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*Correspondents are urged to write briefly so that readers may be offered as wide a selection of letters as possible. So many are being received that the omission of some is inevitable. Letters should be signed personally by all their authors.*

## Training in practice

SIR,—Your leading article on this subject (23 October, p 959) makes a number of interesting points. We welcome in particular the emphasis it places on the need for objective assessment of teacher training. We regret, however, the inaccuracy of one statement: "Already the indications are that the ambitious Nuffield programme for course organisers will be incapable of objective assessment."

Neither of us know of any such indications, yet one of us is primarily responsible for each Nuffield course achieving its objectives and the other for assessing whether or not they are achieved. Indeed, the reference you use supports our view rather than that stated in your article since it says, "endless assessment forms were completed several times a day during the initial week, and the key position of assessment in the educational process soon emerged."<sup>1</sup> The reference does go on to say, "It is still too early to assess the Nuffield Project accurately." This self-evidently was true in August 1975 since the project will not be completed until July 1977.

The minimum steps for objective assessment of a project are: objectives written prior to it; design of assessment instruments; data collection; and data analysis. All these steps have been taken for the Nuffield Project. Data collection will proceed until the project is completed. Data analysis has commenced and

first trends indicate that the stated objectives are being achieved.

Objective evaluation is part also of curriculum design and follows the equally essential specification of objectives, use of resources, and selection of appropriate teaching methods. The Nuffield courses set out to teach curriculum design to course organisers by the example of their own design.

Written objectives place great emphasis on evaluation and assessment. Resources and teaching methods are described in briefing letters. What is ambitious about the Nuffield Project is, in fact, the emphasis placed on assessment and evaluation and the multiplicity of tools designed to achieve it. Members use these or design their own for the courses they themselves run. All these materials are distributed to course members and are available on inquiry. The Nuffield courses are based on educational principles and these are what we hope its members are learning.

We hope you will continue to press for objective evaluation not only of teacher training but of other aspects of medical education such as vocational training, continuing education, and the preregistration year. For instance, other regions should be encouraged to follow the example of the West Midlands, where Dr A H E Williams, who completed the first Nuffield course, has been

given special responsibility for evaluation of detachment courses in his post as associate regional adviser in general practice.

We join you in commending the Oxford region on being able to report having overcome the "emotive issue of professional assessment by a peer group." We must admit possible bias. Nearly all the course organisers in the Oxford region have attended part or whole of a Nuffield course, as did Dr J C Hasler, the regional postgraduate adviser and author of the report.

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<sup>1</sup> *Journal of the Royal College of General Practitioners*, 1975, 25, 547.

SIR,—Your leading article "Training in practice" (23 October, p 959) assesses the situation well. I completely agree with the comment on the lack of control data from doctors entering general practice without formal training. It is perhaps of interest to note that we are now a year on in a study which seeks to achieve just these data. We are hoping to use the methodology previously described, to compare two equal groups of about 25-40 doctors, the one group recruited from the trainees on whom we have previously reported and the other from doctors who have entered practice by "less structured routes." No report of this will be available, however, for two years. Naturally the study will stand or