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EDITORIAL ARTICLE

The beginning of the residency of the specialty in legal and forensic medicine in Spain ☆



El inicio de la residencia de la especialidad de medicina legal y forense en España

Marta Grijalba-Mazo^{1,2,3,*}, Josep Arimany-Manso¹

¹ Comisión Nacional de la especialidad de Medicina Legal y Forense, Ministerio de Sanidad, Madrid, Spain

² Dirección General para el Servicio Público de Justicia, Ministerio de Justicia, Madrid, Spain

³ Facultad de Derecho, Universidad Internacional de La Rioja, Logroño, Spain

Spanish Legal and Forensic Medicine (LFM) is in luck. On 31 May 2022, the first 8 residents in the speciality of LFM joined the accredited Specialised Health Training Teaching Units (SHT) of the Institutes of Legal Medicine and Forensic Sciences (ILMFS). They did so in the ILMFSs of Albacete, Aragón, Burgos, Cáceres, Catalonia, the Basque Country, Murcia, and Valencia. This was the culmination of a long road that culminated in Royal Decree 704/2020, of 28 July,¹ which established access to the title of medical specialist in LFM by the residency system and, subsequently, in Order SND/948/2021, of 8 September,² which approved the offer of places and the call for selective tests 2021 for access in 2022 to the ILMFS. Therefore, the incorporation of the LFM speciality into the so-called MIR (Medical Internship Resident) system, based on "learning by working", which is organised through a special employment contract whereby the resident has the obligation to provide work and the right to receive training in accordance with the Official Programme of the Speciality (POE)³ is now a reality.

The LFM speciality has a long history in Spain.⁴ The Law of 20 July 1955 on "Teaching, Qualification and Practice of Medical Specialities",⁵ established that, in order to be expressly qualified as a specialist doctor and to occupy

positions of this nature, it was necessary to be in possession of the corresponding qualification beforehand. The 33 recognised specialities already included the speciality of LFM. Subsequently, Royal Decree 127/1984 of 11 January 1984, which regulated specialised medical training and the award of the title of Specialist Doctor,⁶ also included the speciality among the medical specialities that did not require hospital training. The Order of 9 September 1988⁷ on access to the specialities in section 3 of the annex to Royal Decree 127/1984, of 11 January, laid down the selection procedure for admission to the Professional Schools of Medical Specialisation or University Departments and developed the specialisation programmes. Thus, in 1989, the speciality of LFM was integrated into the general call of the MIR system.⁸

In 2003, the experience acquired made it advisable to update the regulation of certain aspects of certain medical specialities, such as changes of name, classification, or suppression. Law 44/2003 of 21 November 2003 on the organisation of the health professions⁹ (OHP) incorporated important modifications in the panorama of the SHT that necessarily led to a global and progressive rethinking of the provisions that had regulated it. In its fourth transitory

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* Corresponding author.

E-mail address: marta.grijalba@mjusticia.es (M. Grijalba-Mazo).

provision and referring to health specialities whose training system was not the residency system, it stated that, within 5 years of the entry into force of this law, the Government would modify, abolish, or adapt their training system to the residency system. This provision left the speciality extremely vulnerable in its student regime model. Royal Decree 183/2008 of 8 February 2008¹⁰ maintained the transitional period established in the LOPS, but Royal Decree 639/2014 of 25 July 2014,¹¹ regulating the core curriculum, left the speciality of LFM, and the rest of the specialities in the student regime, outside the list of specialities in Health Sciences by the residency system. It expressly mentioned that as of the 2015 call for selective tests for access in 2016, no student training places would be offered, as in fact occurred.¹²

Faced with the threat of the disappearance of the speciality of LFM, a period of reflection was opened in the judicial and university spheres and in scientific societies.¹³ One of the challenges of the Forensic Medical Council (FMC) was to defend the speciality, as it was a priority for the forensic medical profession and the Ministry of Justice. Therefore, in 2015, a technical document was discussed and approved by the FMC Plenary at the request of the Ministry. The document stressed the importance of the speciality of LFM, that it should be developed via MIR in a non-core modality and that the ILMFSs should actively participate in the training as teaching reference centres. It also stressed the importance of developing a quality speciality that would facilitate the entry of future specialists into the National Corps of Forensic Doctors (NCFD).¹⁴

That this was a priority for the Ministry of Justice was made clear in Organic Law 7/2015, of 21 July, which modified Organic Law 6/1985, of 1 July, on the Judiciary,¹⁵ which introduced the incorporation of the requirement of a specialisation in Forensic Medicine for entry into the Corps of Forensic Doctors, which would become effective when determined by the Ministry of Justice once the first promotions that have obtained a place through the residency system have completed their training.

To put it in perspective, 167 years after the Royal Order of 28 August 1855 (Gaceta of 14 September)¹⁶ appointed 8 professors of the science of healing to carry out the analyses requested by the judges in the courts of first instance in Madrid, 8 positions of LFM have been awarded by the residency system.

A long journey, not without its difficulties, is coming to an end and a new stage is beginning, characterised by the hope of consolidating the good numbers and the high level of interest shown in this first call for applications, with the certainty that this will have a positive impact on the quality of the public service of justice. But it is also a path that is not exempt from new challenges.¹⁷ In particular, the publication of the new OPS for the speciality and, above all, the need to increase the number of places offered and the number of ILMFSs accredited as Teaching Units, which are totally insufficient for the future needs of the speciality and the corps of forensic doctors, given the current demographic profile.¹⁸

Conflict of interest

No conflict of interest has been declared by the authors.

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