

# letter to the editor

## Trainee doctors' opinion of Modernising Medical Careers: a questionnaire survey in the London region

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Editor - Postgraduate Medical Training in the UK is currently undergoing the largest transition in more than a decade. 'Unfinished Business' highlighted major problems in Senior House Officer (SHO) training and led to the formulation of Modernising Medical Careers (MMC). In August 2007 SHO posts will cease to exist and all trainees in the old system will have to fight their way into a place within the MMC framework.

Despite its laudable aims MMC has resulted in anxiety, confusion and resentment amongst many SHOs who feel helpless and stranded between two systems. The last members of the 'lost tribe' now feel more lost than ever. This apprehension is not confined to SHOs, with many foundation trainees also expressing extreme dissatisfaction with the reforms being forced upon them.

My colleagues and I set out to establish the current opinions of trainees in London about these changes, and have attempted to

isolate the problems causing most concern. We conducted a survey principally addressing the allocation of training numbers, job security and research. Over 300 trainees were surveyed and included all levels of junior doctor in all specialities.

The results were emphatic. SHOs were almost unanimous in their disapproval of the changes. The vast majority (82%) felt they would now have less chance of securing a training number with 72% believing that priority would be given to foundation candidates to carry on into training posts.

Trainees in all grades felt less confident about long-term job security, especially current SHOs. However, the majority of Foundation Year 2 trainees felt MMC would improve working lives of doctors, but current SHOs appeared far more sceptical.

There is no clear consensus as to the impact of MMC on research.

Most trainees felt that research would suffer, with a substantial proportion of trainees being unsure. The majority of trainee doctors felt less likely to undertake a PhD/MD following MMC. This sentiment was broadly consistent across all grades of doctor.

Considerable efforts have been made to try and address fears, but change often elicits fear. It is the final members of the 'lost tribe' who now feel most unfairly hindered in the progression of their careers. It is essential that this group is kept informed and their fears addressed by those introducing the MMC changes.

Research by the BMA confirms that changes to training need to be put on hold for one year if the UK is to avoid a medical skills drain and with the current sentiment of the SHO cohort, this would certainly seem the most sensible option.

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doi: 10.1111/j.1365-2929.2006.02656.x