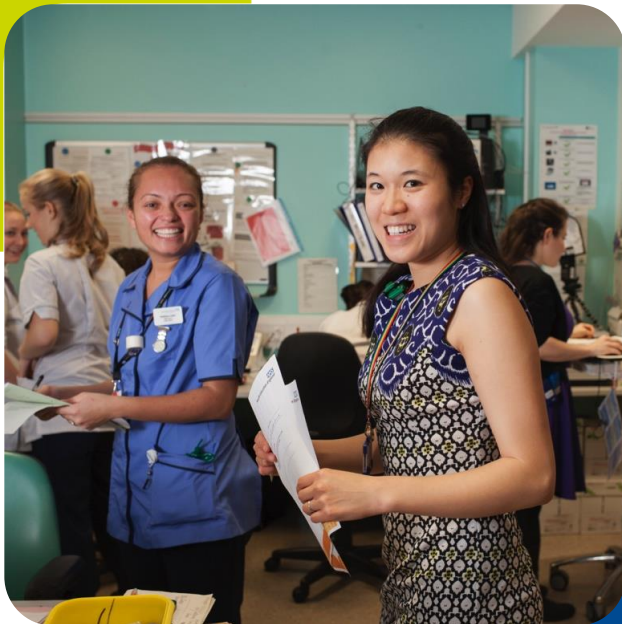


F2 Career Destinations Report 2018



November
2018

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Executive Summary

Each year the UK Foundation Programme Office (UKFPO) undertakes a survey of all F2 trainees to determine their career aspirations and planned career destinations if known. This is the ninth publication of the UK national F2 Career Destinations Survey Report using data collated from UK foundation schools. The 2018 survey received 6,407 valid responses, which gave an overall response rate of 86.8%.

The percentage of foundation trainees remaining in the UK to work as a doctor either in service or training posts is comparable to that of previous years, with 55.6% of F2 doctors continuing to undertake clinical roles within the NHS upon completion of the foundation programme and an additional 14.1% still seeking employment at the time of surveying or due to commence a post that would still include some clinical service. There has been little overall change to this percentage over the last five years, indicating that many doctors completing foundation training are continuing to make an important contribution to the care of patients within the NHS.

Since 2011 there has been a downward trend in the number of F2 doctors moving directly from the Foundation Programme into specialty training in the UK, with 37.7% of F2 respondents reporting immediate entry into specialty training in 2018.

Progression into specialty training post Foundation is influenced by many factors, including whether the doctor has made a career choice and the availability of posts in the doctor's chosen specialty and/or geographical location. At the beginning of F1 training, 49.7% intended to progress immediately to UK specialty training, which compares to 53.8% reported in 2017. The number of doctors intending to progress to specialty training, at the end of medical school, has progressively decreased over the last 8 years. The explanations for these doctors not making career decisions at this early stage of their career are not clear and requires further evaluation. However, it does highlight a change in attitude which is evident prior to entry into the UK Foundation Programme.

The 2018 data shows that at the beginning of F1, 9.6% of respondents planned to take a career break after foundation, compared to 6.4% of respondents in 2017. At the end of foundation training, this increased to 14.4% of respondents actually planning a career break, compared with 13.8% in 2017

The percentage of respondents who reported applying to enter (but were not necessarily appointed to) specialty training declined from 55.7% in 2017 to 51.9% in 2018. However, from the 6,407 respondents, 55.3% of respondents were moving post-Foundation to training or non-training posts contributing to the service.

Additional GMC data suggests that the majority of those who do not immediately enter specialty training post Foundation, do enter training within 3 years of completing Foundation.

Further analysis of the performance and progression of UK medical students and trainee doctors in their education and future careers is being undertaken by the UK Medical Education Database (UKMED) project.

Introduction

This is the ninth annual UK F2 Career Destinations Survey Report using data collated from a UK-wide (four nations) survey of outgoing F2 doctors. It describes the self-reported career destinations of F2 doctors who completed their foundation training in August 2018. These doctors typically graduated from medical schools (the university where they were awarded their Primary Medical Qualification (PMQ)) in 2016. Similar to previous reports, this paper provides details about:

- Reported career destinations
- The proportion of doctors progressing into psychiatry and general practice (GP) specialty training
- Doctors who undertook Medical Royal College exams during F2
- The numbers of specialty training and service posts being taken up outside the UK
- The percentage of doctors leaving the UK.
- Doctors intending to return within five years
- Doctors who intend to work less than full-time

Throughout the report, references to specialty training include general practice (GP) training.

Method

As in previous years, all foundation doctors who were due to complete their foundation training in August 2018 were expected to participate in the survey. By agreement of Foundation School Directors (FSDs), only doctors who completed the survey were issued with their F2 sign-off document (Foundation Programme Certificate of Completion, FPCC).

This report is based on data gathered from a homogenous purposive sample. Institutional approval for this survey came from the UKFPO. The introduction to the survey includes a statement of informed consent for the participants detailing the estimated length of time the survey would take to complete and describing how the data would be used. This was a mandatory survey incentivised with the issue of an FPCC.

Respondents could opt to provide their unique General Medical Council (GMC) reference number, which would allow their data to be shared with the GMC to inform their longitudinal study (opt in). Respondents' personal details are shared with the foundation schools to confirm completion of the survey, but personalised responses are not shared.

Foundation schools gathered the data between May and September 2018. All Foundation schools used the online survey tool SurveyMonkey© to gather the data. Doctors who did not complete F2 foundation training in August 2018 and military F2s were not required to participate in the survey.

The UK Foundation Programme Annual Report 2018 provides information about the various reasons why doctors are not able to complete F2 at the expected time.

The survey response rate is calculated by dividing the number of valid survey responses (cleaned of duplicates¹ and invalid² responses), by the reported³ number of trainees in each foundation school.

Data contained within this report is based on foundation doctors' self-reported career intentions or declared appointments. Due to the anonymised nature of the responses, it is not possible to compare career intention with the final actual appointment/next career destination for individual doctors.

¹ The survey allowed for respondents to access the survey multiple times to mitigate for interruptions while completing the survey, e.g. loss of internet connection, work interruptions. This meant that there were some responses completed by the same respondents on different occasions and therefore the most current response was saved, and earlier passes deleted.

² A survey response was considered invalid if less than 50% of the questions were complete and if the survey had been completed by a non-training grade doctor in error (which happened due to weaknesses in the collection method).

³ The foundation schools were asked to provide the number of intended participants.

Responses

All 20 UK foundation schools provided F2 career destinations data.

A total of 7,383 responses were collected through SurveyMonkey© and after cleaning the data, i.e. removing duplicates and invalid responses, 6,407 valid responses were achieved. This gives an overall response rate of 86.8%. This high response rate is expected in this circumstance of purposive and mandatory sampling. The survey respondents who completed the survey received their FPCC.

This report is based on the 6,407 valid responses. This number includes 5,967 doctors completing the standard two-year Foundation Programme (FP, 93.1%) and 440 completing the Academic Foundation Programme (AFP, 6.9%).

Career intentions at the start of F1

The following table summarises the stated career intentions from respondents as they recalled them to be when they started F1 training.

At the beginning of F1 training 3,183/6,407 (49.7%) intended to progress immediately to UK specialty training, which compares to 58.8% reported in 2017.

Recollection of intended career destination at start of F1 (percentage of whole cohort, 6,470)		
Destination Name	Number	Percentage
To immediately progress into specialty (including GP) training in UK	3,183	49.7%
To immediately progress into specialty (including GP) training outside the UK	65	1.0%
Service post in UK	398	6.2%
Service post outside the UK	557	8.7%
To undertake a clinical teaching fellow or similar post	196	3.1%
To undertake a further course of academic study	61	1.0%
Other (in UK)	33	0.5%
Other (outside the UK)	41	0.6%
Military posting	48	0.7%
Career break	612	9.6%
Undecided at the time	1,203	18.8%
N/A – I did not undertake an F1 year	10	0.2%
Totals	6,407	100%

Table 1: Recollection of intended career destinations at the start of F1

Of the 3,183 doctors intending to immediately continue into specialty training in the UK, 93.5% (2977) provided recollection data about their first-choice specialty training programme at that time, with 6% reporting that they were undecided at the start of their foundation training. 0.5% of respondents intending to immediately continue into specialty training gave no response to this question.

General Practice (GP) and Core Medical Training (CMT) are the two largest specialties recruiting post F2. In GP self-reported intention fell from 21.4 to 18.7% and CMT increased from 18.3 to 20.7% compared to 2017 so combined this is static (39.7 to 39.4%).

The following table provides a summary of the specialties respondents recalled that they had intended to progress into at the beginning of the F1 training year.

Recalled intention to progress to specialty training in the UK at F1		
Specialty Name	Number	Percentage
Academic Clinical Fellowship (ACF)	99	3.1%
Acute Care Common Stem (ACCS) - Acute Medicine	50	1.6%
Acute Care Common Stem (ACCS) - Emergency Medicine	108	3.4%
Acute Care Common Stem (ACCS) – Anaesthesia	140	4.4%
Anaesthesia	114	3.6%
Blank	16	0.5%
Broad-based Training	9	0.3%
Cardiothoracic Surgery	12	0.4%
Clinical Radiology	96	3.0%
Community Sexual and Reproductive Health	4	0.1%
Core Medical Training	658	20.7%
Core Psychiatry Training	122	3.8%
Core Surgical Training	485	15.2%
General Practice	596	18.7%
Histopathology	17	0.5%
Neurosurgery	34	1.1%
Obstetrics & Gynaecology	145	4.5%
Ophthalmology	63	2.0%
Oral and Maxillofacial Surgery	15	0.5%
Paediatrics	205	6.4%
Public Health	5	0.2%
Undecided at the time	190	6.0%
Totals	3,183	100%

Table 2: Recalled intended first-choice ST programme in the UK at the start of F1

The 3,183 respondents who reported their intention to progress to specialty training in the UK were asked if their intended first-choice specialty changed during foundation training.

Of the 3,183 trainees who indicated their intention to progress to specialty training, 65.3% advised that their programme of choice did not change during their foundation training. This is comparable to 62.8% reported in 2017.

The table below gives more detail regarding decisions of those declaring a specialty choice including the numbers in this group who changed their minds and their stated reason.

Question: “Did your specialty choice change during foundation training”		
Answer	Frequency	Percentage
No Response	10	0.3%
No: still first choice specialty	2,080	65.3%
Yes: other reason	212	6.7%
Yes: didn't enjoy rotation in original choice specialty	222	7.0%
Yes: preferred a different specialty	659	20.7%
Totals	3,183	100%

Table 3: Changes to intended ST Programme choices during FP 2016-18

Respondents made a total of 218 comments with regard to specialty choice changes during foundation training. These comments were focussed around the following themes:

- Favourable and unfavourable experiences in specialties (enjoying different specialties, lack of support)
- Family commitments
- Work life balance
- Exposure to unsatisfactory run rotas
- Deciding to work abroad
- Deciding on a different career away from medicine

For example, respondents commented:

“I have loved every single one of my foundation jobs and do not know which specialty I want to specialise in. I therefore want to get as broad a range of experience - in different specialties, different healthcare systems, different countries, as I can. All experience is good experience in my opinion and I don't plan on rushing into a training scheme.”

“Undecided upon my final career specialty. Wished to experience medical practice in another country and continue with generalized broad-based training”

Stated Career destinations of successful F2 doctors

The survey asked doctors to state their intended career destination (post foundation training). In 2018, 37.7% of F2 doctors declared that they were appointed to specialty training in the UK (both run through and core training). Of these doctors, 1.7% deferred their appointment.

The table below details the stated career destinations (at the end of F2) for 6,407 respondents.

Destinations of F2 Doctors ⁴	Foundation Programme (FP) (5,967)		Academic Foundation Programme (AFP) (440)		All (FP, AFP and unknown) F2 destinations (6,407)	
	Number	%	Number	%	Number	%
Specialty training in UK – run-through training programme	1,083	18.1%	69	15.7%	1,152	18.1%
Specialty training in UK – core training programme	956	16.0%	121	27.5%	1,077	16.8%
Specialty training in UK - academic programme	24	0.4%	49	11.1%	73	1.1%
Specialty training in UK – deferred for higher degree	3	0.1%	0	0.0%	3	0.0%
Specialty training in UK – deferred for statutory reasons	25	0.4%	1	0.2%	26	0.4%
Specialty training in UK – deferred for other reason	80	1.3%	2	0.5%	82	1.3%
Sub-total for specialty training in UK	2,171	36.4%	242	55.0%	2,413	37.7%
Locum appointment for training (LAT)	20	0.3%	1	0.2%	21	0.3%
Service appointment in UK	1,076	18.0%	50	11.4%	1,126	17.6%
Clinical or related appointment totals (summarises the three totals subtotal for specialty in UK, LAT and service appointment in the UK)	3,267	54.8%	293	66.6%	3,560	55.6%
Service outside the UK	327	5.5%	13	3.0%	340	5.3%
Other appointment in UK (including clinical teaching fellow and military postings)	403	6.8%	29	6.6%	432	6.7%
Still seeking employment as a doctor in the UK	458	7.7%	14	3.2%	472	7.4%
Further study	132	2.2%	16	3.6%	148	2.3%
Other appointment outside UK (including specialty outside the UK)	196	3.3%	18	4.1%	214	3.3%
Still seeking employment as a doctor outside the UK	164	2.7%	10	2.3%	174	2.7%
Not practising medicine – taking a career break	885	14.8%	36	8.2%	921	14.4%
Not practising medicine - permanently left profession	20	0.3%	3	0.7%	23	0.4%
Turned down specialty training in the UK as location unsuitable	67	1.1%	6	1.4%	73	1.1%
Undecided / No Response	48	0.8%	2	0.5%	50	0.8%
Subtotal other destinations	3,796	63.6%	198	45.0%	3,994	62.3%
Total signed off, known destinations⁵	5,967	100.0%	440	100.0%	6,407	100.0%

Table 4: Reported career destinations at the end of F2 2018

⁴ The percentages are calculated using the whole population number shown at the top of each number column

⁵ The total signed off destinations is the sum of the numbers and percentages shown in the two 'sub totals' rows

The tables above and below show that 55.6% of the 6,407 respondents reported securing a clinical or related appointment in the UK (specialty, locum or service post), and 7.4% were still seeking employment as a doctor in the UK. An additional 6.7% reported progressing to other UK appointments including teaching posts which usually include clinical roles. Thus, a total of 69.7% intended to progress immediately to UK-based teaching, training or service posts. This year, 37.7% reported that they intended to progress directly into specialty training in the UK. This shows a continuing decline from 2011. Of the 2,434 doctors who stated that their post-foundation destination was specialty training in the UK (including locum appointments), 1,350 (55.5%) were female, 1,057 (45.1%) were male and the remaining 27 (1.1%) did not specify. There is a slight increase in males progressing to specialty compared to 2017, when 58.4% female, 40.8% male and 0.8% who preferred not to specify their gender progressed. Appendix A (page 21) sets out intended career destinations by individual foundation school and Appendix B (page 22) provides intended career destinations by graduating medical school.

The table below provides a comparison of destinations from 2011 to 2018. The percentages include doctors completing AFP and those respondents who did not describe their foundation programme type.

Destinations for F2 Doctors	2011	2012	2013	2014	2015	2016	2017	2018
Specialty training in UK – run-through training programme	34.0%	33.5%	29.9%	29.5%	24.0%	32.8%	20.0%	18.1%
Specialty training in UK – core training programme	34.0%	30.5%	29.6%	26.8%	26.0%	15.4%	18.4%	16.8%
Specialty training in UK – academic programme	1.5%	1.6%	1.5%	1.6%	1.3%	0.7%	1.2%	1.1%
Specialty training in UK – FTSTA (2011 to 2016) or no training type stated (2017)	1.1%	0.8%	0.2%	0.2%	0.1%	0.0%	0.4%	0.0%
Specialty training in UK – deferred for higher degree	0.1%	0.1%	0.2%	0.1%	0.0%	0.4%	0.0%	0.0%
Specialty training in UK – deferred for statutory/other reasons	0.5%	0.5%	0.5%	0.3%	0.5%	1.1%	2.6%	1.7%
Subtotal for specialty (incl. GP) training in UK	71.3%	67.0%	64.4%	58.5%	52.0%	50.4%	42.6%	37.7%
Locum appointment for training (LAT) in UK	0.4%	0.7%	0.6%	0.5%	0.5%	0.5%	0.5%	0.3%
Service appointment in UK	2.3%	3.3%	3.5%	5.6%	9.2%	8.3%	16.7%	17.6%
Other appointment in UK (inc. clinical teaching fellow, military, further study)	3.0%	1.9%	2.3%	6.1%	5.5%	7%	9.8%	9%
Still seeking employment as a doctor in the UK	6.3%	7.4%	7.6%	8.4%	8.6%	5.9%	7.4%	7.4%
Specialty training outside the UK	0.8%	1.1%	0.6%	0.3%	0.4%	0.3%	0.1%	0.8%
Other appointment outside UK (inc. service and specialty)	7.4%	6.6%	4.8%	3.9%	6.1%	7.8%	2%	7.8%
Still seeking employment as a doctor outside the UK	3.7%	5.5%	6.5%	5.1%	4.3%	4.6%	3.8%	2.7%
Not practising medicine – taking a career break	4.6%	6.1%	9.4%	11.3%	13.1%	13.1%	13.8%	14.4%
Not practising medicine - permanently left profession	0.1%	0.2%	0.3%	0.3%	0.3%	0.6%	0.6%	0.4%
Turned down specialty training in the UK as location unsuitable						0.6%	1.5%	1.1%
Undecided/No Response						0.9%	1.2%	0.8%
Subtotal other destinations	28.6%	32.8%	35.6%	41.5%	48.0%	49.6%	57.4%	62.3%
Total, known destinations	100%	100%	100%	100%	100%	100%	100%	100%

Table 5: Career destinations eight-year comparison

Appointment to Specialty Training Demographics

The construct of ethnicity is a complicated but socially meaningful categorisation of people with shared cultural heritage, and analysing ethnicity in the context of this report might provide insight into cultural motivations for career choices.

The table below shows the self-reported ethnic groups provided by respondents reporting appointment to specialty training in the UK. The table shows the number of respondents in each ethnic group (6,407) and the number within each group reporting appointment to specialty training in the UK (2,434).

Ethnic Groups	Number of trainees in group	% of whole population	Appointed to UK Specialty (inc. locum)	% of each ethnic group appointed to UK Specialty (inc. locum)	% of whole population appointed to UK Specialty (inc. locum)
AFRICAN	32	0.5%	18	56.3%	0.3%
AFRICAN British	73	1.1%	35	47.9%	0.5%
AFRICAN Other	9	0.1%	4	44.4%	0.1%
ARAB	90	1.4%	52	57.8%	0.8%
ASIAN Chinese	239	3.7%	161	67.4%	2.5%
ASIAN Bangladeshi	9	0.1%	2	22.2%	0.0%
ASIAN Bangladeshi British	26	0.4%	10	38.5%	0.2%
ASIAN Chinese British	41	0.6%	22	53.7%	0.3%
ASIAN Indian	233	3.6%	129	55.4%	2.0%
ASIAN Indian British	303	4.7%	145	47.9%	2.3%
ASIAN Other	267	4.2%	144	53.9%	2.2%
ASIAN Pakistani	77	1.2%	32	41.6%	0.5%
ASIAN Pakistani British	192	3.0%	106	55.2%	1.7%
BLACK	13	0.2%	9	69.2%	0.1%
BLACK British	51	0.8%	11	21.6%	0.2%
BLACK other	6	0.1%	0	0.0%	0.0%
CARIBBEAN	6	0.1%	4	66.7%	0.1%
CARIBBEAN British	11	0.2%	4	36.4%	0.1%
CARIBBEAN Other	2	0.0%	1	50.0%	0.0%
WHITE British	887	13.8%	313	35.3%	4.9%
WHITE English	2028	31.7%	617	30.4%	9.6%
WHITE Gypsy/Traveller	1	0.0%	0	0.0%	0.0%
WHITE Irish	150	2.3%	43	28.7%	0.7%
WHITE Northern Irish	230	3.6%	64	27.8%	1.0%
WHITE Polish	30	0.5%	15	50.0%	0.2%
WHITE Scottish	371	5.8%	109	29.4%	1.7%
WHITE Welsh	183	2.9%	50	27.3%	0.8%
Any other WHITE Ethnic Group	257	4%	132	51.4%	2.1%
MIXED or multiple Ethnic Group	209	3.3%	79	37.8%	1.2%
No Response	381	5.9%	123	32.3%	1.9%
Total	6,407	100%	2434	38.0%	38.0%

Table 6: Number of respondents appointed to UK specialty training by ethnicity

The table below shows the age groups for the 2,434 respondents who stated that they were appointed to specialty training in the UK. The majority of respondents in this category were age 25 to 29.

Appointed to Specialty in the UK Age Distribution		
Age Ranges	Number	Percent
17 - 24	103	4.2%
25 - 29	1,891	77.7%
30 - 34	305	12.5%
35 - 39	88	3.6%
40 - 44	28	1.2%
45 - 49	15	0.6%
50+	1	0.0%
No response	3	0.1%
Total	2,434	100%

Table 7: Age distribution of respondents appointed to UK specialty training

Changes to career intentions during the Foundation Programme

The table below provides a comparison of recalled intentions at the start of F1 and reported destinations at the end of foundation (the time of completing the survey). The data does not reflect individual doctors' intentions in comparison to their reported destinations. The numbers shown are totals for the intentions and destinations. For example, respondents who intended to progress into a UK service post are not necessarily the same respondents who self-reported that they had been appointed to a UK service post.

Career Intentions	Total Intentions at the Start of F1		Total Reported Destinations at the end of F2	
	No.	%	No.	%
Specialty training in the UK (includes run-through, core, academic, deferred higher degree/statutory reasons/other)	3,183	49.7%	2,413	37.7%
Locum appointment for training (LAT) in UK			21	0.3%
Service post in the UK	398	6.2%	1,126	17.6%
Still seeking employment as a doctor in the UK			472	7.4%
Specialty training outside the UK	65	1%	51	0.8%
Service post outside the UK	557	8.7%	340	5.3%
Other outside UK	41	0.6%	163	2.5%
Other in the UK (includes military, clinical fellow, further study)	338	5.3%	580	9.1%
Still seeking employment as a doctor outside the UK			174	2.7%
Career break	612	9.6%	921	14.4%
Permanently left the medical profession			23	0.4%
Turned down Specialty			73	1.1%
Did not undertake an F1 year	10	0.2%		
No response/undecided	1,203	18.8%	50	0.8%
Total	6,407	100%	6,407	100%

Table 8: Career intentions at the start of F1 vs reported destinations at the end of F2

Just under half of respondents (49.7%) stated that their intention at the start of F1 was to continue immediately to specialty training in the UK. From this group 2,359/3,183 (74.1%) reported they had applied for specialty training during the 2017/2018 recruitment rounds, and 1,863/3,183 (58.5%) of this group gave 'appointed to ST in the UK' as their next destination. From the 2,011 respondents who reported that their intention at the start of F1 was not to progress to specialty training in the UK (this does not count those who did not respond, were undecided, or those who did not undertake F1, which totals 1,213), 278 (13.8%) gave "appointed to ST in the UK" as their reported destination after F2.

Increase in Career Breaks: reasons and duration of breaks

The survey collected information regarding the number of respondents intending to take a career break at the beginning of their foundation training, and the number who reported planning a career break at the end of their foundation training. The 2018 data shows that at the beginning of F1 9.6% (see table 2 on page 5) of respondents intended to take a career break after foundation training, but at the end of foundation training (as seen in table 5 on page 8), this increased to 14.4% reporting their intention of taking a career break. This increased from 13.7% reporting actual intention to take a career break in 2017.

The number of respondents who had intended to take a career break at F1 was 612. Of this group, 333 respondents reported planning a career break at the end of F2. There were a further 588 respondents who had not originally intended at the start of F1 to take a career break at the end of F2, who indicated that this was their career destination at F2. This gives the total of 921/6,407 (14.4%) that planned to take a career break at the end of F2.

The destination survey for 2018 explored reasons for respondents indicating that they wanted to take a career break at the start of their F1 and reasons for planning a career break after F2. The table below shows a summary of the reasons and the anticipated duration of the break for those indicating that they intended to take a career break at the start of F1 and went onto take a career break at the end of F2 (333).

The table shows those who intended to take a career break in F1 and subsequently planned to. The majority intended to take this break for 1 year and travel outside the UK. Those trainees who indicated that they were intending to take a break to travel planned to take a break for between 1 and 3 years.

Planned Duration	Intention for break at the start of F1 and career break taken at end of F2: reasons and anticipated duration								Total
	Blank	Family duties	Further study	To exit medicine	Travel in the UK	Travel outside the UK	Volunteer work in UK	Volunteer work outside the UK	
1 year	4	4	16	5	0	204	0	18	251
2 years	0	0	1	2	1	44	1	7	56
3 years	0	0	0	1	0	4	0	0	5
Less than 1 year	0	0	1	0	0	17	0	0	18
More than 3 years	0	0	0	0	0	1	0	1	2
No duration given	0	0	0	0	0	1	0	0	1
Totals	4	4	18	8	1	271	1	26	333

Table 9: Reasons and anticipated duration for respondents intending to at F1 and taking break at F2

The table below shows the duration and reasons given for career breaks for those respondents who did not intend to take a career break at F1 but who subsequently planned to take a break at F2 (588). This group show greater diversity regarding reasons for career break, however travel outside of the UK continues to be the main reason. Interestingly further study and family duties are emerging as reasons for this cohort.

Planned Duration	Intention for break at F1 and career break taken at end of F2: reasons and anticipated duration								Total
	Blank	Family duties	Further study	To exit medicine	Travel in the UK	Travel outside the UK	Volunteer work in UK	Volunteer work outside the UK	
1 year	17	38	48	21	3	220	5	20	372
2 years	7	3	14	12	0	52	2	12	102
3 years	0	0	1	1	0	5	0	0	7
Blank	0	0	0	0	0	0	0	1	1
Less than 1 year	1	23	11	6	0	57	1	4	103
More than 3 years	0	1	0	1	0	1	0	0	3
Totals	25	65	74	41	3	335	8	37	588

Table 10: Did not intend to take a break at start of F1 but took a break at F2, indications of break duration

Respondents made 1,602 comments regarding their choice to take a career break at the end of foundation training. Their comments described motivators for this choice such as:

- Emigrating or returning abroad
- Charity work or volunteering
- Locum or clinical fellowships
- Different career to escape stress

Applications to UK specialty training (including ACF, excluding LAT)

In total, 3,334/6,407 (51.9%) respondents reported applying (not necessarily appointed) for specialty training this year. The outcomes of applications are provided in the table below.

Outcome for F2 doctors applying for specialty training posts	Number	Percentage
Application made, and offer received	2,954	88.6%
Application made but no offer	378	11.3%
Application made but outcome unknown	2	0.1%
Total	3,334	100%

Table 11: Outcome for F2 doctors applying for UK specialty training posts

Of the 378 doctors who applied for specialty training this year but did not receive an offer, 15.1% (57/378) reported they were 'still seeking employment in the UK'. The career destinations at the time of completing the survey for these 378 doctors are given in the table below.

Career destination for those applying for but not securing ST in the UK	Number	Percentage
Service appointment in the UK	197	52.1%
Undertaking further academic study	19	5.0%
Other (e.g. anatomy demonstrator), UK or outside the UK	42	11.1%
Still seeking employment as a doctor in the UK	57	15.1%
Service appointment outside UK	14	3.7%
Still seeking employment as a doctor outside the UK	6	1.6%
Taking a career break	38	10.1%
Not practising medicine - permanently left profession	2	0.5%
Turned down a specialty (including GP) training post in the UK as the location was not preferable	3	0.8%
Total signed off, known destinations	378	100%

Table 12: Career destination for those applying for but not securing ST in the UK

Of the 2,954 (see Table 12 above) respondents who indicated that they had received an offer of specialty training posts, 15.8% (469/2,954) reported they did not continue into specialty training. Around a third of these doctors reported that their choice was to take a career break as their next career destination at the time of completing the survey.

The table below provides a summary of reported career destinations for respondents who declined offers for specialty training in the UK.

Career destination for those declining an ST offer	Number	Percentage
Service appointment in the UK	92	19.6%
Further academic study	22	4.7%
Other (e.g. anatomy demonstrator) in the UK or outside the UK	61	13%
Still seeking employment as a doctor in the UK	23	4.9%
Specialty training outside the UK	16	3.4%
Service appointment outside UK	25	5.3%
Taking a career break	159	33.9%
Not practising medicine - permanently left profession	4	0.9%
Turned down specialty appointment	67	14.3%
Total signed off, known destinations	469	100%

Table 13: Career destination for those declining an ST offer

Appointment to general practice (GP) and core psychiatry training (CPT)

Appendices C and D show the percentage of total respondents (6,407) who reported they were appointed to specialty training in the UK, together with the percentage appointed to general practice (GP) and core psychiatry training (CPT) by foundation school and graduating medical school.

The survey shows that in 2018 3,334/6,407 (51.9%) said they applied to specialty training in the UK. The survey also shows that 2,434/6,407 (37.9%) were appointed to specialty training programmes in the UK. From this group 773/2,434 (31.8%) were appointed to GP, and 718/773 (92.8%) of this group stated that this (GP) was their first-choice specialty. In comparison, 137/2,434 (5.6%) were appointed to CPT and 132/137 (96.3%) stated that this (CPT) was their first choice.

The table below shows the percentage of those appointed to specialty in the UK who were appointed to GP or CPT across the last 7 years.

Appointed to GP or CPT (appointed to Specialty in the UK)	2012	2013	2014	2015	2016	2017	2018
General Practice	36.1%	36.6%	35.5%	33.9%	33.8%	35.8%	31.8%
Core Psychiatry Training	4.7%	5.3%	5.7%	5.1%	5.3%	5.0%	5.6%

Table 14: Appointments to GP or CPT seven-year comparison

Royal College exams taken during the F2 year

The survey asked respondents to state the exams that they undertook during their foundation training and the status of results for these exams. From the total responses to this survey, 2,224/6,407 (34.7%) indicated that they had taken exams during foundation training. The survey shows that 4,183/6,407 (65.3%) respondents did not take exams.

The survey shows that 276/6,407 (4.3%) respondents reported they took multiple exams, 1,948/6,407 (30.4%) undertook one exam, and 4,183/6,407 (65.3%) took no exams during foundation training. The total number of respondents naming 'other' as the exams taken was 481 (as a single exam taken or part of multiple exams taken). Some of these 'other' exams were named and a list of the identified 'other' exams are shown below.

The table below shows the distribution of exams taken for respondents sitting one exam. For doctors who sat one exam the most common exam taken was MRCP Part 1.

Distribution and outcomes for exams for respondents sitting one exam

Outcomes	MRCP Part 1	MRCS Part A	MRCOG Part 1	MRCPCH Foundation of Practice (FOP)	Primary FRCA: MCQ	FRCOphth Part 1	MRCPsych Paper A	Other	Totals
Pass	718	284	24	17	4	17	4	238	1306
Awaiting Result	7	11	10	12	3	0	2	22	67
Fail	294	221	13	11	3	16	2	15	575
Totals	1019	516	47	40	10	33	8	275	1,948

Table 15: Distribution of exams and outcomes for doctors taking one exam

Some respondents who had indicated that the exam taken during foundation fell into the survey category 'Other' and went onto name these 'other' exams. Some of these are identified in the list below:

- Advanced Life Support Course
- Basic Surgical Skills Course
- Advanced Trauma Life Support – Royal College of Surgeons
- Canadian qualifying exams (MCCEE, NAC OSCE)
- Diploma of the Royal College of Obstetricians and Gynaecologists
- Diploma in the medical care of catastrophe
- Diploma of Child health
- Diploma in Expedition and Wilderness Medicine
- Diploma of faculty of sexual and reproductive healthcare
- Diploma in Mountain Medicine
- Diploma of Otolaryngology Head and Neck Surgery
- Diploma in Tropical Medicine
- Faculty of the Royal College of Emergency Medicine
- FRCP
- General Surgical Sciences Examination Australia
- GP entrance exams
- Medical Council of Canada Exam
- Membership of the faculty of sexual and reproductive healthcare
- Multi-Speciality Recruitment Assessment Stage 1, 2 and 3 (for GP training)
- MRCP PT 2
- MRCS PT B
- United States Medical Licensing Examination

Post-foundation employment outside of the UK

The survey collected destination information for respondents stating that their next destination would be outside of the UK. A total of 728/6,407 (11.4%) respondents reported their next destination as being outside of the UK.

From the number that indicated that they had secured a position outside of the UK, 340/728 (46.7%) had secured a service post and 51/728 (7%) had secured a specialty training post, and 163/728 (22.4%) gave a destination of 'Other Outside of the UK' and 174/6,407 (2.7%) reported that they were still seeking positions outside the UK

The majority of this group chose not to indicate if their appointment outside of the UK was preferred. This contrasts with last year's survey where 69.4% of the sub group gave a response to this question.

The data indicates that most doctors appointed to service posts and other destinations outside the UK chose not to indicate if they intend to return to the UK. Again, the low response rate to this question is in contrast to the information provided by respondents in 2017.

Intention to work less than full-time

The survey asked if respondents intended to work less than full-time (LTFT) in their next career destination. A total of 6,346/6,407 (99%) responded to this question (46 gave no response). The total number who said that they intended to work LTFT next was 832/6,407 (12.9%). Additionally, another 706 (11%) were not sure.

Of the 832 who intended to work LTFT 338 (40.6%) were male and 479 (57.5%) were female. There were 15/832 (1.8%) who preferred not to specify their gender but indicated their intention to work less than full-time.

These percentages compare to 38.1% male, 60.8% female and 1.1% preferred not to specify in 2017. This suggests an increase in male respondents intending to work LTFT.

Survey Question		Responses				Totals
Do you intend to work Less Than Full Time in your next post		No Response	No	Not Sure	Yes	
Gender	No Gender Specified	46	64	18	15	143
	Male	0	2173	271	338	2782
	Female	0	2586	417	479	3482
Totals		46	4823	706	832	6407

Table 16: Responses to the question enquiring if doctors intend to work less than full-time

**Combined 'yes' and 'not sure' responses.*

The survey asked respondents to describe their ethnic group by selecting from a list⁶. This table below shows the total number of respondents selecting each group and the number in each group considering working LTFT. The table also shows the number 'considering LTFT' as a percentage of the number in that group (proportional representation).

Ethnic Group List	Number of respondents self-selecting each group	% of whole population (6,407)	Number in each group 'considering' LTFT (1,538)	% of each ethnic group
AFRICAN	32	0.5%	10	31.3%
AFRICAN British	73	1.1%	26	35.6%
AFRICAN Other	9	0.1%	2	22.2%
ARAB	90	1.4%	23	25.5%
ASIAN Chinese	239	3.7%	35	14.6%
ASIAN Bangladeshi	9	0.1%	2	22.2%
ASIAN Bangladeshi British	26	0.4%	9	34.6%
ASIAN Chinese British	41	0.6%	8	19.5%
ASIAN Indian	233	3.6%	50	21.4%
ASIAN Indian British	303	4.7%	72	23.7%
ASIAN Other	267	4.2%	60	22.5%
ASIAN Pakistani	77	1.2%	20	25.9%
ASIAN Pakistani British	192	3.0%	48	25%
BLACK	13	0.2%	4	30.7%
BLACK British	51	0.8%	19	37.2%
BLACK Other	6	0.1%	2	33.3%
CARIBBEAN	6	0.1%	0	0%
CARIBBEAN British	11	0.2%	3	27.2%
CARIBBEAN Other	2	0.0%	0	0%
WHITE British	887	13.8%	217	24.4%
WHITE English	2028	31.7%	498	24.5%
WHITE Gypsy/Traveller	1	0.0%	0	0%
WHITE Irish	150	2.3%	26	17.3%
WHITE Northern Irish	230	3.6%	67	29.1%
WHITE Polish	30	0.5%	10	33.3%
WHITE Scottish	371	5.8%	75	20.2%
WHITE Welsh	183	2.9%	45	24.5%
Any other WHITE Ethnic Group	257	4%	51	19.8%
MIXED or multiple Ethnic Group	209	3.3%	52	24.8%
No Response	381	5.9%	104	27.2%
Totals	6,407	100%	1,538	N/A

Table 17: Ethnicity information and trainees considering working LTFT

The table above shows that percentage respondents considering working LTFT for each group ranges from 14.6% (Asian Chinese) to 37.2% (Black British). The median percentage is 24.5% and the average is 23.2%. The general trend is for a Female/Male split within each ethnic group of 70% Female and 30% Male. Counter to this trend Caribbean British and White Irish show a 70% Male and 30% Female split.

⁶ The list was devised following guidance provided by the Office for National Statistics: Ethnic group, national identity and religion, Measuring equality: A guide for the collection and classification of ethnic group, national identity and religion data in the UK. <https://www.ons.gov.uk/methodology/classificationsandstandards/measuringequality/ethnicgroupnationalidentityandreligion#toc>

Discussion

This report is based on 6,407 valid destination survey responses. The survey reports recalled career intentions for respondents at the beginning of foundation training and reported destinations at the end of the programme. While the response rate is high, it should be noted that responses are not included for approximately 13%. The survey results show that for the 2018 cohort, 49.7% had intended to continue to specialty training in the UK, and 37.7% reported progressing to it at the end of Foundation Training. From the 37.7% who stated that they progressed to specialty training in the UK, 1.7% deferred their entry. The majority (36%) of these doctors reported being appointed (not deferred) into core, run-through, or academic training. A total of 53.9% of respondents were appointed to clinical positions in the UK, including locum, service and specialty training (excluding those who deferred) posts. An additional 14.1% were still seeking a post or were appointed to an alternative post that may include clinical duties. Interestingly while 6.2% of respondents stated that they intended to seek out a service post in the UK at the start of their F1 year, 17.6% gave their end of F2 destination as a service post in the UK. There has also been a yearly increase in the number of doctors taking a career break with travel outside of the UK being the main reason cited.

The reasons for reduced immediate entry into specialty training post Foundation and increasing career breaks are likely to be multi-factorial and require further detailed study to elucidate. Investigation by the GMC and other organisations has demonstrated increased stress and burn out along with dissatisfaction with certain elements of the training structure among junior doctors generally. The unremitting examination and assessment cycle throughout medical school and foundation training results in many doctors expressing a desire to 'step-off' training and have more control over their working schedule or to take up the opportunity to travel with or without a work component. Immediately post Foundation is the most obvious opportunity early within a medical career to take such a break. Undertaking college examinations during foundation training could add additional pressure. 34.7% of foundation trainees attempted an examination. However, there is now agreement that examination success should not be an expectation or requirement for entry into specialty training from foundation as examinations can be completed within specialty training. The effect of this change in expectations remains to be monitored.

The increase in those opting for service posts may be contributed to by improvements in the educational quality of non-training posts which employers and training institutions are increasingly supporting. These posts offer doctors the ability to align posts with their preferred geography and to gain further skills. It is recognised that geographical location rather than specialty is of greater importance to doctors, so they are increasingly looking to target specific geographies for training which are often more competitive. How these factors interact and contribute at this stage is not completely clear.

The current generation within, and beyond medicine, is recognising the opportunities of 'portfolio-based careers' and therefore may delay joining the GMC-approved structured training pathways in order to develop additional skills. This may be linked to the increasing recognition of the opportunities of LTFT training to achieve improved work-life balance. GMC data does demonstrate that the majority of foundation doctors are working within training programmes or NHS posts within 3 years of completing foundation training. Significant work is on-going by all educational organisations and the GMC to respond to this and other data and improve the training and working lives of junior doctors. The role of ethnicity within these changes remains to be investigated further.

In summary, there is a decreasing proportion of doctors directly entering specialty training immediately post Foundation training. This is expected to be due to multi-factorial issues relating to medical school, foundation training, perceptions of specialty training and alternative career choices within and outside medicine and the UK. At present GMC data suggests that the majority of the doctors who do not immediately enter specialty training post Foundation do remain in, or return to, UK training or service. Finally, it appears that the significant effort exercised to improve psychiatry recruitment, is showing evidence of success with CPT appointments increasing to 5.6%. GP recruitment is more complex to interpret as recruitment has increased although this data suggests it is not from doctors immediately post Foundation training.

Appendix A

The table below shows the career destinations for F2s completing their foundation training in 2018 by foundation school.

Foundation School	TOTAL VALID SURVEY RESPONSES	Specialty UK %	No Response %	Career Break %	Other UK %	Other OUK %	Permanently Left %	Turned Down Specialty %	Total %
East Anglia	243	53.1%	0.8%	14.4%	24.7%	4.5%	0.4%	2.1%	100%
Essex, Bedfordshire and Hertfordshire (EBH)	12	33.3%	0.0%	33.3%	16.7%	8.3%	0.0%	8.3%	100%
Leicestershire, Northamptonshire and Rutland (LNR)	145	43.4%	1.4%	14.5%	31.0%	6.9%	0.7%	2.1%	100%
North Central and East London	449	42.5%	0.2%	15.8%	30.5%	8.2%	0.2%	2.4%	100%
North West London	166	51.8%	0.6%	12.7%	21.7%	9.6%	1.2%	2.4%	100%
North West of England	827	35.9%	0.6%	14.6%	37.7%	9.8%	0.2%	1.1%	100%
Northern	388	37.1%	0.5%	11.3%	37.1%	13.7%	0.0%	0.3%	100%
Northern Ireland	220	31.8%	0.9%	6.4%	34.5%	25.9%	0.0%	0.5%	100%
Oxford	226	44.2%	3.1%	18.6%	25.2%	6.6%	1.3%	0.9%	100%
Peninsula	194	18.0%	0.5%	12.4%	48.5%	20.1%	0.5%	0.0%	100%
South Thames	553	40.5%	0.5%	12.1%	34.5%	10.7%	0.5%	1.1%	100%
Scotland	784	36.7%	0.3%	8.2%	36.0%	17.5%	0.0%	1.4%	100%
Severn	255	25.5%	2.4%	11.0%	40.0%	20.4%	0.0%	0.8%	100%
Trent	272	42.6%	1.1%	13.6%	37.5%	4.0%	1.1%	0.0%	100%
West Midlands Central	180	47.2%	1.1%	13.3%	33.9%	3.9%	0.0%	0.6%	100%
West Midlands North	194	49.0%	1.5%	21.6%	23.2%	3.6%	0.0%	1.0%	100%
West Midlands South	130	40.0%	2.3%	17.7%	35.4%	3.1%	0.8%	0.8%	100%
Wales	307	30.6%	0.0%	19.9%	37.8%	10.1%	0.3%	1.3%	100%
Wessex	292	29.8%	1.0%	15.4%	33.2%	18.5%	0.3%	1.7%	100%
Yorkshire and Humber	570	36.7%	0.4%	23.3%	30.4%	8.1%	0.5%	0.7%	100%
Totals	6,407	38.0%	0.8%	14.4%	34.0%	11.4%	0.4%	1.1%	100%

Table 18: F2 destinations by foundation school

* Includes LAT appointments, service appointments, other appointments such as anatomy demonstrator and those still seeking employment in the UK. ** Includes all appointments outside the UK plus those still seeking employment outside the UK.

Appendix B

The table below shows the career destinations for F2s completing their foundation training in 2018 by graduating medical school. The percentages are the number of respondents appointed in each category as a percentage of the total number of respondents for each medical school.

Medical School	Specialty UK %	No Response %	Career Break %	Other UK %	Other OUK %	Permanently Left Profession %	Turned Down Specialty %	Totals %
Aberdeen (University of), School of Medicine	36.1%	0.0%	6.5%	35.5%	20.1%	0.0%	1.8%	100%
Barts and The London School of Medicine and Dentistry, Queen Mary, University of London	38.9%	0.0%	13.5%	35.7%	7.6%	1.1%	3.2%	100%
Birmingham (University of), School of Medicine	41.0%	1.3%	13.0%	34.7%	9.0%	0.3%	0.7%	100%
Brighton and Sussex Medical School	30.1%	0.0%	14.6%	45.6%	8.7%	0.0%	1.0%	100%
Bristol (University of), Faculty of Medicine	25.1%	0.5%	18.8%	40.3%	14.7%	0.5%	0.0%	100%
Cambridge (University of), School of Clinical Medicine	51.0%	0.7%	9.8%	32.9%	4.9%	0.0%	0.7%	100%
Cardiff University, School of Medicine	29.1%	0.0%	18.2%	36.8%	14.5%	1.4%	0.0%	100%
Dundee (University of), Faculty of Medicine, Dentistry and Nursing	46.1%	0.0%	9.6%	27.5%	15.0%	0.0%	1.8%	100%
Edinburgh (The University of), College of Medicine and Veterinary Medicine	31.8%	0.4%	9.4%	36.3%	21.1%	0.4%	0.4%	100%
Glasgow (University of), Faculty of Medicine	30.4%	0.0%	7.5%	41.9%	18.2%	0.0%	2.0%	100%
Hull York Medical School	40.8%	0.8%	16.2%	34.6%	6.2%	0.8%	0.8%	100%
Imperial College School of Medicine, London	49.1%	0.7%	12.5%	27.5%	8.4%	0.4%	1.5%	100%
Keele University, School of Medicine	44.7%	0.0%	21.1%	25.4%	7.9%	0.0%	0.9%	100%
King's College London School of Medicine (at Guy's, King's College and St Thomas' Hospital)	40.6%	1.2%	20.1%	29.1%	7.5%	0.4%	1.2%	100%
Lancaster Medical School	56.0%	4.0%	20.0%	16.0%	0.0%	0.0%	4.0%	100%
Leeds (University of), School of Medicine	30.7%	0.5%	19.1%	28.8%	19.1%	0.5%	1.4%	100%
Leicester (University of), Leicester Medical School	47.9%	1.1%	15.8%	29.5%	4.2%	0.0%	1.6%	100%
Liverpool (University of), Faculty of Health and Life Sciences	35.1%	1.1%	19.4%	32.8%	10.4%	0.0%	1.1%	100%
Manchester (University of), Faculty of Medical and Human Sciences	37.3%	0.6%	20.2%	34.3%	6.6%	0.6%	0.6%	100%
Newcastle (University of), Newcastle Biomedicine, The Medical School	35.5%	1.0%	10.9%	39.2%	13.0%	0.0%	0.3%	100%
Norwich Medical School, University of East Anglia	41.1%	0.8%	21.0%	29.0%	7.3%	0.0%	0.8%	100%
Nottingham (The University of), Faculty of Medicine and Health Sciences	40.7%	0.4%	14.2%	33.8%	8.4%	1.5%	1.1%	100%
Other EEA (non-UK) country	46.4%	0.5%	12.4%	34.5%	5.2%	0.0%	1.0%	100%
Other non-EEA/non-UK country	58.9%	1.3%	7.3%	27.2%	4.0%	0.0%	1.3%	100%
Oxford (University of), Medical Sciences Division	40.3%	1.6%	10.5%	32.3%	12.9%	0.8%	1.6%	100%
Peninsula College of Medicine and Dentistry	22.0%	1.7%	14.7%	42.9%	16.9%	0.6%	1.1%	100%
Queen's University Belfast, Faculty of Medicine and Health Sciences	33.0%	0.5%	7.3%	33.5%	25.2%	0.0%	0.5%	100%
Sheffield (The University of), School of Medicine	28.5%	1.1%	24.0%	34.6%	11.2%	0.6%	0.0%	100%
Southampton (University of), School of Medicine	31.3%	1.5%	20.4%	27.9%	16.4%	0.5%	2.0%	100%
St George's, University of London	38.5%	1.7%	13.0%	38.1%	6.1%	0.4%	2.2%	100%
Swansea University, School of Medicine	46.3%	0.0%	13.4%	31.3%	7.5%	0.0%	1.5%	100%
University College London, University College Medical School	40.1%	0.4%	11.9%	34.9%	11.1%	0.0%	1.6%	100%
University of Exeter	0.0%	0.0%	0.0%	100%	0.0%	0.0%	0.0%	100%
Warwick (University of), Warwick Medical School	40.0%	3.0%	10.4%	36.3%	8.9%	0.0%	1.5%	100%

Table 19: F2 destinations by medical school

Appendix C

The table below shows the percentage of respondents who were appointed to specialty training in the UK from each UK foundation school, together with the percentages appointed to GP and CPT in the UK. The percentages are all calculated by dividing the total number for each category by the total number of responses for each school. The totals are shown as a percentage of the total number of respondents (6,407).

Foundation school	Total Number appointed to UK specialty	Total % Appointed to ST in UK	Number Appointed to GP	% appointed to GP	Number appointed to Psych	% appointed to Psych
East Anglia (243)	243	53.1%	42	17.3%	3	1.2%
Essex, Bedfordshire and Hertfordshire (12)	12	33.3%	0	0.0%	0	0.0%
LNR (145)	145	43.4%	28	19.3%	3	2.1%
North Central and East London (449)	449	42.5%	45	10.0%	7	1.6%
North West Thames (166)	166	51.8%	15	9.0%	5	3.0%
North West of England (827)	827	35.9%	86	10.4%	15	1.8%
Northern (388)	388	37.1%	46	11.9%	7	1.8%
Northern Ireland (220)	220	31.8%	22	10.0%	5	2.3%
Oxford (226)	226	44.2%	17	7.5%	5	2.2%
Peninsula (194)	194	18.0%	10	5.2%	3	1.5%
South Thames (553)	553	40.5%	73	13.2%	16	2.9%
Scotland (784)	784	36.7%	96	12.2%	17	2.2%
Severn (255)	255	25.5%	19	7.5%	7	2.7%
Trent (272)	272	42.6%	52	19.1%	5	1.8%
West Midlands Central (180)	180	47.2%	39	21.7%	1	0.6%
West Midlands North (194)	194	49.0%	37	19.1%	6	3.1%
West Midlands South (130)	130	40.0%	15	11.5%	5	3.8%
Wales (307)	307	30.6%	30	9.8%	6	2.0%
Wessex (292)	292	29.8%	25	8.6%	3	1.0%
Yorkshire and Humber (570)	570	36.7%	76	13.3%	18	3.2%
Total population (6,407)	6407	38.0%	773	12.1%	137	2.1%

Table 20: F2 specialty destinations and proportions to GP and CPT shown by foundation school

Appendix D

The table below shows the percentages of respondents progressing to ST, GP, and CPT by medical school (university where respondents achieved PMQ). The percentages are calculated using the total number of respondents appointed to specialty training in the UK (2,434).

Medical School	No. apptd. to spec in UK	% apptd. to ST in UK (2,434)	No. apptd. to GP	% apptd. to GP in UK (773)	No. apptd. to Psych	% apptd. to Psych in UK (137)
Aberdeen (University of), School of Medicine	61	2.5%	18	0.7%	4	0.2%
Barts and The London School of Medicine and Dentistry, Queen Mary, University of London	72	3.0%	21	0.9%	5	0.2%
Birmingham (University of), School of Medicine	123	5.1%	43	1.8%	4	0.2%
Brighton and Sussex Medical School	31	1.3%	10	0.4%	2	0.1%
Bristol (University of), Faculty of Medicine	48	2.0%	13	0.5%	5	0.2%
Cambridge (University of), School of Clinical Medicine	73	3.0%	10	0.4%	3	0.1%
Cardiff University, School of Medicine	64	2.6%	25	1.0%	2	0.1%
Dundee (University of), Faculty of Medicine, Dentistry and Nursing	77	3.2%	28	1.2%	1	0.0%
Edinburgh (The University of), College of Medicine and Veterinary Medicine	71	2.9%	22	0.9%	4	0.2%
Glasgow (University of), Faculty of Medicine	77	3.2%	26	1.1%	4	0.2%
Hull York Medical School	53	2.2%	23	0.9%	2	0.1%
Imperial College School of Medicine, London	134	5.5%	26	1.1%	5	0.2%
Keele University, School of Medicine	51	2.1%	19	0.8%	4	0.2%
King's College London School of Medicine (at Guy's, King's College and St Thomas' Hospital)	103	4.2%	34	1.4%	7	0.3%
Lancaster Medical School	14	0.6%	8	0.3%	0	0.0%
Leeds (University of), School of Medicine	66	2.7%	25	1.0%	6	0.2%
Leicester (University of), Leicester Medical School	91	3.7%	33	1.4%	3	0.1%
Liverpool (University of), Faculty of Health and Life Sciences	94	3.9%	35	1.4%	6	0.2%
Manchester (University of), Faculty of Medical and Human Sciences	135	5.5%	48	2.0%	8	0.3%
Newcastle (University of), Newcastle Biomedicine, The Medical School	104	4.3%	33	1.4%	5	0.2%
Norwich Medical School, University of East Anglia	51	2.1%	22	0.9%	0	0.0%
Nottingham (The University of), Faculty of Medicine and Health Sciences	112	4.6%	44	1.8%	4	0.2%
Other EEA (non-UK) country	90	3.7%	21	0.9%	9	0.4%
Other non-EEA/non-UK country	89	3.7%	36	1.5%	9	0.4%
Oxford (University of), Medical Sciences Division	50	2.1%	1	0.0%	3	0.1%
Peninsula College of Medicine and Dentistry	39	1.6%	15	0.6%	3	0.1%
Queen's University Belfast, Faculty of Medicine and Health Sciences	72	3.0%	25	1.0%	4	0.2%
Sheffield (The University of), School of Medicine	51	2.1%	18	0.7%	4	0.2%
Southampton (University of), School of Medicine	63	2.6%	20	0.8%	6	0.2%
St George's, University of London	89	3.7%	29	1.2%	6	0.2%
Swansea University, School of Medicine	31	1.3%	12	0.5%	1	0.0%
University College London, University College Medical School	101	4.1%	17	0.7%	5	0.2%
Warwick (University of), Warwick Medical School	54	2.2%	13	0.5%	3	0.1%
Total Appointed to Specialty in the UK (2,434)	2434	100%	773	31.8%	137	5.6%

Table 21: Specialty destinations and proportions to GP and CPT shown by medical school

Appendix E

The table below provides the round 1 fill rates at CT1/ST1 level for specialty recruitment. Please note that this data does not include information from any re-advertisements. General practice fill rates were not available at the time of producing this report.

Specialty	Applications received	Posts Available	Competition Ratio (Applicants per post)	Fill Rate
ACCS Emergency Medicine	700	369	1.90	78.32
Anaesthetics (including ACCS Anaesthetics)	1428	581	2.46	99.83
Cardiothoracic Surgery	90	11	8.18	90.91
Clinical Radiology	1090	291	3.75	100.00
Community Sexual and Reproductive Health	93	10	9.30	90.00
Core Medical Training (inc. ACCS Acute Medicine)	2455	1637	1.50	79.96
Core Psychiatry Training	754	510	1.48	71.18
Core Surgical Training	1870	636	2.94	99.69
General Practice	4987	3763	1.33	78.10
Histopathology	188	102	1.84	47.06
Neurosurgery	152	34	4.47	97.06
Obstetrics and Gynaecology	511	275	1.86	80.73
Ophthalmology	378	101	3.74	100.00
Oral and Maxillo Facial Surgery (OMFS)	35	8	4.38	100.00
Paediatrics	585	451	1.30	79.38
Public Health	754	78	9.67	100.00
Total (CT1/ST1 specialties only)	16070	8857		

Table 22: Round 1 Fill Rates for Specialty CT1/ST1

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