Factors influencing foundation programme choice among medical students

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DECLARATIONS

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Summary

Objectives The advent of Modernising Medical Careers has replaced the traditional pre-registration house officer (PRHO) year and first year of senior house officer (SHO) training with a combined foundation programme. The aim of this study was to find out the factors influencing choice of foundation programme among medical students.

Design Prospective survey.

Setting Three medical schools based in England.

Main outcome measures A questionnaire was formulated containing the reasons for choosing a foundation programme with students asked to rank their choices.

Results There were 46 replies. The most important factors identified were geographical location (score 154) and combination of specialties (score 178). The least important factors was the reputation of consultants (score 525) and opportunities for research (score 530).

Conclusions The factors influencing choice of foundation programme are not dissimilar to the choice of PRHO year despite the different emphasis in training which it offers.

Introduction

In the UK, the advent of Modernising Medical Careers (MMC) changed medical training for doctors. It signalled the end of the traditional pre-registration house officer (PRHO) year and first year senior house officer (SHO) year into a two-year combined foundation programme. This programme was introduced in 2005 and comprised of six attachments over two years with each attachment lasting four months. It was introduced after the Chief Medical Officer's report 'Unfinished Business'[1] which reviewed the status and structure of the SHO grade and highlighted the need for a radical overhaul of this grade. It was commented that half of SHO posts were not part of a training programme and there was a burden upon the SHOs through a constant need to secure short-term positions. Furthermore, there was no fixed endpoint to SHO training with a lack of robust mechanisms for regular appraisal. This and other issues led to poor workforce planning at a national level.

The aim was to develop essential generic skills for all doctors, and extend and consolidate the knowledge, skills, values and attitudes acquired in medical school. Furthermore, while individual house officer posts were often ring-fenced to be filled by doctors graduating from a particular medical school, this was stopped with MMC.

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Reviewer
Marcus Lee

Since competition for positions is now more open and a much wider number of foundation programmes can be applied for, we sought to seek out which factors most influence foundation programme choice. The findings from this study are presented herein.

Methods

A questionnaire was designed by the authors with reasons listed for choosing a particular foundation programme. This was reviewed by a group of foundation-year doctors to ensure all common reasons for choosing a programme had been identified. All final-year medical students during the academic year of 2007–2008 at University College London, Kings College London and Oxford University were emailed the questionnaire and asked to voluntarily and anonymously complete and return it. To ensure a high response rate, the questionnaire was sent out twice with an interval of two months. The information requested included demographic data (age at time of starting foundation programme and gender), intended specialty, and ranking of reasons for choosing foundation programmes (ranking = 1 was the most important reason, 16 was the least important reason). For each factor, the rankings were cumulated to give a score to identify which were most important overall.

Results

Forty-six students (22 men and 24 women) completed the questionnaires. Their mean age at commencing their foundation programme would be 25.4 years (range 23.3–32.8 years). There were 11 replies from University College London, 25 from King's College London and 10 from Oxford University. The choice of intended specialty was completed by 44 students, of which nine gave two choices. Seven specialties were given: general medicine; paediatrics and women's health; general practice; surgery; anaesthesia and intensive care; psychiatry; and radiology. The number of times that these were chosen was 17, 10, 10, 6, 5, 4 and 1, respectively. Table 1 demonstrates that geographical location and combination of specialties were the most important factors when choosing a Foundation Programme. They were chosen as one of the top three

Table 1
Ranking of factors influencing choice of foundation programmes

Factor	*Cumulative of ranking scores*	*Overall ranking*	*Number for whom this is the most important factor*	*Number for whom this is a top 3 factor*
Geographical location	154	1	19	32
Combination of specialties	178	2	13	31
Quality of on-ward teaching	322	3	2	7
Reputation of hospital/programme	338	4	2	7
Anticipated experience of procedures	347	5	1	8
Educational activities	357	6	1	7
Relationship between juniors and seniors	363	7	2	7
Banding	371	8	2	10
Work load	422	9	0	0
Spouse/family issues	436	10	3	13
Cost of living	462	11	0	3
Number of on-calls	462	12	0	2
Experience of the hospital as a medical student	479	13	0	6
Modernity of hospital	510	14	0	1
Reputation of consultants	525	15	0	1
Opportunities for research	530	16	1	3

factors by two-thirds of students. The reputation of consultants and opportunities for research were the least important factors identified.

Discussion

The factors influencing the choice of foundation programme is of great interest to deaneries and trainers. Recruitment involves selecting the best available candidates and it is important to be able to tailor programmes to meet this goal as well as provide training to the doctor and a service to the patient. We determined that geographical location, combination of specialties, quality of on-ward teaching, reputation of hospital or programme and anticipated experience of procedures were the most important factors when choosing foundation programmes.

Our study is limited by the small number of responses. Furthermore, our survey did not allow for graded responses which may have allowed for greater differentiation between the mid-ranking factors where scores are clustered. Despite this, we have still clearly identified the two most important factors when choosing foundation programmes.

The findings presented are similar to those by McKeown and Boohan[2] during the PRHO years. They found that location, undergraduate teaching, friendly atmosphere, perceived clinical experience and postgraduate teaching were the most important factors. This would suggest that the factors influencing job choice for final-year medical students has not dramatically changed despite the introduction of a new training programme.

With respect to tailoring foundation programmes to attract students, it is clear that the location of a hospital cannot be changed but does explain why particular programmes are applied to more than others. However, the combination of specialties offered is something that can be adjusted and we found that this is the second most important factor influencing foundation programme choice. While a balance should be reached between what a junior doctor needs to be trained in and wants to be trained in, programmes may be more popular if they include general medicine, paediatrics, women's health, and general practice which were the most popular intended career choices.

Our survey also highlights that opportunities for undertaking research is the least important factor when choosing a Foundation Programme. This is in spite of its importance within MMC[3–5] which may reflect a lack of understanding of career progression.

Future research is required to identify the impact of this study and to determine if there are any changing trends with respect to programme choice. Furthermore, it is hoped that dissemination of this study's findings will provide the basis for a much larger study encompassing the views of more students from a greater cohort of medical schools. In doing so, not only would the results be more robust but also variations in beliefs between students from different schools could be evaluated.

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