Postgraduate Medical Education and Training

“Change is inevitable; growth is optional”

At first glance the above quotation is a contradiction. The evidence that change is all around us is incontrovertible. But so is growth: greater and greater demands and expectations, from public, patients and payers; more inputs, outputs and throughputs, increased (though sometimes just a shade invisible) funding; and increasing numbers of doctors. On the other hand, organisational, and personal or professional growth cannot be assumed. The latter is, I think, what I and the many colleagues in the Trust, and within and without the Postgraduate Institute, are about – this is part of our core business and that of the Trust.

In fostering organisation, as well as personal and professional growth in doctors in training and those responsible for their training, we have worked in partnership with the Trust during the last year in a number of ways. Much of this work is ongoing.

Staff changes in the Education Centre at the Royal Victoria Infirmary have presented an opportunity to look more closely at the resources and infrastructure arrangements in the whole Trust. This is part of the challenge facing the newly appointed RVI Clinical Tutor, Dr David Greaves, working with colleagues Dr Shona Murray and Ms Alyson Williamson, at the Freeman Hospital. This task will be greatly helped by the appointment of Dr Sheila McPhail as Assistant Medical Director with a responsibility for education matters, not least symbolically underpinning the core nature of the business of postgraduate medical education and training within the Trust.

Joint work focusing on organisational and personal growth includes clinical governance and mentoring. This has been aided by Dr Nancy Redfern, who is not only a Trust Consultant but is an Associate Postgraduate Dean, and acts as the Deanery Liaison Representative.

Two education contract monitoring visits, to the RVI and Freeman Hospital, in July and November 2002, provided confirmatory evidence of generally sound clinical education and learning experiences for doctors in training. Not surprisingly, but no less welcome, were a number of striking examples of good practice. These included the positive impact of efforts to improve junior doctors’ hours, an increasingly systematic approach and various quality aspects in a range of specialties, including anaesthetics, radiology, orthopaedics, neurosurgery, and paediatric surgery; the Freeman Hospital Education Centre Portfolio for 2002, and the clinical skills training facilities.

Also, perhaps not surprising either, there is scope for further development. Planning for the new education facilities to be built at the RVI offers opportunities, including a wider look at the facilities and infrastructure to support education and training in the Trust. There is a continuing and continuous need to develop and refine the educational process and its application. As always, the tension between service provision and the core business of clinical education and training remains a challenge.

This contribution provides me with an opportunity to recognise and acknowledge the contribution made by many colleagues in the Trust to the education and training of the next generation of doctors on whom the NHS will depend. These contributions are not only to the core business of postgraduate medical education and training within the Trust. There are numerous other contributions to the Deanery responsibilities, such as through those doctors who are training Programme Directors, or are Chairs or members of Speciality Training Committees. Other contributions are also made nationally, for example senior roles in medical Royal Colleges. Not for nothing is the epithet of “the Northern Mafia” well and positively deserved!

Professor Peter Hill
Postgraduate Dean and Director
June 2003

The Dental Hospital and School

This year has been one of change with the appointment of Mr David Jacobs as the new Clinical Director and Professor Robin Seymour as the Head of the School of Dental Sciences following the retirement of Professor John Murray. John made a huge contribution to the Dental Hospital and School including the management of several refurbishment schemes and the establishment of a dental emergency clinic for walk-in patients. He also masterminded the Dental School submission to the recent Research Assessment Exercise which resulted in a very creditable score of 5.

The newly formed School of Dental Sciences is undergoing significant changes in its curriculum. Of particular interest is the implementation of the new course in human diseases which replaces the old course of pathology, microbiology, medicine, surgery and pharmacology. The course, which starts in September, provides a more integrated approach to these disciplines. The Trust has been very active in supporting this development and has released funding to support a consultant appointment with responsibility for co-ordinating the new integrated human disease course.

Several members of academic staff have either retired or left over the past 12 months. The School has been concerned over the national problem of reducing Junior doctors’ hours; an increasingly systematic approach to these disciplines. The Trust has been very active in supporting this development and has released funding to support a consultant appointment with responsibility for co-ordinating the new integrated human disease course.

The Dental Hospital had over 122,000 patient attendances in 2002/2003. Pressures on the service, particularly waiting times, have continued to build although the Directorate rose well to the challenge and by the end of March 2003, no patients were waiting over thirteen weeks for a Consultant assessment. This was well within Government targets and represented a major achievement by the staff in the Dental Hospital and School.

Funding for a major capital scheme has recently been agreed and work is due to commence in July this year on the refurbishment of a large clinical area on the fourth floor of the Dental Hospital. This will result in significant improvements to the facilities for patient care, undergraduate teaching and postgraduate training. The Dental Hospital has also been successful in securing additional funding from the NHS Modernisation Agency for a variety of service improvements including the purchase of equipment, capital developments and increased clinic capacity.

There have been important staffing developments with the appointment of Dr. Rye Matick as a Consultant Orthodontist to support the Cleft Lip and Palate service and Mrs. Margaret Corson as a Consultant in Restorative Dentistry. In addition, funding has been obtained for new Consultant posts in Paediatric Dentistry and Oral and Maxillofacial Surgery.

Postgraduate training in the Dental Directorate has been further enhanced in the Dental Hospital and School with the development of additional specialist training programmes in Dental and Maxillofacial Radiology, Endodontics, Prosthodontics and Periodontology.

The strong NHS and University partnership continues to flourish in the Dental Hospital and School with significant progress being made in the last year. There are clear strategies for the future development of services, teaching and research that will be of further benefit to patients, students and the entire dental team in the future.

Mr D J Jacobs
Clinical Director
Professor R A Seymour
Head of School of Dental Sciences
June 2003