Vocational training in general practice: is action against North East Thames justified?

STELLA LOWRY

The Joint Committee on Postgraduate Training for General Practice has withdrawn its recognition of vocational training for general practice from the entire North East Thames region, to take effect from 1 February 1989. This is the first time that such action has been taken against a whole region.

North East Thames region.

Role of the joint committee

The committee is responsible for issuing certificates showing satisfactory completion of a course of approved study to doctors wishing to become general practitioners. It advises professional and educational bodies on the standards required in the postgraduate education of trainees and takes action to ensure that these are maintained. The recommended minimum criteria for recognition of a practice for training include filing of all records by date order, easy identification of all drugs being taken by patients having long term treatment, audit of prescribing habits within the practice, and provision of a relevant library.

The committee sends visitors to each region on alternate years, and their reports are received at quarterly meetings. When a region fails to maintain the required standards the regional adviser and representatives from the regional general practice education committee are invited to meet the officers to discuss the problems and identify ways of rectifying them. Any further action depends on the outcome of this meeting.

Action taken against North East Thames

On 10 March 1988 the committee informed the Royal College of General Practitioners that it intended to withdraw recognition from the whole of the North East Thames region from 1 February 1989.

As a press release from the college states, visitors from the committee had reported problems for several years, particularly concerning the maintenance of records and the criteria used in the region for approving and reapproving practices. In 1985 they had been unwilling to recommend reapproval. At that time the regional representatives gave assurances that the region would comply with the committee's guidelines, and approval was not withdrawn. Another team of visitors to different practices in the region in 1987 found no evidence, however, that the region was making adequate attempts to meet the recommendations, and the decision to withdraw recognition was taken.

The council of the Royal College of General Practitioners has decided to support the committee's decision, and as a result doctors who complete the general practice part of a scheme in this region after 31 January 1990 will not be eligible to enter the MRCGP examinations. Doctors who can prove that they entered a three year scheme before 1 May 1988 will be eligible to sit the examination. The college is prepared to consider appeals from individual practices that their training schemes should be recognised for the purposes of the examination. This is an attempt to be fair to the candidates, but it implies that there are practices in the region where the training is satisfactory. If this is so, is it right that they can be penalised by such sweeping action by the committee?

Questions must be answered

The withdrawal of recognition is not yet inevitable, and I have been told that several meetings are to be held this month during which the region can present any suggestions it has for the rapid implementation of the committee's guidelines. Possibly an alternative solution will be found, but many issues raised by these events must be settled if general practice training is to benefit at all from this crisis.

The committee must eventually make public a list of the issues that were sufficiently important to warrant such drastic measures. Were the problems in this region ones which could be found in any part of the country if the right practices were visited? If so, should similar action be considered on a wider scale or do the criteria for approval need to be redefined?

About 180 practices will be affected by the decision. The profession must be satisfied that the number of practices visited and found to be falling short of the recommended standards was a large enough sample to justify action against the whole region. Individual practices are often disciplined, and the committee must prove that in this case the fault lay with the region and that action against individuals would not have sufficed.

In their letter on p 1331 the North East Thames course organisers state that the committee visitors were deliberately taken to two practices that were causing concern locally in the hope that they would recommend ways of making improvements. Local organisers must feel able to make use of the skill of the committee's visitors. It would be a pity if, as a result of the action taken in this case, the committee was seen mainly as a disciplinary rather than an advisory body. Other regions might try to "brush their difficulties under the carpet" during official visits, and as a result problems might not be spotted while they were still remediable.

Alternatives to the drastic measures suggested may be found, but even if the decision is reversed the questions raised by this issue must be answered. There is now a stigma attached to all training schemes in the area, whether good or bad, and it is essential that the explanation is seen to be more than mere "muscle flexing" on the part of the committee.