



ROYAL COLLEGE OF  
PHYSICIANS AND  
SURGEONS OF GLASGOW

*From the President*

28 January 2021

Dear Dr Sarah Gillespie, Dr Emily Harrison, Dr Victoria Calvert,  
Dr Amy Belfield, Dr Sophie Garrad, Dr Amy Johnson,  
Dr Sam Richardson, Dr Jennifer Gallacher

Thank you for highlighting your concerns about access to IMY3 stand-alone posts. We share these concerns and feel that the position you currently find yourselves in is both unfair and unacceptable, at a time when doctors in training have already suffered disproportionately from the impact of the COVID pandemic. The issue is particularly disappointing in the context of the ongoing shortage of medical staff across the UK. We are all very sorry for the great distress this is causing. As individual Colleges and through the Physicians Training Board (PTB) and Federation, we are committed to trying to find a resolution to this situation.

1. When did planning for the number of IMY3 posts required begin, and was there any effort to look at how many trainees might need to return prior to the request for expressions of interest?

**Planning for this began a couple of years ago and was undertaken by NHS Education for Scotland in conjunction with Directors of Medical Education within the Health Boards. Representation was then made to Scottish Government to secure additional funding for posts, in addition to some board funded posts. It is envisaged that these posts will be available on an ongoing basis. Dr Mike Jones, Medical Director for PTB recently highlighted to Federation that he was concerned there may be insufficient posts in England, and at this point, as Chair of Federation, I wrote on behalf of all three Colleges to NHSE to highlight the issue and request provision of additional posts.**

2. Why were we told posts were guaranteed when they were not?

**We feel it is essential that this guarantee is honoured and we intend to do this. However, due to unforeseen circumstances with the pandemic, the goalposts have moved. More doctors are now seeking IMY3 posts than was predicted. At a time when there is a clear need to expand our workforce, it is important that funding is identified to resource these posts, and we will do all we can to influence this. The timeline when these guaranteed posts will be offered therefore, unfortunately, may be spread over the next years, rather than all in the current year.**

3. What consultation was there with trainees, in particular the affected trainees, in deciding upon the entirely random ranking allocation process?

**There were discussions with representatives from all three colleges' trainee committees and representatives from the BMA. Our college trainees' committee did include trainees that would be affected. After lengthy discussions it was felt that there was no fair way of deciding who would get a post. Therefore the application was made non-competitive as it was felt there was no fairer alternative and at the time it was thought we would be able to obtain posts for almost all who wanted them.**

4. Will the validity of the Alternative Certificate for Group 1 specialties be extended beyond 2022? If not, why not?

**Mike Jones has confirmed that the Alternative Certificate will be available for the foreseeable future as there will always be people who have not completed IMT and yet who wish to enter an ST4 post in a group 1 specialty.**

5. What counts as critical care experience for the purpose of the Alternative Certificate, and can this please be clarified in writing?

**The definition of what counts as critical care is actively being reviewed and the aspiration is to include the HDU type of settings which have arisen as a result of the pandemic and other acute COVID related activity. Once agreed this will appear on the JRCPTB website and will be communicated through a variety of other media. Please refer to the Rough Guide to Internal Medicine Training on JRCPTB website.**

6. Are those who are not allocated an IMY3 post in 2021 guaranteed a post in 2022, should they still want one?

**Additional posts must be in place for long enough to allow all those who wish to return to training to do so, and that is our ask.**

7. Please communicate the current situation to all applicants, regardless of ongoing certainty, immediately.

**Good communication is essential to try to minimise anxiety and provide certainty, we are sorry this has not been the case. It is disappointing that communication from HEE in this regard has been poor. We understand that numbers of posts are to be published on 28 January. Our College will work hard to ensure that we provide updates as soon as we have any further information.**

This is a complex area with many partners involved. As Colleges, and as Federation, we do not have executive power to deliver posts, but we do have influence. Please be assured that we are doing everything that we can to find solutions to this problem, through formal and informal channels.

We do understand what an awful situation this is and the adverse impact it is having on the wellbeing and morale of doctors in training. We are committed to supporting and standing up for our trainees, and to practicing what we preach.

With kind regards

Yours sincerely



Professor Jackie Taylor  
**President**