

**Dave Mc Notes from Stakeholder Feedback Session at BfAM/MUG Seminar,  
Monday 15<sup>th</sup> May 2017**

**Note: Given S.Rogers' 5 categories to consider**

**Overseas Numbers**

- Redacted
- Lift the overseas cap & allow free market as proposed in England – but recognise this depends on UKBA/Visa restrictions.

**Redacted**

- In resource-constrained environment, more Overseas students provide extra funds to expand overall Nos. to what SG might want to achieve
- Already a tough overseas recruitment market in UK & no guarantees Scotland's products would remain competitive
- There's a need for robust modelling work for post-Brexit outcome

**GP Supply & Educational Capacity/Funding**

- Multi-factorial reasons behind poor recruitment; but root issues are relentless work pressures that mean GPs have no time to train & new career patterns i.e. LTFT – meaning other efforts will fail if these root issues are not addressed[placing undergrads into already pressured & stressed GP practices will send wrong signal when you're seeking to motivate career decisions]
- Redacted
- Redacted
- Redacted

**Curriculum**

- Can Scotland design its own training syllabus which matches what the NHS needs?

**Pre-School Solutions**

**Redacted**

- Need improve data on application/competition rates – use this to work with secondary schools to leverage improvements & match this to what NHS careers are possible
- Need to look at exams schedule & entry requirements – can secondary schools innovate on what's taught?

**Undergraduate-level Solutions**

- SG should be brave & 'de-regulate' how we plan & control i.e. leave it to the market!
- SG should also encourage moderate over-supply

### **Postgraduate Solutions**

- Solutions lay in addressing attrition rates after Foundation; bonding would help
  - Training is too rigid, must encourage & permit flexibilities & movement to different careers without losing past skills etc. – this is a GMC issue
  - Develop Scottish-solutions
  - Redacted
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- **Type of Employer – nothing captured!**