory committee structures that were specified for PMETB?

Unsure

Comments

It is clearly necessary to take advantage of the opportunity to review PMETB's structures and revise these in the light of experience. As pointed out in the Tooke Report it is desirable to have a single Regulator reporting directly to Parliament rather, than is the case for PMETB, reporting through the Secretary of State for Health in discussion with Ministers in the Devolved Administrations.