

4th June 2020

Re: Principles for restarting medical education

Dear Colleague,

The COVID-19 outbreak has had a significant impact on the delivery of undergraduate and postgraduate medical education as well as on NHS service delivery. The challenge faced by service and education leaders is to restart suspended or reduced clinical services and medical education in a safe and consistent way, whilst recognizing that COVID-19 is likely to affect how this is done for several months or even years to come.

We suggest the following principles in relation to the restarting of under- and post-graduate medical and dental education.

1. Restart of medical and dental education should be fully **integrated** into plans to rebuild clinical services. Undergraduate medical students, particularly in the more senior years, should restart clinical placements in appropriate NHS settings, as soon as feasible and certainly by September 2020.
2. Students and Trainees should be facilitated to learn **wherever** the service is located – whether the service has moved to a different Health Board hospital or community site, independent hospital or field hospital.
3. Students and Trainees should be facilitated to learn **however** the service is delivered – whether that is face- to -face or virtually. A greater use of tools such as simulation should be considered where appropriate.
4. Students and Trainees should have access to appropriate **protective equipment** to enable them to participate and learn during service delivery, and should, for these purposes be treated in the same way as NHS staff working in these areas. Medical students and Physician Associate students should be **regarded as 'essential workers' or 'key workers'** in the NHS, and their continued education needs to be given high priority. The long-term resilience of the health service relies on maintaining the number of new healthcare professionals able to join the NHS annually.
5. Students and Trainees should be provided with mandatory formal education using **whatever methods of delivery** are the most suitable.
6. There should be an increased focus on delivering a **high quality of medical and dental education** in view of the reduced quantity of experience available.

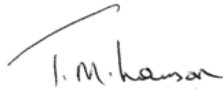
7. There should be increased attention to **safe supervision and support** of Students and Trainees in view of the disruption of normal team structure and service delivery locations.
8. Educators and trainers should be facilitated to **participate in medical and dental recruitment, examination and assessment** processes to enable Students and Trainees to progress in their courses/programmes and support the flow of highly capable medical and dental professionals into the service.

HEIW and Cardiff and Swansea University Medical Schools are committed to working together to support Health Boards in enabling a co-ordinated and joint restart of clinical services and medical education.

Yours faithfully,



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Dr Tom Lawson
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