

# Gazing into the future: the next 100 years of training from the YDEF perspective

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The Young Diabetes and Endocrine Forum (YDEF) was founded a little over 20 years ago by a group of dynamic and enthusiastic registrars. Now, in their consultant adventures, they continue to lead us fearlessly within this field. They built and have left a legacy within this organisation based on three key principles: education, support and, most importantly, advocacy for trainees. Over the last year I have had the immense privilege to chair YDEF. My committee is composed of a wonderful diverse group of diabetes and endocrine trainees from all over the country. Some of us have a penchant for research (most of us are currently out of programme doing PhDs) but the commitment to YDEF and supporting trainees and training is unwavering.

This year has been a momentous year with the centenary of the discovery of insulin. I was asked by ABCD to share some thoughts on what the next 100 years of training might look like. The next 100 years seems too far off to contemplate so I thought I would focus on the next few years.

Progress in training is happening day to day and the future of training looks bright. However, there are some small points for improvement and some ideas about what we would like to see the shape of training to be.

## Influence of the pandemic

As diabetes and endocrinology (D and E) trainees we have had a difficult two years. D and E contributed one third of the general internal medicine (GIM) acute medicine workforce during the pandemic. This is something to be immensely proud of this but it has naturally impacted training. Answers to a survey conducted by YDEF revealed that 51% of trainees feel GIM is an integral part of D and E training but, sadly, that 81% of trainees believe that GIM took them away from speciality. It is essential to strive for structured protected GIM-free time and to ensure this is equal for all trainees in all deaneries.

YDEF have been fortunate enough to sit on the specialist advisory committee (SAC) at the Royal College of Physicians for Diabetes and Endocrinology. During our time on the SAC, we have gained real insight into the care and thoughtfulness taken by train-



## Key messages

- Improvements in training ongoing but there is still work to be done.
- Frontline and GIM work should not come before D and E training but alongside.
- Support for trainees is imperative and more is to be done for mental health wellbeing.
- Equal opportunities should be given throughout the whole speciality.

ing programme directors in shaping the next generation of diabetologists and endocrinologists. In the YDEF survey conducted during the pandemic, 95% of trainees felt tertiary centre experience was important in their training. YDEF agree. With the introduction of internal medicine training (IMT), concerns were raised that tertiary centre experience would be removed from senior trainees to accommodate IMT. Whilst this has been encountered in some centres, we have also found in some hospitals they have doctors in speciality training, allowing trainees to go to specialist clinics and MDTs whilst the general medical wards are covered. We must not become complacent and allow changes in other training pathways to take precedence over our own.

## Health technology and diabetes

Our speciality is a keen proponent of health technology within diabetes. With the rise in digitalisation of the NHS and patient consultations, our training needs to rise to the challenge and prepare us to adapt our skills for diagnosis and management in the digital forum as well as becoming familiar with novel health technology in diabetes.

Trainees are so very important to us at YDEF and we would like to see support for trainees at difficult times improve. Over the next few years, with ongoing geopolitical uncertainty and strain upon our health services, mental health problems will almost certainly continue to rise. We must ensure that we work collectively to look after one another.

Finally, at YDEF representation matters. As training continues we must ensure that opportunities of professional development are offered equally to all trainees.

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