

# STRATEGIC REVIEW OF MEDICAL TRAINING AND CAREER STRUCTURE

## TERMS OF REFERENCE

### Background and context

*Future Health: A Strategic Framework for Reform of the Health Service 2012-2015* sets out the main healthcare reforms that will be introduced in the coming years. *Future Health* is about prioritising the needs of the patient even as difficult decisions on health financing are made. This will involve moving towards a health service that provides access to care based on need rather than income, underpinned by a constant focus on health and well-being, a stronger primary care sector, a restructured hospital sector, a more integrated social care sector and a more transparent “money follows the patient” system of funding, supported ultimately by Universal Health Insurance. The Government’s reform programme will have to be delivered against a backdrop of extremely challenging economic and fiscal conditions for the State in general and the health services in particular.

In this context, the Minister for Health has decided to establish a Working Group to carry out a strategic review of medical training and career structure. In particular, the Working Group will examine and make high-level recommendations relating to training and career pathways for doctors with a view to:

- Improving graduate retention in the public health system;
- Planning for future service needs;
- Realising maximum benefit from investment in medical education and training.

### About the Strategic Review

The Review will include consideration of the following areas.

#### Developments in recent years

- Progress in implementing recommendations on medical training and workforce planning from key reports, including the Fottrell and Buttimer reports.

#### Postgraduate training and employment experience

- Assessment of the changes needed to improve the training and retention of graduates, while maintaining quality, including consideration of:
  - provision of a clear pathway for training at every level from Intern to Specialist;
  - the potential for reducing the duration of specialist training;
  - appropriate task allocation between health professionals.
- Measures to improve the quality of the training and employment experience.

### Career paths, structures and supports

- Measures to improve career planning, mentoring supports and efficacy of communication;
- Measures to improve the career structures and flexibility of options for doctors following training, including the range of specialist (eg consultant, GP, public health doctor etc.) and other hospital or community posts.

In examining these issues, the Working Group will take account of:

- The need to ensure quality, safe, patient-centred healthcare, grounded in the key domains of healthcare<sup>1</sup>, and a safe and healthy working environment for doctors;
- Developments in the clinical programmes and recent reports and recommendations relevant to patient safety;
- Opportunities arising from the Health Reform Programme (for example, the development of hospital groups and the expansion of primary care services);
- Achievement of value for money for State investment in medical education and training;
- International good practice in regard to medical training and developments, including EU requirements.

The Working Group will also take into account:

- Relevant reports, and previous processes and engagement with key stakeholders;
- The statutory roles, remits and responsibilities of key stakeholders;
- The views of trainee doctors arising from consultation.

### **About the Process**

The Working Group will have an Independent Chair: Professor Brian MacCraith, President of DCU. Secretariat will be provided by the Department of Health.

The Working Group will:

- Engage in an ongoing consultation process with key stakeholders to inform the preparation of its reports;
- Provide an initial report to the Minister by end November 2013 (Stage One);
- Provide a final report by end June 2014 (Stage Two).

Any implications for terms and conditions of employment will be dealt with subsequently through normal industrial relations channels.

7<sup>th</sup> October 2013

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<sup>1</sup> Patient-centredness, safety, effectiveness, efficiency, access, equity