Faculty of pharmaceutical physicians

Dr Alan Boyd, the president of the Faculty of Pharmaceutical Medicine was invited to the MASC to present the details of the work of the Faculty. It was noted that the membership was comprised of doctors across industry, research and academic groups and regulators. Over 30% of the members are overseas. The Faculty acts as a regulator and also a designated body for revalidation. As a designated body, overseas members must come back to the UK for a face to face revalidation appraisal.

In contrast, trainees can spend two years overseas and complete CCT overseas and the ARCP can be done by video. It is a concern that this cannot apply to revalidation. The Faculty now has its own premises at the Angel where it holds frequent symposia. Dr Boyd also expressed the Faculty’s concerns about the limited numbers of drugs formally recognised for use with neonates and children.

MASC has been responsible for the representation of pharmaceutical physicians within and by the BMA since 2011. We revised the BMA’s guidance *The pharmaceutical physician* with the help of the Faculty of Pharmaceutical Medicine and the British Association of Pharmaceutical Physicians. This can be accessed on this page of the BMA website: bma.org.uk/advice/career/studying-medicine/insiders-guide-to-medical-specialties/alternative-career-choices/pharmaceutical-medicine
Brexit

MASC spent some time considering the implications of Brexit and how it would affect the academic sector and medicine. MASC stated that they did not believe that the agreements reached so far give enough reassurance to EU doctors and medical academics that they and their families will be persuaded to stay. The loss of these colleagues will undoubtedly damage patient care, impede long-term medical research, damage our pharmaceutical industry and risk an over-reliance on recruiting doctors from poor countries in desperate need of medical staff.

The BMA has published a series of briefings on a range of key issues relating to the impact of Brexit on the healthcare system. The latest briefing provides a snapshot of the key issues facing patients during the negotiations, and the BMA’s policy positions which have been explored in greater detail in other briefings all of which have been published here: bma.org.uk/collective-voice/influence/europe/brexit/bma-brexit-briefings.

Euratom

Brexit also brings challenges as a result of withdrawal from the Euratom treaty, this has been referred to in a recent blog by MASC co-chair Prof Michael Rees.


The UK does not produce any of the diagnostic isotopes derived from Molybdenum 99m which decays into Technetium 99m which is commonly used in over 700,000 isotope examinations per year in the UK. Coming out of the customs union may possibly delay the transport of this isotope from the sites in Europe which produce it. Not being part of the single market may also reduce European supply to the UK which is monitored under the Euratom treaty. Radiation safety issues are also dealt with under the Euratom treaty. The UK would have to duplicate these safeguards. The BMA has been represented by Prof Rees in presenting evidence on the impact on patient care and research by this change to the House of Lords EU home affairs committee.


As a result of the House of Lords EU home affairs committee Lord Jay of Ewelme wrote to Greg Clark the minister for business energy and industrial strategy on the 8th December.


This issue is currently being followed up by MASC with the Department of Health and related departments in conjunction with the Royal College of Radiologists and the British Nuclear Medicine Society.
Student numbers

MASC considered the decision to increase the number of medical students. 500 places are planned to go to existing providers but it remains unclear how the extra 1000 places are to be allocated or funded. MASC expressed concerns over the availability of placements, fees charged and capacity, especially in general practice. Competitive bidding will apply and encouraging a diversity of applicants will be a factor in the decision-making process. Fears were also expressed about the impact of training other groups, such as physician associates, who may well be in competition with medical students for clinical education and training, the failure to meet the costs of the provision of undergraduate education in general practice and the lack of a commitment to creating new foundation programme places.

Academic trainees

Academic trainees at the BMA have planned to hold their next conference in February 2019. Further details will be made available nearer the time.

The chair of the joint academic trainees subcommittee also reported that they had a positive ongoing relationship with the junior doctors committee and its chair, Jeeves Wijesuriya.

In terms of the position of university-employed academic trainees working in the NHS, the committee considered proposals for regularising the situation, enhancing clinical governance and ensuring that they were covered by the protections in the 2016 junior doctor contract.

Medical Research Council and UK Research and Innovation

A number of medical academics are employed by or contracted to the Medical Research Council. The BMA is one of a group of trade unions that negotiate with the Council on terms and conditions of service and are involved in the discussions around the transfer of the research councils to UK Research and Innovation. A representative of medical academics working with the MRC has a seat on the medical academic staff committee.

A letter from the joint trades unions in January 2018 to staff transferring from employment by one of the research councils (including the Medical Research Council) to employment by UK Research and Innovation (UKRI), has been written. The text of this letter can be read as a download at bma.org.uk/-/media/files/pdfs/about_the_bma/how_we_work/medical_academics/agreed_joint_jcc_comms_jan18.docx?la=en
Accountable care organisations (ACOs)

The BMA has significant concerns regarding proposals in England to introduce accountable care organisations (ACOs), which have far reaching implications, and which is occurring without due awareness of and consultation with the public, health professionals or parliamentarians. The BMA’s opposition to ACOs as bodies includes their being subject to 10 to 15-year fixed term contracts, and being open to competitive tendering in their creation. There is a fear that this could result in whole areas of NHS services being run by the commercial sector. Your views on these developments and, in particular, the implications for academic medicine would be very helpful.

Academic GPs

Working with the GPs committee, MASC wants to address the fact that there are far fewer GP academics compared with other specialties. MASC is keen to learn more from GPs and GPs in training who have an academic component in their work, through a survey regarding the training programme, career structure and pay arrangements.

To help us with this work, it would be helpful if GPs could record on the BMA’s membership system whether you have a formal academic role. Your higher education/university employer can also be recorded on the system. All readers of this newsletter, should ensure their details are up to date and encourage their colleagues to check also. BMA membership can be accessed online at bma.org.uk/mydetails. Frequently asked question regarding membership can be found here.

USS pension scheme

The Universities Superannuation Scheme (USS) has recently reported shortfall in the scheme and is proposing further significant changes to the benefits offered by the scheme. MASC is aware that the proposals have caused a great deal of anger amongst UCU members and has sought advice from the BMA’s pension team on how best to respond. It is expected that USS will issue a consultation of the proposed changes shortly to which the BMA will submit a formal response. As you will no doubt be aware UCU has called a number of days of strike action against the proposed changes.

The BMA has issued the following statement in response to that and the changes to the USS generally: bma.org.uk/news/media-centre/press-releases/2018/february/bma-responds-to-uss-proposals-on-pensions
Women in Academic Medicine

There are plans from the Women in Academic Medicine group to hold its next conference on 12 October 2018, please put this date in your diary if you are interested in attending. The two previous events have had exceptionally positive feedback. The group is also working on a survey of women’s careers in academic medicine and the preparation of a role models document.

The 2018 winter crisis

BMA council chair Chaand Nagpaul, in a letter to the prime minister, has pointed out the devastating impact of current NHS pressures on doctors and patients, and that current funding of the NHS – including the additional money announced by the chancellor in the Autumn statement – still falls woefully short of the health needs of the population. MASC is concerned of the potential effect these pressures may have on academic trainees and other academic doctors where they may be under pressure to meet staffing shortages at the expense of research and teaching time. If you are adversely affected in any way, please let us know at info.masc@bma.org.uk

Comments and views

The views of everyone in academic medicine are also welcomed by MASC. Do feel free to communicate your comments to us at the BMA in London. info.masc@bma.org.uk

We also welcome short contributions for possible inclusion in future newsletters.

COMAR 2018

COMAR, the Conference of Medical Academic Representatives, will be held on Friday 20 April 2018. The theme of this year’s meeting is leadership at all levels. Speakers and panel members include Sir Michael Hirst, past chair of Diabetes UK, Dr Páivi M Paldánus, global medical director of cardiometabolic disease, Novartis and Professor Kevin Davies, responsible officer and professor of medicine, Brighton and Sussex Medical School.

Further information about the conference and a registration form can be found here: bma.org.uk/events/2018/april/comar

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