

05 March 2012

To: Trust Chief Executives

Cc: Monitor

Gateway reference: 17217

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Dear Chief Executive

Re: Shadowing for Foundation Year 1 (F1) Doctors

The first few weeks of employment for medical graduates are not only stressful but are also associated with increased risk for patients and employing organisations. Learning from pilots undertaken across trusts in England and in other parts of the United Kingdom, we agreed at the NHS Operations Executive that all new appointees should undertake a period of paid shadowing immediately before they take up their F1 post. To implement this in time for August 2012, employing organisations, SHAs and postgraduate deaneries will need to start planning now.

Our aim is to ensure that all appointees to F1 spend a minimum of four working days shadowing the F1 job that they will be taking up and completing trust-based induction. This will help them to become familiar with their new working environment and include a handover of their clinical responsibilities. The evidence from the pilots suggests that shadowing can reduce the number of serious adverse events.

This shadowing period will equip our new colleagues with the local knowledge and skills needed to provide safe, high quality patient care, from their first day as a F1 doctor. It builds on a range of developments in undergraduate medical education including student assistantships. Guidance is provided in the attached report produced by Medical Education England and further information will follow.

To prepare new F1 doctors starting this August, we have agreed to introduce a mandatory paid shadowing period at the end of July. All appointees should be remunerated on a pro-rata basic F1 salary. This will typically be through an extended contract with the employing trust. The latest start date for shadowing this year should be Thursday 26th July 2012.

We recognise that a number of trusts and SHAs have already developed their own arrangements for paid shadowing. In some instances, this has been funded by the employing organisations themselves but it is typically a pressure on the MPET budget. In all cases, the introduction of shadowing has required close working between employing organisation, SHAs and postgraduate deaneries. I have also written to all medical students to advise them of the new arrangements.

While I acknowledge that Foundation Trusts cannot be required to implement shadowing, I would hope that they recognise the benefits to patients and newly appointed F1 doctors of introducing such a move.

I am grateful to you for your help and support

Yours sincerely,

A handwritten signature in black ink that reads "Bruce Keogh". The signature is written in a cursive style and is underlined with a single horizontal stroke.

Professor Sir Bruce Keogh
NHS Medical Director

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