

# Working together to raise standards: delivering core medical training in Iceland

In June 2014, the Joint Royal College of Physicians Training Board (JRCPTB) received an enquiry from Landspítali, the national university hospital in Iceland, requesting use of the physicians' ePortfolio. JRCPTB medical director **Professor David Black**, JRCPTB director **Rachael O'Flynn** and **Dr Tómas Þór Ágústsson**, consultant physician and associate director of postgraduate training, explain how the two nations have worked together to deliver core medical training in Iceland.

**The JRCPTB had, in conjunction with the MRCP(UK) Examination Department, already begun to explore the potential for a new international venture to see whether a UK curriculum could be successfully implemented abroad, and whether UK standards could be achieved both through supporting change and a process of developmental accreditation.**

Historically, MRCP(UK) has offered examinations in many overseas countries but JRCPTB had only ever worked within the UK on curricula. Although the need for comprehensive educational development was recognised in Iceland, what began then as a seemingly small request has led to substantial changes. Two years later, not only is accredited core medical training being delivered in Iceland, but several other royal colleges including the Royal College of Obstetricians and Gynaecologists, the Royal College of Emergency Medicine and the Royal College of Psychiatrists are following the same educational change path.

## Training Icelandic physicians

While Iceland has had a medical school since 1911, further postgraduate training of Icelandic doctors has traditionally involved travelling abroad, most commonly to the Scandinavian countries, North America, and the UK. After training, Icelandic doctors often return home to provide consultant practice. However, a considerable number of more junior resident doctors have always been required, in order to maintain inpatient and continuity of care.

Iceland was particularly badly hit by the financial crisis of 2008 and this has had a

considerable impact on the nation's health services. As a result, a crisis had occurred in trying to support and maintain junior resident doctorSTs due to apparent weak supervision, overwork and lack of status. The government of Iceland decided that it needed to reinvest in supporting the hospital juniors, but it wasn't clear how that should be achieved. This wish to 'do something' led to the initial enquiry from consultant physicians in Iceland, who had trained in the UK, about the use of an ePortfolio to try to support some more structured training.

Preliminary discussion between JRCPTB and a small number of key physicians in Iceland quickly clarified that the Icelandic medical community would be interested in much more structured and supported training for their doctors. As a result of those original discussions, a core medical training Development Day was planned for November 2014 and seven physicians and managers from Iceland attended an intensive day's programme at the RCP in London, where all aspects of core medical training were discussed and demonstrated.

The Icelandic team very quickly decided that what they really wanted was to deliver core medical training in Iceland to the UK standard. This would include all aspects including an annual review of competence progression (ARCP) process and all parts of MRCP(UK) examinations. While the medical director had considerable experience of setting up multiple new programmes in a UK context, the change process for the JRCPTB was considerable, given this was uncharted territory and all the steps and processes had to be developed and delivered from scratch. From the start, the programme was set on a formal business

footing, with a comprehensive memorandum of understanding signed by Iceland and the three Colleges of Physicians in London, Glasgow and Edinburgh. There were a number of key steps in the change process, which we summarise here.

## Developing governance

The partners worked to develop and establish a more formal governance of postgraduate education in Iceland, in order to monitor and supervise education and to allow a proper accreditation process. This required the founding of a Postgraduate Education Board in Iceland, which coincided with the introduction of new Icelandic legislation regarding the training of doctors and recognition of training. This was an essential requirement, offering a governance structure akin to the key governance lines between the roles of the regulator (the GMC in the UK), colleges, Health Education England and the provider hospitals.

## Areas covered on the CMT Development Day

1. **The structure of Postgraduate medical education and the Gold Guide.**
2. **The CMT curriculum and current assessments, WPBAs and ARCP.**
3. **The role of exams in CMT and exam preparation.**
4. **The ePortfolio.**
5. **Faculty development and implementing CMT.**
6. **The trainee in difficulty and trainee representation.**
7. **Other learning, simulation, procedures, audit, quality improvement, reflective practice.**
8. **The various roles of the training programme director, educational and clinical supervisor and college tutor.**
9. **Standards and programme accreditation. ■**



The Icelandic Committee for Postgraduate Training in GIM and the RCP visiting delegation at the formal launch of CMT training in Iceland in September 2015.

## The RCP Education Department

The development of educational and clinical supervisors was key to the change process. For this reason, Iceland separately contracted the RCP's Education Department to provide onsite detailed training in all aspects of educational supervision and trainee management. This comprised of three week-long visits providing a number of courses specifically tailored to the broad educational needs and continued developmental support. The second visit was just before core medical training started in September 2015. All visits have involved extensive participation of the trainees who would be starting the programme. This was particularly important in, for example, giving hands-on experience for the first time of using the ePortfolio. This programme was so successful that over a hundred consultants in Iceland from all disciplines eventually attended the programme in one way or another. This enabled other colleges to begin discussing training with Iceland after the eventual implementation of core medical training. The RCP's Education Department are also collaborating with the Icelandic physicians to ensure the independent sustainability of the training programme and its continued development to the appropriate relevant standards. Working together, the two teams are developing and training an Icelandic Educational Faculty, which will deliver further supervision training and local leadership in educational matters with continued collaboration with London.

## Visits to the UK

Although the core medical training Development Day had discussed the ARCP process in some detail, all parties thought

it was crucially important that it should be observed in practice. The JRCPTB therefore facilitated the visit of four Icelandic physicians to the UK in May 2015, to allow them to observe a core medical training ARCP in a British context.

With the introduction of the CMT Curriculum in Iceland, the need for the implementation and development of simulation training became apparent. This need facilitated the further development of a simulation centre that already existed in Reykjavik. In order to support this, four Icelandic physicians also travelled to Nottingham, where they observed and participated in different aspects of simulation training. Simulation has now been incorporated into the teaching programme in Iceland.

## Supporting Icelandic trainees

From the start of the partnership, the parties clarified that trainees who successfully completed accredited core medical training in Iceland – and who passed all parts of MRCP(UK) – would be treated in exactly the same way as UK graduates for competitive entry to ST3 posts in the UK.

To further assist Icelandic trainees, the MRCP(UK) office simultaneously worked with the JRCPTB and the programme leaders in Iceland to establish an MRCP(UK) Written Examination centre in Iceland so that trainees following the CMT programme could take the Part 1 Examination when ready and without undue delay.

The JRCPTB also set Iceland up on the ePortfolio as a 'new Deanery', so that Icelandic doctors are treated exactly the same as UK doctors. Once the programme had started, a representative from Iceland also became a full member of the JRCPTB UK Core Medical Training Advisory Committee, which meets on a regular basis to develop and progress core medical training.

Throughout the change process, monthly video conferences were held to make plans, monitor processes, and advise on issues.

A date to start the programme was set for the beginning of September 2015. The Icelandic team were keen to emphasise the importance of this event, and so arranged an official launch, which included the minister of health, the Icelandic equivalent of the chief medical officer and the British ambassador to Iceland.

During this launch, the JRCPTB were able to talk to many of the consultants and trainees who would be starting the new programme and were greatly impressed by the overwhelming enthusiasm to make it work.

## Measuring success

Progress has been monitored in three ways. Firstly, we have looked at the first cohort of people who undertook Part 1 of MRCP(UK) six months into the new programme. The pass rate for those in the programme in Iceland at this first attempt was 71.4%. This compares with the standard reference group of UK-trained doctors taking the exam for the first time which saw a pass rate of 62%.

Secondly, we arranged for a UK head of school to provide externality to the first annual ARCP to ensure that the standard and process was a UK standard. Thirdly, a full accreditation visit was undertaken. The team of two senior very experienced physicians and an administrator provided an external review of progress in June 2016 and assessed whether the training was being delivered to the UK standards. The JRCPTB insist that all accreditation visits are open and the full report of the visit is available from the JRCPTB website.<sup>1</sup> The report recommended that core medical training in Iceland could be accredited as being equivalent to the UK for two years from June 2016, subject to progress of some developmental areas. This recommendation was endorsed by the Federation of the Royal Colleges of Physicians, who were impressed with the programme progress to date.

## Summary

Over a two-year period, a very successful partnership has developed between Iceland and the Federation of the Medical Royal Colleges, in particular JRCPTB and MRCP(UK). We have jointly successfully delivered core medical training to a UK standard in Iceland with the enthusiastic support of trainees and trainers. It has addressed and helped to resolve a workforce crisis – and subsequent service crisis – in Iceland.

There is mutual agreement that the programme has proved successful in supporting improved and more structured training in Iceland for the good of trainees, trainers, the hospital and, ultimately, patients. Iceland continues to strengthen its programme including utilising the accreditation visit report feedback to this end. Similarly the JRCPTB and MRCP(UK), having established a successful model are together, are building on this success to offer similar partnerships to other countries around the world. ■

## References and further reading

<sup>1</sup> [www.jrcptb.org.uk/about-us/international-programme-accreditation](http://www.jrcptb.org.uk/about-us/international-programme-accreditation)