

Time to look more closely at attitudes to less than full time working?

It has been widely reported that increasing numbers of doctors are choosing to work on a less than full time basis, attracting both interest and criticism. This editorial provides an overview of current issues around less than full time working.

Introduction

The subject of less than full time working and training is gaining increasing interest within the medical community. Should less than full time training be available to all? Many trainees think so, as suggested by a recent report from the Royal College of Physicians of Edinburgh Trainees and Members Committee following their survey of all medical trainees in the UK (Royal College of Physicians of Edinburgh, 2019). The number of trainees and consultants working less than full time is rising year on year. The latest data from the annual census conducted on behalf of the three Royal Colleges of Physicians in the UK suggests that 15% of trainees are working less than full time, of which the majority are female (91%) (Royal College of Physicians et al, 2019). This equates to a quarter of all female trainees and 3% of all male trainees currently working less than full time. The proportion of less than full time consultants has also risen, going from 13% in 2007 to 23% in 2019 (Royal College of Physicians et al, 2019). Again, the majority of less than full time consultants are female but the number of male less than full time consultants is also rising rapidly, increasing from 4% in 2007 to 10% in 2019.

In the most recent workforce census produced by the physicians' Royal Colleges of London, Edinburgh and Glasgow (2019), 17% of speciality trainees expressed a wish to train less than full time and said that they felt being able to work less than full time would improve the quality of their training. This suggests that fewer trainees work less than full time than may wish to. The General Medical Council (2011) produced a position statement supporting less than full time training and stating that less than full time training should be of the same duration and quality as that of full time training. Postgraduate deans retain the right to arrange the patterns of less than full time working, but the General Medical Council (2011) requires that less than full time training should be completed at a minimum of 50% of whole time equivalent working, although this may occasionally be reduced to 20% in exceptional circumstances.

Despite these assurances from the General Medical Council regarding the availability and quality of less than full time training, 9 years on from this position statement less than full time trainees are reporting reduced training opportunities, negative attitudes from senior staff, increased costs and lack of awareness of how less than full time training works from both clinical and managerial staff (Royal College of Physicians of Edinburgh, 2019).

Perceptions of less than full time working

Not all of the medical community has welcomed increased levels of less than full time working. Some have been vocal in stating that this change in the workforce working patterns adds to the pressures on an already stretched NHS service, a view also held by some arms of the media (Newark, 2018). Patient groups have been quoted as describing the number of part-time GPs as 'terrifying', although it must be noted that media inaccuracies in the portrayal of part-time hours worked by GPs in reference to the standard working week of 37 hours may contribute to this public feeling, with many GPs working fewer than 5 days a week but actually working what would be classed as full time hours (Donnelly, 2018; Morris, 2018).

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Key points

- The number of doctors working and training less than full time is increasing year on year. In a recent workforce census 17% of full-time trainees expressed a wish to train less than full time.
- A growing body of evidence suggests that less than full time working and training may improve quality of life and reduce burnout, as well as improving retention rates – a key consideration when thousands of UK doctors are voting with their feet each year and leaving the profession.
- Despite these potential benefits and increased numbers, less than full time trainees report reduced training opportunities, negative attitudes from senior colleagues and a lack of awareness from clinical and non-clinical staff of how less than full time works.

Within the workplace, trainees report that senior medical colleagues frequently hold negative attitudes to less than full time training with references to less than full time trainees being viewed as less committed to their career than their full-time counterparts, less likely to be put forward for educational opportunities and more likely to encounter negative comments at work. Although the attitudes of educational supervisors and training programme directors have been rated slightly better, a quarter of trainees feel that they also display a negative attitude towards less than full time training (Royal College of Physicians of Edinburgh, 2019).

This is in contrast with the general opinions of trainees themselves, who report greater job satisfaction and work–life balance when allowed to train flexibly (Royal College of Physicians of Edinburgh, 2019). The Gold Guide to Postgraduate Speciality Training in the UK provides guidance on the reasons why an application to work less than full time must be considered by the relevant Health Education England body (Conference of Postgraduate Medical Deans of the United Kingdom, 2017). The main reason for choosing to work less than full time, at present, is to care for children, followed by disability or ill health (Royal College of Physicians et al, 2019). However, in the Royal College of Physicians of Edinburgh (2019) survey sent out to all medical specialty trainees, both full time and less than full time, over three quarters of respondents felt less than full time working should be open to all, regardless of reason.

Benefits of less than full time working

There is a growing body of evidence that allowing flexibility in working patterns reduces attrition from medical training programmes and helps to prevent burnout (General Medical Council, 2018). A pilot scheme in emergency medicine allowing trainees to work less than full time for any reason, not just those listed in the Gold Guide, found that trainees reported being more likely stay with emergency medicine when given more flexibility in their working patterns and that levels of reported exhaustion reduced (Health Education England, 2019).

Conclusions

Given that in 2017, 9000 doctors quit practising medicine entirely and 57.4% of foundation year 2 doctors opted for a career break rather than entering a further training programme, doctors are voting with their feet (UK Foundation Programme, 2018). Rather than being seen as the cause of a pressured NHS, maybe it is time to see offering flexibility during training as part of the solution to retain the medical workforce and to promote wellbeing. The rising numbers of doctors choosing less than full time working and the findings of the Royal College of Physicians of Edinburgh (2019) report support this view.

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References

- Conference of Postgraduate Medical Deans of the United Kingdom. The gold guide. 7th edn. 2017. <https://www.copmed.org.uk/gold-guide-7th-edition/the-gold-guide-7th-edition> (accessed 31 October 2019)
- Donnelly L. Average GP now works 3.5 days per week – and just one in 20 trainees plans to do the job full-time. The Telegraph. 2018. <https://www.telegraph.co.uk/news/2018/08/16/average-gp-now-works-35-days-week-just-one-20-trainees-plans/> (accessed 31 October 2019)
- General Medical Council. GMC position statement: conditions for less than full time training. 2011. https://www.gmc-uk.org/-/media/documents/less-than-full-time-training-position-statement-nov-17_pdf-72374278.pdf (accessed 31 October 2019)
- General Medical Council. The state of medical education and practice in the UK. 2018. London: General Medical Council.
- Health Education England. Interim evaluation of emergency medicine trainees LTFT pilot 2017-18. 2019. <https://www.hee.nhs.uk/sites/default/files/documents/Interim-Evaluation-of-EM-Trainees-LTFT-Pilot-2018-19.pdf> (accessed 31 October 2019)
- Morris I. We need to stop talking about GPs being “full time” or “part time”. BMJ Opinion. 2018. <https://blogs.bmj.com/bmj/2018/08/20/ian-morris-we-need-to-stop-talking-about-gps-being-full-time-or-part-time/> (accessed 31 October 2019)
- Newark T. Part-time doctors are stretching NHS to breaking point. The Express. 2018. <https://www.express.co.uk/comment/expresscomment/1005014/Tim-Newark-part-time-doctors-stretching-NHS-breaking-point> (accessed 31 October 2019)
- Royal College of Physicians, Royal College of Physicians of Edinburgh, Royal College of Physicians and Surgeons of Glasgow. Focus on physicians: Census of consultant physicians and higher specialty trainees 2018. 2019. <https://www.rcplondon.ac.uk/projects/outputs/focus-physicians-2018-19-census-uk-consultants-and-higher-specialty-trainees> (accessed 31 October 2019)
- Royal College of Physicians of Edinburgh. Less than full time training: the trainee perspective. 2019. https://www.rcpe.ac.uk/sites/default/files/ltft_report_final.pdf (accessed 31 October 2019)
- UK Foundation Programme Foundation programme career destination report 2017. 2018. <https://www.nhsemployers.org/your-workforce/plan/medical-workforce/foundation-programme-career-destination-report-2017> (accessed 21 January 2020)