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Dear Editor,

We would like to draw your readers’ attention to the issue of early career intentions of medical students as it raises the vital question: Are we selecting the graduates we need for the 21st century? This concern was brought to national attention by the recent report “By choice - not by chance”, jointly commissioned by Health Education England and the Medical Schools Council[1]. The report explored with key influential groups the factors within medical schools influencing general practice as a career choice. Previous work on the GP career preference of medical students at their time of entry to medical school have reported figures of 10-20% [2,3] but published reports are 10 years older and more; both the dynamic of medical careers and the workforce needs of the United Kingdom and beyond have changed dramatically over that time.

As part of a larger longitudinal study we are undertaking at one, large medical school, we asked a cohort of medical students to complete a paper questionnaire containing items on specialty preference on 3 occasions (early in year 1, end of year 1 and end of year 2). At each time point, 90-92% of the year group responded: n=193 for the first 2 occasions and 206 (including those on the graduate entry programme) on the last occasion.

Our results showed that the majority of students at all time points reported “a fair idea but may change my mind” (43-46%) or “several specialties appeal” (41-44%). Much fewer had “no idea” (8-11%) or had made a definite decision (0.5-5%). The table below shows the students preferred career choice if known, i.e. if their response was that they had a definite decision or a fair idea. A proportion of students listed more than one career preference.

Table: Career preference reported by medical students (if known)

<table>
<thead>
<tr>
<th>Specialty</th>
<th>Year 1: October 2014 (n=89)</th>
<th>Year 1: May 2015 (n=93)</th>
<th>Year 2: May 2016 (n=98)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surgery</td>
<td>34 (38.2%)</td>
<td>36 (38.7%)</td>
<td>30 (30.6%)</td>
</tr>
<tr>
<td>Medicine</td>
<td>18 (20.2%)</td>
<td>20 (21.5%)</td>
<td>18 (18.4%)</td>
</tr>
<tr>
<td>Paediatrics</td>
<td>14 (15.7%)</td>
<td>15 (16.1%)</td>
<td>16 (16.3%)</td>
</tr>
<tr>
<td>Emergency medicine</td>
<td>9 (10.1%)</td>
<td>10 (10.8%)</td>
<td>10 (10.2%)</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>7 (7.9%)</td>
<td>9 (9.7%)</td>
<td>9 (9.2%)</td>
</tr>
<tr>
<td>General Practice</td>
<td>5 (5.6%)</td>
<td>17 (18.3%)</td>
<td>21 (21.4%)</td>
</tr>
<tr>
<td>Anaesthetics</td>
<td>5 (5.6%)</td>
<td>7 (7.5%)</td>
<td>10 (10.2%)</td>
</tr>
<tr>
<td>Obstetrics and gynaecology</td>
<td>2 (2.2%)</td>
<td>8 (8.6%)</td>
<td>5 (5.1%)</td>
</tr>
<tr>
<td>Radiology</td>
<td>2 (2.2%)</td>
<td>1 (1.1%)</td>
<td>3 (3.1%)</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>6 (6.7%)</td>
<td>10 (10.8%)</td>
<td>7 (7.1%)</td>
</tr>
</tbody>
</table>

The table illustrates that General Practice showed the largest increase in students' preferences over the first 2 years of their undergraduate studies. However, the striking figure is the extremely low proportion of students reporting a preference for General Practice at the beginning of year one; this is lower than previously reported figures [2,3]. Our data suggest that it is possible that the proportion of students being selected and recruited into medical schools with a preference towards a career in General Practice may be falling at the same time as the proportion of empty GP training places is increasing. This may be a local phenomenon, although historically our medical school has produced a similar proportion of graduates entering General Practice as the national average [4]. This could support the
question raised by others [5] as to whether medical schools are recruiting the students that society requires for its future health needs. The increase in intention to General Practice over the two years is also notable and worthy of further exploration; interestingly, the figure of 21% with a GP career preference at the end of year 2 is very similar to the figure (20%) reported for those at the beginning of final year at the same medical school over the last decade [6].

Medical career preferences have been addressed abundantly in the medical literature including systematic reviews [7,8], indicating that medical career decision-making is a dynamic, complex and multifactorial issue. Recent publications have also explored the career intentions and attitudes to General Practice of final year medical students and young doctors [9,10]. However, if we are selecting and recruiting students with very low preferences towards General Practice, is it ever going to be an achievable goal for 50% of our graduates nationally to enter General practice training programmes? We would recommend that this problem be studied nationally and addressed urgently.

References


