THE RAISON D’ÊTRE OF ROYAL COLLEGES

Recent bureaucratic attempts to modernise postgraduate medical training in the United Kingdom witnessed thousands of doctors marching in protest. The vehicle for change was Modernising Medical Careers — a program implemented by the Department of Health, with the active involvement of the Royal Colleges. It aimed to alter both the curriculum content and the time required for specialist postgraduate training, and its development was overseen by a statutory body accountable not to the medical profession, but to politicians.

The immediate catalyst for the mass demonstrations was the resounding failure of a computerised system to process job applications of some 30000 doctors for 22000 positions. But there were deeper concerns: misgivings about training opportunities and job security. More problematic, perhaps, was disillusionment with the State takeover of postgraduate medical training, jeopardising the very raison d’être of the Royal Colleges.

In the wake of the protests, the Royal Colleges and the British Medical Association (BMA) were widely criticised, as only 10% of trainees felt adequately represented by the Royal Colleges, and 6% by the BMA. Indeed the aftermath saw the resignation of the BMA chairperson. There were also calls for the Colleges to be more resolute:

They need to raise their game and make clear they are independent bodies with their own ideas and principles — which may from time to time differ from the government’s …*

Given the future explosion of Australian medical graduates, and current workforce shortages, we may well witness similar tensions. There are already government calls to streamline and shorten our postgraduate medical training!

It is imperative that our Colleges remain steadfast and resist political pressure to solve medical manpower problems created by governments. After all, the raison d’être of the Royal Colleges is to be the independent voice of the profession and the vehicle for quality vocational training.

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*Hawkes N. The royal colleges must up their game — or die. BMJ 2007; 334: 724.