

MTAS, MMC, PMETB – what next in British postgraduate medicine?

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No one can be in any doubt as to the most important current issue in UK medicine. The Medical Training Application Service, the government's new mechanism for appointing junior doctors to training posts in the NHS, introduced in January 2007, has proved a fiasco. Failures in IT, confusion over job interviews, irrelevant application formats, too few available jobs, and security breaches which made confidential applicant information publicly available, all contributed to the problems.

This has led to unprecedented criticism which spread to involve MMC, the new structure of UK postgraduate medical training for which MTAS was the appointment system, and on to the PMETB, through which the government has taken responsibility for postgraduate medical training. Over 10,000 protesters, largely junior doctors, marched in London and Glasgow, a substantial group of senior doctors, led by Professor Morris Brown, waged a campaign in *The Times* newspaper, and a new organisation, Remedy UK, took legal action against the Department of Health. Criticism was not limited to the government, but extended to the Royal Colleges and the BMA, which were seen as complicit in what has happened. As the crisis evolved, Mr James Johnson, the Chairman of the BMA, resigned, Professor Alan Crockard, the national director of MMC resigned, and the Secretary of State for Health announced that the government had decided to shelve the MTAS computer-based application system.

As troubles with MTAS mounted, the Academy of Medical Royal Colleges (which represents all the Royal Colleges and Faculties) went to the Secretary of State for Health, and, as a result, a Review Group was set up to see how the MTAS problems could best be resolved in the short term. Our President was appointed to the Chair of this group, and he has devoted a huge amount of his time and energy to this issue since his appointment. He has made every effort to find the best possible outcome for junior doctors this year, for the patients they help to look after, and for

the NHS. Clearly, it would be inappropriate for our President, as Chair of the Review Group, to comment on the current situation. However, both he and our Council are very concerned about the present state of affairs and they have issued a statement saying that MTAS had failed doctors in training, and calling for a wide independent review of the whole training system. This will now take place under the Chairmanship of Sir John Tooke of the Peninsula Medical School, who will also review MMC itself.

Irrespective of the outcome of the current difficulties, the Royal Colleges will need to review the development of this crisis and that will include a re-evaluation of the way in which the Royal Colleges contribute to the development of postgraduate medical training in the UK. Indeed, Nigel Hawkes, the health editor of *The Times*, wrote in the *British Medical Journal*, that the Royal Colleges would have to raise their game to avoid being marginalised. The Royal Colleges should contribute positively to postgraduate medical training in the UK, but on what terms should they work with the government, and to what extent should they oversee postgraduate medical training? Should the Royal Colleges become clearly advisory to government which would free them for stronger leadership in the profession? How might the Royal Colleges work better with other organisations such as the BMA and the specialty societies? These and other questions will have to be answered in the longer term, and the College Council is always anxious to hear opinions on such questions from our Fellows and Members.

In the meantime, we should remember that our College is much more than a postgraduate training and assessment board. We should redouble our emphasis on keeping our members informed of College activities, engaging the membership in policy formation and developing our educational and standard-setting activities. The Royal Colleges need to ensure that we keep our professional destiny in our hands and, with our international memberships, contribute to the global benefit medicine can offer humankind.