

Minutes of the Medicine Specialty Training Board meeting held at 14:00 on Friday, 22nd August 2025 via Teams

Present: Marion Slater (Chair) (MS), Helen Adamson (HA), Laura Armstrong (LA), Karen Cairnduff (KC), David Carty (DC) Jennifer Duncan (JD), Marie Freel (MF), Adam Hill (AH), Cathy Johnman (CJ), Jen Mackenzie (JM), Susan McGeoch (SM), Claribel Simmons (CS), Mun Woo (MW), Jane Rimer (JR)

Apologies: Jesse Dawson (JD), Ken Donaldson (KD), Maximillian Groome (MG), Mathis Heydtmann (MH), Stephen Lally (SL), Vhari MacDonald (VM), Dawn Mackie (DM), Sarah McNeil (SM), Lynn McCallum (LM), Kim Milne (KM), Ananth Pillai (AP), Vicky Tallentire (VT), David Wilkin (DW)

In attendance: Kerry Anne Ferrie (KAF) (Minutes)

Item	Item name	Discussion	Agreed/Action
1.	Welcome, apologies and introductions	<p>The Chair welcomed all to the meeting and apologies were noted. The group introduced themselves for the new members of the group.</p> <p>MS highlighted that DC and SM were joining as newly appointed Associate Postgraduate Deans and details would be communicated to teams soon about changes in roles and oversight.</p>	
2.	Minutes of the Medicine STB held on 27/11/24	The minutes were accepted as a correct record of the meeting.	Agreed: minutes accepted as a correct record.
3.	Review of action points from meeting held on 27/11/24	Previous actions were reviewed.	
4.	Matters arising not elsewhere on the agenda	None	
5.	Main items of business		
5.1	IM Stage One a) Recruitment update	<p>Paper 2 was circulated before the meeting. The report was reviewed and the following was discussed:</p> <p>2026 IMT CT1 Recruitment:</p>	

		<ul style="list-style-type: none"> • A Scotland-only IMT Stage 1 recruitment process would be introduced for August 2026. Applicants must choose between the Scotland vacancy or the England, Wales, and Northern Ireland option—dual applications would not be permitted. • Vacancy Timeline: JM informed KC that vacancy numbers would be needed approximately one week earlier than usual due to the new process. KC acknowledged this. • Shortlisting Process: Information was shared that applicants applying uniquely to IMT would receive an additional five points. • Shortlisting Concerns: MF expressed disappointment that previous suggestions to verify self-certified evidence in the shortlisting process were not adopted. MS acknowledged the concern and agreed to raise it at the next SAC meeting. • Communication Strategy for 2026 Recruitment: Members discussed the importance of a robust communication strategy for the new recruitment approach, emphasising the need for targeted messaging to Foundation Doctors in Training and ensuring Foundation Training Programme Directors (TPDs) were informed of the change. JM confirmed that the recruitment approach would be published on the Scottish Medical Training (SMT) website and agreed to check whether any focused communication strategies had been proposed for Foundation Doctors in Training. 	<p>MS to raise evidence verification at the next SAC meeting.</p> <p>JM to check whether any focused communication strategies had been proposed for Foundation Doctors in Training.</p>
5.2	<p>IM Stage Two</p> <p>b) Recruitment Update</p> <p>c) Scotland Only Recruitment Only Pilot</p>	<p>2026 UK Stage 2 Recruitment timelines:</p> <ul style="list-style-type: none"> • JM drew attention to the UK Stage 2 recruitment timelines, which members noted. <p>IMY3 Recruitment Pilot:</p> <ul style="list-style-type: none"> • JM confirmed that the UK-wide IMY3 pilot conducted in 2025 would not continue in 2026 and regions wishing to recruit to IMY3 posts must do so via their own standalone vacancies. 	<p>JM to seek confirmation that no further pilots for</p>

		<ul style="list-style-type: none"> • AH noted that he had not received formal notification of this decision and had understood that a revised process may be under consideration. • JM agreed to seek formal confirmation that no further pilots would be taking place and to revert back to AH with an update. 	IMY3 standalone recruitment to occur and report back to AH with an update.
5.2	<p>Deanery Issues</p> <p>a) Changes in Medical Staffing</p> <p>b) Quality Update</p> <p>c) Training Management</p>	<p>MS referred to her previous update regarding SM and DC joining as newly appointed Associate Postgraduate Deans for the North East regions.</p> <p>JD gave the following update to the group:</p> <ul style="list-style-type: none"> • Reminded members that Data Reviews had replaced Quality Review Panels • Summarised the quality activity being undertaken across several sites and any key matters highlighted during quality activities. The sites discussed included Dr Gray's, Gilbert Bain Hospital, Belford Hospital, Victoria Hospital, Dumfries and Galloway Royal Infirmary, Hairmyres, Wishaw, University of Ayr Hospital, Queen Elizabeth University Hospital and Royal Alexandra, • Summarised the NTS/STS bottom 2% and drew attention to declining scores, which would be discussed with sites during the data review process. • In response to a question raised, JD explained that due to timings data reviews had to commence prior to TPD reports being finalised. <p>LA highlighted the following:</p> <ul style="list-style-type: none"> • Summer 2025 ARCPs had gone well and planning was underway for Winter 2025 ARCPs and the 2026 schedule. In response to a question, LA confirmed that a report would be produced summarising the outcome of the ARCP reviews. • Provided an update on Round 3 Recruitment for 2025 and planning for 2026 recruitment and highlighted that suitable notice of any WTE recruitment would be required. • Advised that discovery work was ongoing to support the automation of the Less Than Full Time (LTFT) application process and highlighted the complexities being worked through. 	

6.1 / 6.2	Service (MD) report DME report	AH confirmed that service and DME representation was no longer required at STBs.	
6.3	Royal College(s) report	CS discussed recruitment challenges to Core and Higher Specialty Training and support of doctors including and International Medical Graduates (IMGs). She emphasised the importance of understanding the EDI implications of any changes to process.	
6.4	Specialty and STC reports a) Specialty and Specialist Doctors (SAS) Report b) Academic Report c) BMA representative report d) Lay member report e) Medical Specialty TPD List and National Recruitment Leads	<p>MW gave the below update to the group:</p> <ul style="list-style-type: none"> • SAS doctors were included in the STS survey, no general issues to report. • SAS doctors having access to training opportunities was working well. • There was a detailed discussion regarding the use of SAS development funds to support SAS doctors choosing the portfolio pathway to achieve required competences and meet GMC recommendations to apply for registrars. MW welcomed suggestions on how best to achieve this without depleting the SAS development funding. It was agreed that MS would meet with MW to determine next steps for potential solutions. • Not discussed JD not in attendance. • Not discussed MH not in attendance. • HA noted the importance workforce planning and ensuring available future career opportunities for RDiT. <p>It was agreed that MS and JM would review the National Recruitment Leads for the necessary updates to be made.</p>	MS to meet with MW to determine next steps for potential solutions. MS and JM to review the National Recruitment Leads for the necessary updates to be made.
7.	AOB	Nothing discussed under this item.	

8.	Next meeting:	<p>Meeting dates for 2025:</p> <ul style="list-style-type: none">• Wednesday, 26th November 2025 14:00-16:00 <p>Meeting dates for 2026:</p> <ul style="list-style-type: none">• Wednesday, 25th February 2026 14:00-16:00• Friday, 22nd May 2026 14:00-16:00• Thursday, 27th August 2026 14:00-16:00• Friday, 20th November 2026 14:00-16:00	
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