MMC cohort 2007 leavers: Follow up interviews

Royal College of Paediatrics and Child Health
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Introduction

The second part of the MMC cohort study, which commenced in 2008, identified 39 respondents who had left the paediatric training programme and were no longer working in paediatrics. Of those, 26 agreed to take part in a follow-up telephone survey and in autumn 2011, 15 of those were interviewed. The follow-up survey aimed to identify:

- why doctors leave paediatric training;
- what those doctors are doing now
- what the College, trust or deanery could have done to prevent them leaving;
- whether they have any regrets about leaving paediatrics, and
- whether they would recommend the specialty to others.

This report analyses the results of those interviews and will be used to inform the work of the trainees' committee, the Education and Training Division and the Workforce Department of the Research and Policy Division.

Key findings

- Of the 15 respondents, 4 (26.7%) are now in a paediatric related clinical training programme, 7 (46.7%) are in a non-paediatric related clinical training programme and 4 are not in a clinical training programme. The most common destination was GP training, with 4 leavers taking this route.
- Leavers interviewed most commonly moved out of training during ST3 (40%).
- Respondents spent on average 27 months in the paediatric training scheme before leaving.
- The average time lapse between making the decision to leave and leaving was 6.8 month. Of the 13 that responded to this question, 6 (46.2%) took more than 6 months.
- There was a wide spread of reasons given for leaving the paediatric training scheme, however the most common was attraction to another specialty.
- Those now working in another specialty gave a wide range of reasons for being interested in that area of medicine. The most common reasons were a better work/life balance and broader experience/more variety.
- Respondents most commonly selected work/life balance, rota intensity and structure of training programme/teaching as reasons for leaving paediatrics.
- When asked whether they would recommend paediatrics to other doctors or medical students, all 15 respondents said that they would.
- Overall themes emerging from answers to several of the interview questions were collated. The most frequently mentioned theme was support, with interest in another specialty and rota intensity/staffing pressures also emerging as important issues.

Results

1. Leaver destinations

Table 1: Leaver destinations

	Count	
Paediatric related clinical training programme		4
Clinical genetics	2	
Paediatric cardiology	1	
Non-paediatric related clinical training programme		7
General practice	4	
Acute care – common stem ACCS	1	
Public health	2	
Obstetrics and gynaecology	1	
Working in medicine		1
Studying non medicine related		2
Studying medicine related		1
Total		**15**

Of the 15 respondents, 4 (26.7%) are in a paediatric related clinical training programme, 7 (46.7%) are in a non-paediatric related clinical training programme and 4 are not in a clinical training programme. The most common destination was GP training, with 4 leavers taking this route.

2. Length of time in training

Table 2: Stage of training when moved out

	Count
ST1	4
ST2	4
ST3	6
ST4	1
Total	**15**

Leavers most commonly moved out of training during ST3 (40%), however this finding may be skewed by the fact that they were contacted soon after completing ST3 and would have more recently had contact with the College.

Table 3: Time lapse between start date and leaving

Months	Count
0-12	2
13-24	4
25-36	9
Total	**15**
Average	**27 months**

Respondents spent on average 27 months in the paediatric training scheme before leaving.

Table 4: Time lapse between making the decision to leave and leaving

Months	Count
0-3	2
4-6	5
More than 6	6
Unknown	2
Total	**15**
Average	**6.8 months***

*Average of 13 respondents providing an answer to this question

The average time lapse between making the decision to leave and leaving was 6.8 month. Of the 13 that responded to this question, 6 (46.2%) took more than 6 months.

3. Reasons for leaving

Table 5: What prompted you to make the decision to leave at that particular time?

	Count
Attracted to another specialty	6
Didn't enjoy neonatology	3
Lack of training programme flexibility	2
Personal/family reasons	2
Rota intensity/staffing pressures	2
Poor work/life balance	1
Location of posts	1
Didn't enjoy paediatrics	1
Didn't pass	1
Resident shift working	1
Total	**20***

***Note that respondents could provide more than one answer

There was a wide spread of reasons given for leaving the paediatric training scheme, however the most common was attraction to another specialty. Other reasons that were mentioned more than once were not enjoying neonatology, a lack of training programme flexibility, personal or family reasons and rota intensity/staffing pressures.

Table 6: What interested you in your new specialty?

	Count
Better work/life balance	4
Broader experience/more variety	3
Holistic approach to patient treatment	2
General paediatrics too focused on primary care provision	2
Research	2
Less focus on service provision	1
Paediatric training interested me in that specialty	1
Supervision	1
Positive role models	1
More professional development opportunities	1
Total	**18***

*Note that respondents could provide more than one answer

Those now working in another specialty gave a wide range of reasons for being interested in that area of medicine. The most common reasons were a better work/life balance and broader experience/more variety.

Table 7: What are the reasons paediatrics may have deterred you?

	Count
Rota intensity/staffing pressures	3
Didn't enjoy neonatology	2
On call/clinical work	2
Service provision a priority	1
Lack of autonomy in decision making	1
Lack of support	1
Access to and quality of training	1
Poor flexible training culture	1
Primary care level work	1
Lack of research opportunities	1
Resident shift working	1
Total	**15**

Again, there was a wide range of reasons given in response to this question. The reasons given more than once were rota intensity/staffing pressures, not enjoying neonatology, and on call/clinical work.

Table 8: Which of the following matches closest to the reason you left paediatrics?

	Count*
Work/life balance	6
Rota intensity	4
Structure of training programme/teaching	4
Location of available posts	3
Family commitments	3
Did not intend to stay in paediatrics	2
Total	**22**

***Note that respondents could provide more than one answer

Respondents most commonly selected work/life balance, rota intensity and structure of training programme/teaching as reasons for leaving paediatrics.

Table 9: What are the reasons for you leaving medicine completely?

	Count
Training programme split	1
Not left completely	1
Poor relationship with colleagues	1
Medical problems	1
Suspended	1
Total	**5**

There were no common reasons for leaving given by those who have left medicine completely.

10. Desired training programme changes

Interviewees were asked if the College, their trust or their deanery could have done anything different which would have meant that they remained in paediatric training. Some responses applied to all three, and in some cases respondents were unsure as to where the responsibility would lie.

Table 10: Could the College have done anything different?

	Count
Mentoring scheme	2
Special interest posts	2
No	2
Stream without neonatology	2
Rota intensity/staffing improvements	2
Acting up opportunities/recognition of ability	1
Better flexible training culture	1
Training structure in Scotland	1
Run through training from start of programme	1
Promote research opportunities	1
Sessions with other trainees to talk about practice	1
Total	**16***

*Note that respondents could provide more than one answer

Table 11: Could the Trust have done anything different?

	Count
No	9
Better relationships within service delivery/welcoming nursing staff	2
Improve availability of locums	1
Quality of training variable	1
Total	**13**

Table 12: Could the Deanery have done anything different?

	Count of responses
No	5
Mentoring scheme	2
Career guidance	2
Better communication	1
Support for flexible trainees	1
More flexibility to pursue interests	1
Offer run through training	1
Ability to get to off ward learning	1
Total	**14**

11. Feelings about the training programme

Table 13: Do you have any regrets about leaving run-through training?

	Count
Yes	3
No	11
Not applicable	1
Total	**15**

When asked whether they would recommend paediatrics to other doctors or medical students, all 15 respondents said that they would.

12. Additional comments

Respondents were asked if they had any additional comments; the responses are summarised in Table 14.

Table 14: Additional comments

	Count
Good LTFT working option, more childcare friendly	2
More resident shift working in paediatrics – work/life balance issue	1
EWTD is one of the main perpetrators	1
Better reintegration into training after gap	1
Not enough group training in deanery	1
Currently service provision is a priority over professional development	1

13. Overall themes

Table 15 shows the key themes emerging from responses to several of the questions in the interview by frequency mentioned. The most frequently mentioned theme was support, with interest in another specialty and rota intensity/staffing pressures also emerging as important issues.

Table 15: Overall themes

	Count*
Support	10
Interest in another specialty	7
Rota intensity/staffing pressures	6
Work/life balance	5
Training programme flexibility	5
Research and professional development	5
Relationships with colleagues	3
Broader experience/more variety	3
Didn't enjoy paediatrics or neonates	2
Resident shift working	2
Personal/family reasons	2
Training structure	2
Service provision	2
Training quality/access	2
Holistic approach	2
Decision making autonomy/acting up opportunities	2
On call/clinical work	2
Passing exams	1
Location of posts	1

*Based on questions:

- What prompted you to make the decision to leave at that particular time?
- What interested you in that specialty?
- What are the reasons paediatrics may have deterred you?
- Is there anything the RCPCH could have done differently which would have meant you remained in paediatric run-through training?
- Is there anything your trust could have done differently which would have meant you remained in paediatric run-through training?
- Is there anything your deanery could have done differently which would have meant you remained in paediatric run-through training?

Conclusion

The questions used in the interviews have been adapted to create a survey sent to all other former trainees leaving paediatrics since 2008. This survey was run for the first time in March 2012 and is currently being analysed. The Education and Training Division intend to repeat this survey annually.