UK Medical Careers Research Group, Oxford University

1988 cohort of UK Medical Graduates

Report of Third Survey, conducted in 2004

Report produced December 2006

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Introduction

Overview

This report describes the results of the third survey, undertaken in 2004, of the cohort of 3739 doctors who qualified from UK medical schools in 1988. The UK Medical Careers Research Group has surveyed these doctors previously in 1995 and 1999. At the time of this survey, 16 years after graduation, almost all responders had completed specialist training and were working in career posts.

This report provides summary results from the survey and does not seek to relate data from this cohort and survey to data obtained from other cohorts or previous surveys. We expect the report to be of interest to medical workforce planners and policymakers, medical educators, researchers and others with an interest in medical careers.

Unlike our other survey cohorts, the 1988 qualifiers were not studied from the PRHO year onwards. The first survey was conducted in 1995. The cohort members were defined using medical school graduation lists provided by the General Medical Council. Mailing for this third survey began in June 2004 and the bulk of responses were received over the following four months. After an initial mailing, up to three reminder mailings were sent to non-responders.

A copy of the questionnaire used may be obtained on request from UKMCRG. Note that career choices were grouped by us into mainstream specialties based on those initially defined in the Todd Report.

Cohort size and response to survey

The cohort comprises 3739 doctors (2048 men, 1691 women). A response rate of 67.4% (2521/3739) was achieved, with 64.0% (1311/2048) of men and 71.6% (1210/1691) of women replying. Excluding non-participants, those not registered and those known to be deceased, the response was 68.6% (2521/3675).

Demographics

2452 (97.3%) of the 2521 responders provided their date of birth. We thus calculated the responders' median age of 40.1 years at the time of the survey (men 40.3 years, women 39.9 years).

2489 (98.7%) responders told us about their domestic situation. Of these, 88.3% (men 89.5%, women 87.1%) were living with a spouse or partner, 7.3% (men 6.1%, women 8.5%) were single, and 4.4% were widowed, divorced or separated (men 4.3%, women 4.4%).

Of the 2459 (97.5%) who reported their number of children under 16 years of age, 18.2% stated none (men 17.7%, women 18.7%), 9.9% had one child, 39.8% had two, 25.1% had three, and 7.1% had more than three.

2480 (98.4%) told us whether they had dependent adults. 7.3% replied yes (men 5.3%, women 9.5%).

Employment in 2004

Current Post

2504 (99.3%) responders gave details about the post they held in September 2004 (Table 1). 82.1% of responders (81.6% of men, 82.7% of women) were working in medicine in the NHS, and 2.4% (2.5% of men, 2.2% of women) were working in medical posts in the UK University sector. Occupational groups for men and women were very similar, except that almost all doctors not in paid employment, both in the UK and abroad, were women.

Table 1. Occupation group of responders in September 2004

			S	ex	
			Male	Female	Total
	UK Medical, fully NHS funded	Count	1062	994	2056
		% within Sex	81.6%	82.7%	82.1%
	UK Medical Universities	Count	33	26	59
		% within Sex	2.5%	2.2%	2.4%
	HM Forces	Count	61	33	94
		% within Sex	4.7%	2.7%	3.8%
	UK Other Public Sector	Count	14	16	30
		% within Sex	1.1%	1.3%	1.2%
	UK Medical Private Sector	Count	27	22	49
		% within Sex	2.1%	1.8%	2.0%
	UK Non-Medical	Count	6	5	11
		% within Sex	.5%	.4%	.4%
	UK Not in Paid Employment	Count	4	40	44
		% within Sex	.3%	3.3%	1.8%
	Abroad Medical	Count	95	61	156
		% within Sex	7.3%	5.1%	6.2%
	Abroad Non-Medical	Count	0	1	1
		% within Sex	.0%	.1%	.0%
	Abroad Not in Paid	Count	0	4	4
	Employment	% within Sex	.0%	.3%	.2%
Γotal		Count	1302	1202	2504
		% within Sex	100.0%	100.0%	100.0%

Of the 2115 responders working in the NHS / UK Universities, all but one gave their mainstream specialty (Table 2). 43.3% were working in general practice (38.2% of men, 48.9% of women); 12.7% were working in medical specialties, 8.3% were working in surgical specialties other than general surgery, 8.1% in psychiatry and 8.1% in anaesthetics. The notable differences by sex involved more men working in the surgical specialties and more women working in general practice, psychiatry, paediatrics, clinical oncology, community medicine and public health medicine.

Table 2. Mainstream specialties of responders in NHS / UK Universities in September 2004

			S	ex	Total
			Male	Female	
	Medical Specs.	Count	154	115	269
		% within Sex	14.1%	11.3%	12.7%
	Paediatrics	Count	36	48	84
		% within Sex	3.3%	4.7%	4.0%
	Accident & Emergency	Count	19	21	40
		% within Sex	1.7%	2.1%	1.9%
	General surgery	Count	21	7	28
		% within Sex	1.9%	.7%	1.3%
	Other Surgical Specialty	Count	151	24	175
		% within Sex	13.8%	2.4%	8.3%
	Obstetrics & Gynaec.	Count	26	27	53
		% within Sex	2.4%	2.6%	2.5%
	Anaesthetics	Count	109	62	171
		% within Sex	10.0%	6.1%	8.1%
	Radiology	Count	35	24	59
		% within Sex	3.2%	2.4%	2.8%
	Clinical Oncology Count 8 2		21	29	
		% within Sex	.7%	2.1%	1.4%
	Pathology	Count	28	19	47
		% within Sex	2.6%	1.9%	2.2%
	Psychiatry	Count	67	105	172
		% within Sex	6.1%	10.3%	8.1%
	General Practice	Count	418	498	916
		% within Sex	38.2%	48.9%	43.3%
	Community Medicine	Count	3	24	27
		% within Sex	.3%	2.4%	1.3%
	Public Health Medicine	Count	9	16	25
		% within Sex	.8%	1.6%	1.2%
	Other Medical Spec.	Count	8	6	14
		% within Sex	.7%	.6%	.7%
	Two or more specialties	Count	3	2	5
	·	% within Sex	.3%	.2%	.2%
Total		Count	1095	1019	2114
		% within Sex	100.0%	100.0%	100.0%

99.7% (2108/2115) of those working in the NHS / UK Universities provided their grade (Table 3). 46.2% were working as hospital consultants and 36.4% as GP principals. Differences by sex were notable in both hospital and general practice. 92.5% of those working in hospital, and 88.7% of those working in general practice had reached a senior position.

Table 3. Grades of responders in the NHS / Universities in September 2004

		_	Se	x	Total
			Male	Female	
	Hosp. Consultant	Count	611	362	973
		% within Sex	56.0%	35.6%	46.2%
	Hosp. Medical Director	Count	2	3	5
		% within Sex	.2%	.3%	.2%
	NCCG	Count	10	59	69
		% within Sex	.9%	5.8%	3.3%
	Hosp. other	Count	23	62	85
		% within Sex	2.1%	6.1%	4.0%
	PH Specialist	Count	1	1	2
		% within Sex	.1%	.1%	.1%
	Community Health	Count	0	6	6
		% within Sex	.0%	.6%	.3%
	GP Principal	Count	384	384	768
		% within Sex	35.2%	37.8%	36.4%
	GP Locum	Count	10	16	26
		% within Sex	.9%	1.6%	1.2%
	GP, Salaried	Count	10	19	29
		% within Sex	.9%	1.9%	1.4%
	GP other	Count	4	72	76
		% within Sex	.4%	7.1%	3.6%
	Univ. Professor	Count	3	0	3
		% within Sex	.3%	.0%	.1%
	University other	Count	30	27	57
		% within Sex	2.7%	2.7%	2.7%
	Other	Count	3	6	9
		% within Sex	.3%	.6%	.4%
Total		Count	1091	1017	2108
		% within Sex	100.0%	100.0%	100.0%

Satisfaction with current job

To obtain a measure of job satisfaction, five statements were presented for evaluation, on a scale from strongly agree to strongly disagree. The statements were

I find enjoyment in my current post
I am doing interesting and challenging work
I feel dissatisfied in my current post
Most days I am enthusiastic about my work
I am often bored with my work

Scores of 1 to 5 were assigned to the responses, with scales reversed for the 1st, 2nd and 4th statements, and an overall job satisfaction score calculated (out of 25). For the 2521 responders, 2458 (97.5%) replied fully to this question. The grouped median job satisfaction score for both men and women was 20 indicating a high degree of job satisfaction.

The composite job satisfaction score on all five factors also showed no appreciable difference by sex (Table 4). Overall, 59.6% of responders reported a 'high' level (score of 20 to 25) of job satisfaction, and only 1.7% reported a 'low' level (score of 5 to 10), as shown in Table 4.

The same grouped median job satisfaction score applied to those working in UK NHS or UK Universities (of the 2115, 99.5% replied).

Table 4. Job satisfaction scores

		Sex				Total		
	Male	Male		Female		Col %		
	Count	Col %	Count	Col %				
Score 5 to 10	28	2.2%	14	1.2%	42	1.7%		
Score 11 to 19	501	38.7%	451	38.8%	952	38.7%		
Score 20 to 25	767	59.2%	697	60.0%	1464	59.6%		
Total	1296	100.0%	1162	100.0%	2458	100.0%		

Satisfaction with time left for family and leisure

The 2521 responders were asked to express, on a scale from 1 to 10, their level of satisfaction with the amount of time their work left them for family, social and recreational activities. 2448 (97.1%) replied. The grouped median score was only 5.5 (men 4.9, women 6.2), indicating only an average level of satisfaction. Only just over one quarter of responders reported a 'high' level (score 8 to 10) level of satisfaction (Table 5).

Table 5. Leisure satisfaction scores

		Sex	Total			
	Mal	Male		Female		Col %
	Count	Col %	Count	Col %		
Score 1 to 3	431	33.4%	237	20.4%	668	27.3%
Score 4 to 7	601	46.6%	540	46.6%	1141	46.6%
Score 8 to 10	257	19.9%	382	33.0%	639	26.1%
Total	1289	100.0%	1159	100.0%	2448	100.0%

Slightly lower grouped median leisure scores applied to those working in the NHS/UK Universities with 5.4 overall (men 4.7, women 6.2). The response rate for this group was 99.1% (2097/2115).

Working history in the NHS

When asked if they had worked continuously in NHS since qualifying as a doctor (excluding any continuous period of less than 3 months outside the NHS), 2433 (96.5%) responded. Of these, 59.5% (1447) replied yes. There was no appreciable difference by sex.

For the 986 who had taken periods working outside the NHS, 938 (95.1%) provided information about how long. The time spent working outside the NHS ranged between 1 year and 18 years, with a grouped median of 2.7 years (men 2.6 years, women 2.8 years).

Full-time and part-time working

Responders were asked if they had always worked full-time since qualifying. 2439 (96.7%) replied. Of these, 1533 (62.9%) said yes. There were marked differences between men and women (men 90.2% always having worked full time, women 32.6%).

For the 906 who had spent time working on a part-time basis, 875 (96.6%) provided information about how long. The time spent working part-time ranged between 1 year and 16 years, with a grouped median of 6.3 years (men 2.6 years, women 6.9 years).

55.3% of women and 5.1% of men said they worked part-time at the time of the survey (96.5% replied).

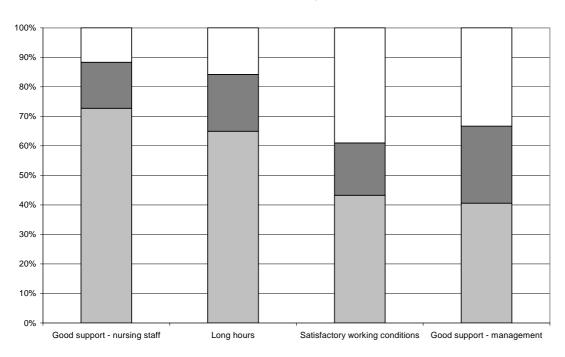
Views about working conditions and support

Responders were invited to respond to four attitude statements assessing their views on their working conditions and level of support received. Responses were received on a 5-point scale from *strongly agree* to *strongly disagree*. For ease of presentation, the categories *strongly agree* and *agree*, and *strongly disagree* and *disagree* have been combined. The attitude statements appear in full on page 3 of the questionnaire (Appendix 1). We report the results for the 2115 working in UK NHS and UK Universities. The response rates were 98.8%, 95.3%, 96.7% and 99.0% respectively.

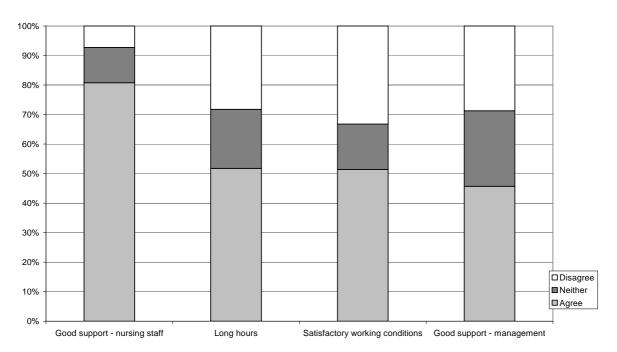
The men's and women's responses did not differ greatly (Figure 1). Considerably higher proportions of responders felt the nursing staff had been supportive (76.6% overall) compared to their views of management (43.0%). 58.6% felt that their working hours were excessive and 47.2% considered their working conditions (e.g. resources available, environment) to be satisfactory.

Figure 1. Responses to attitude statements on working conditions and support





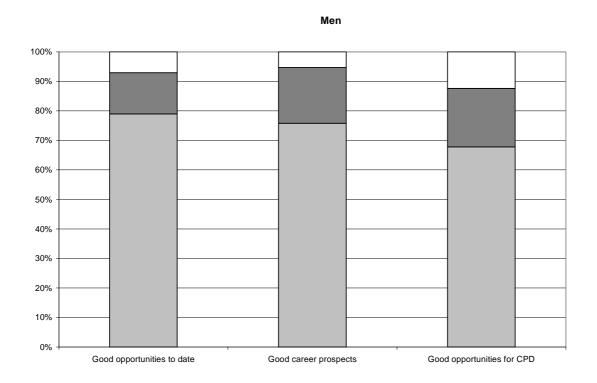
Women

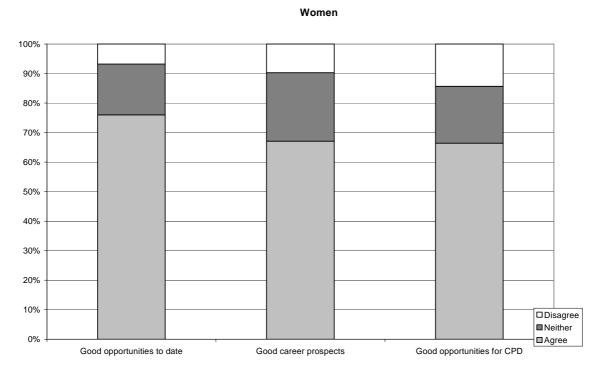


Views about career opportunities

Responses to three further attitude statements were obtained about the opportunities that had been presented to the doctors during their career. For the 2115 working in the UK NHS and UK Universities, the response rates were 99.0%, 98.4% and 99.1% respectively. As with the previous attitude statements, the response profiles did not differ greatly between men and women (Figure 2). The responders expressed a high level of agreement with all three statements.

Figure 2. Responses to attitude statements on career opportunities

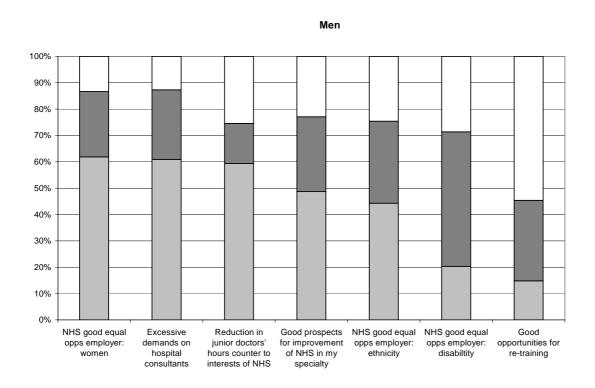


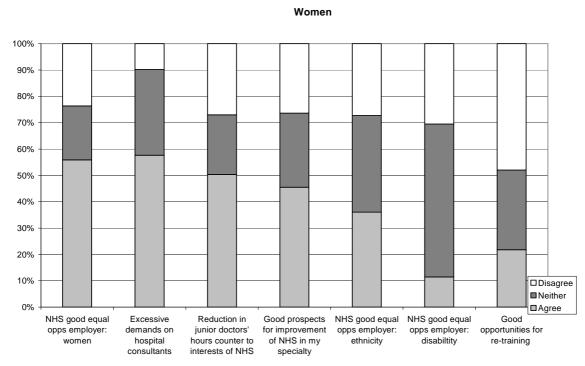


Views about the UK NHS

Responses to a further seven attitude statements were obtained about different aspects of the UK NHS. For the 2115 working in the UK NHS and UK Universities, the response rates were 77.3%, 90.5%, 87.2%, 93.9%, 79.5%, 95.7% and 91.7% respectively.

Figure 3. Responses to attitude statements on the NHS





There was a lower level of agreement to the statements among the women compared to men. For both men and women, over 50% agreed with the statement that the NHS was a good opportunities employer with respect to women. More men than women agreed (men 61.9%, women 55.9%) and more women disagreed (men 13.3%, women 23.6%). Two other statements to which over 50% agreed were: *Current organisation of postgraduate training within the NHS imposes excessive demands on hospital consultants* (men 60.9%, women 57.6%) and *The reduction in junior doctors' hours has been counter to the long-term interests of the NHS* (men 59.4%, women 50.4%). The greatest level of uncertainty was about whether or not the NHS was a good opportunity employer with regard to disability (51.0% of men and 58.0% of women neither agreed nor disagreed).

Future career plans

Intention to continue practising in the UK

2194 responders were working in UK medicine i.e. in the NHS, UK universities, other UK public sector or UK medical private sector. 2170 (98.9%) told us whether they intended to continue practising medicine in the UK for the foreseeable future. The majority of these (92.8%) replied that they would definitely or probably stay in the UK. There was no appreciable difference by sex. Of the 755 who reported that they did not <u>definitely</u> intend to practise in the UK, 46.5% stated that they would consider practising medicine abroad, 48.9% would consider leaving medicine but remaining in the UK, and 7.5% would consider leaving both medicine and the UK. Women doctors were less likely to consider practising medicine abroad and more likely to consider leaving medicine but remaining in the UK.

Intention to continue employment on same basis

Responders were asked if they would continue with their current employment on the same basis for the foreseeable future. The results for the 2115 working in the UK NHS and UK Universities are shown in Table 6. 2092 replied (98.9%). Of these, 78.1% indicated that they would definitely or probably continue with their current employment (81.5% men, 74.5% women).

Table 6: Continuing employment on same basis for foreseeable future

			Sex	(
			Male	Female	Total
	Yes-definitely	Count	469	350	819
		% within Sex	43.3%	34.7%	39.1%
	Yes-probably	Count	414	402	816
		% within Sex	38.2%	39.8%	39.0%
	Undecided	Count	78	79	157
		% within Sex	7.2%	7.8%	7.5%
	No-probably not	Count	67	98	165
		% within Sex	6.2%	9.7%	7.9%
	No-definitely not	Count	55	80	135
		% within Sex	5.1%	7.9%	6.5%
Total		Count	1083	1009	2092
		% within Sex	100.0%	100.0%	100.0%

1273 responders (60.9%) did not state a definite intention to continue with their current employment. They were then asked: (a) how they planned to change their employment; (b) how they intended to change their time commitments to different aspects of their jobs; and, (c) what were the factors motivating their planned changes. The response rates to these questions were 94.4%, 85.4% to 94.7%, and 95.4% respectively.

The most common way in which respondents planned to change their employment (Figure 4) was to reduce the number of hours worked (men 53.1%, women 42.5%). The second change most commonly reported involved their work setting e.g. hospital, region, country (men 39.9%, women 28.8%). Most responders (94.0%) indicated that they would make one or two changes. The most noticeable difference between men and women was that a greater proportion of women planned to increase their hours (men 2.3%, women 17.3%).

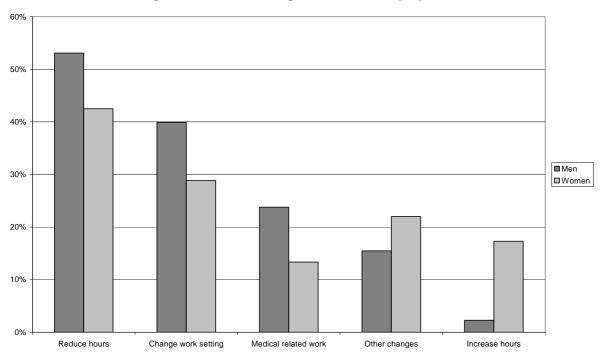
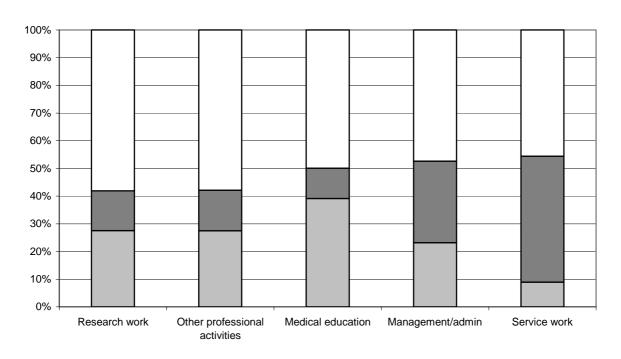


Figure 4. Planned changes to current employment

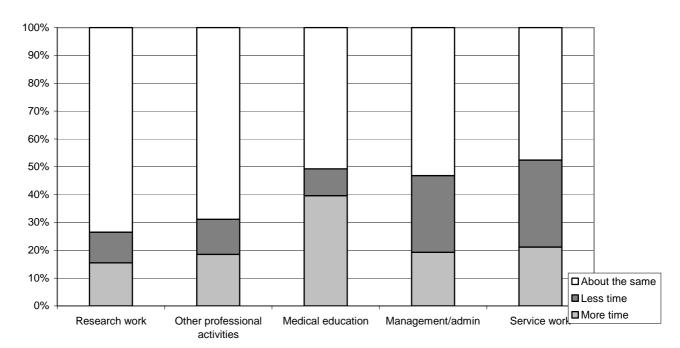
Figure 5 shows the planned changes in time commitments for the men and women working in the UK NHS and UK Universities. We show the percentages of respondents who stated that they intended to devote 'More time', 'Less time' or 'About the same' to different aspects of their work. The highest changes involved responders planning to devote more time to medical education (men 39.1%, women 39.6%), less time to service work (men 45.4%, women 31.3%) and less time to management/administration (men 29.4%, women 27.6%). The intention not to change the time commitment was highest for research work (men 58.1%, women 73.5%). Higher proportions of women, compared to men, stated that they would not change their time commitments.

Figure 5. Planned changes to time commitments

Men



Women



Professional aims and interests (e.g. career progression and job satisfaction) emerged as the most influential factor underlying responders' changes in their current employment (men 62.4%, women 57.6%) (Figure 6). A desire for a change, variety or a new challenge was also reported as being influential factor for many responders (men 49.0%, women 37.0%). The majority (87.0%) reported one or two motivating factors.

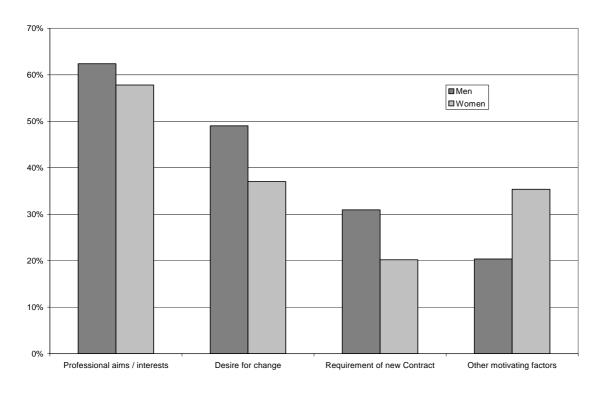


Figure 6. Motivators for planned changes

Careers advice

All 2521 responders were asked about the careers advice that they had given and received during the course of their careers.

Giving advice

When asked whether they gave careers advice, 2478 (98.3%) replied and of these, 1728 (69.7%) stated that they had given advice (77.3% men, 61.5% women). These responders were then asked if they had received specific training for this role and 1713 replied (99.1%) informing us that 16.9% (19.9% of men and 12.8% of women) had received specific training.

Receiving advice

2460 (97.6%) commented on the quality of the careers advice that they had received with 1220 (49.6%) saying that the advice had been helpful, and with greater proportions of men benefiting (55.2% of men and 43.4% of women). The 1220 responders were then asked to identity at what point of their career they had received the most effective career advice. Responses were received for one or more of the following career stages: 'Student, 'PRHO', 'SHO', Specialist trainee' and 'Senior doctor'. 1204 (98.7%) replied. The majority (90.4%) pinpointed one stage of their career (Figure 7).

Figure 7. Stage at which most effective careers advice was given

The SHO and registrar stages of training were highlighted as the most common times for effective careers advice for both men and women. 42.6% of men and 41.5% of women pinpointed the SHO stage and 45.8% of men and 42.7% of women highlighted the Specialist trainee stage.

Specialist trainee

The 1220 responders were asked to clarify who gave the most effective advice from one or more of the following categories: 'Senior doctor', 'Peer', 'Relative', 'Friend' and 'Independent advisor'. 1213 (99.4%) replied). The majority of responders (90.2% of men and 87.4% of women) indicated that a senior doctor provided the most effective careers advice (Figure 8). 92.3% highlighted a single category.

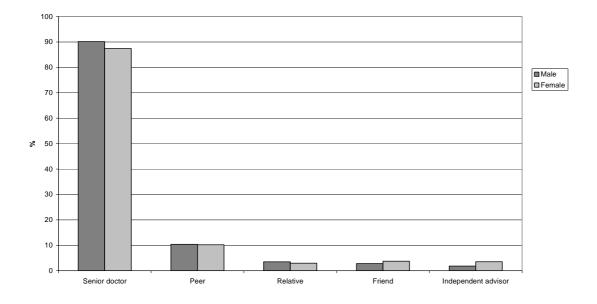


Figure 8. Sources of careers advice

Need for future advice

Finally, the 2521 responders were asked if they had any unmet needs, themselves, for advice on management of their future career or changes to their career. Of the 2313 who replied (91.7%), 25. reported that they had unmet needs (men 22.6%, women 28.0%).	the 2%





UK Medical Careers Research Group, University of Oxford

2004 Survey of the Career Preferences and Experiences of Doctors Qualifying in 1988 Please write as clearly as possible in the boxes. Please mark X in the box of your choice : OR print numbers: Your current employment 1a. Please give details of your current post. If you hold more than one post please answer with regard to the post you regard as your main Date started: (Month and year, entered as digits) Specialty: (Enter medical specialty/subspecialty; type of work (if non-medical); if not employed, enter travel / career break / domestic responsibilities / illness etc as appropriate) Grade: (If non-medical leave blank) Location: (County or city if in the UK, or the country if abroad) Employer and type of contract: (UK only: please mark with X all which apply to your current post) NHS-substantive **NHS-honorary** UK University-substantive **UK University-honorary** Retainer Scheme **UK Private Sector UK Public sector HM Forces** (not NHS/University) Are you working in this post as a locum? Yes No 1b. Additional posts and responsibilities. We recognise that as a senior doctor you may hold other posts besides the main post you have just described. It would be very helpful to us if you could provide, in the box below, brief details of any such posts you currently hold, with a time commitment of at least one session a week.

«ourref»	>
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1c.	c. In the post (or posts) described, is your work full-time? (count maximum part-time as full-time)							
	umey			Yes		No 🗌		
2.	How satisfied are you with your current employm (For each statement, please mark X in one box)	ent?						
	Strong agree	•	Neither agree nor disagree	Disagree	Strong disagr	•		
	I find enjoyment in my current employment.							
	I am doing interesting and challenging work.							
	I feel dissatisfied in my current employment.							
	Most days I am enthusiastic about my work.							
	I am often bored with my work.]		
3.	How satisfied are you with the amount of time your recreational activities? (Please mark X in the box not your opinion) 1 2 3 4 5 6 Not at all satisfied		mber which		ntely refi			
	Milestones in your career: Con	sultant or	GP princi	nal				
	Willestones in your career. Con	isuitant or	GF princi	μαι				
4.	. If you have attained either of these career milest the specialty where relevant) (Enter month and year		se give the	date first	reache	ed (and		
	First appointed as a							
	consultant: MM YYYY	Specialty:	: [
			<u> </u>					
	GP principal: / /							
5.	5. Since qualifying as a doctor, have you worked co (Excluding any continuous periods of less than 3 months of	_		? Yes		No*		
	*If No, approximately how many year	s have you	spent outs	ide the NH	IS?			
6.	5. Since qualifying as a doctor, have you always wo (If you have worked maximum part-time in the NHS, count		•) Yes		No*		
	*If No, approximately how many years	have you s	pent worki	ng part-tim	ne?			

«ourref»

Your previous posts							
7. Please give brief details of your last three	ee posts (most recent as post 1).						
<u>Post 1</u> M M Y Y Y Y	Post 2 M M Y Y Y Y	<u>Post 3</u> M M Y Y Y Y					
From (date):	/	/					
To (date):	/	/					
Specialty:							
Grade:							
Location:							
Mark X where applicable: Post 1	Post 2	Post 3					
NHS-substantive							
NHS-honorary							
UK University-substantive							
UK University-honorary							
HM Forces							
Retainer Scheme		Ц					
UK Public Sector							
Other UK Private Sector							
Full-time							
Locum appointment							
Your f	future career plans						
Part of our work aims to report on likely trends	s in the availability of doctors' time s	pent in medical practice.					
Answers to question 8 are requested only	from doctors practising medicine	e in the UK.					
8. Do you intend to continue practising (Mark X in one box)							
	Undecided No-probably not [No-definitely not					
If you did <u>not</u> answer 'Yes-definitely'	, are you considering						
		nedicine and aving the UK					

«	O	u	r	r	е	f	»	
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If you are considering one of these options, what is your main reason for doing so?
If you intend to practise medicine outside the UK, in which country or continent?
Anguara to guartian O are requested from all responders
Answers to question 9 are requested from all responders.
 Do you expect to continue with your current employment on the same basis for the foreseeable future? (Mark X)
es-definitely Yes-probably Undecided No-probably not No-definitely not
f you did not answer "Yes – definitely" to question 9, please answer questions 9a, 9b and 9c
f you did answer "Yes – definitely", please proceed to question 10
9a. In which of the following ways do you plan to change your employment?
Please mark X against all that apply. Increase total number of hours worked
Reduce total number of hours worked
Change of work setting e.g. work abroad, change hospital, move to different region
Change of work content e.g. medico-legal, writing, journalism
Other (please specify in box below)
9b. Do you plan to change your time commitment to each of the following areas? (For each area, please mark X in one box)
More Less About time time the
Management / health policy work / administration
Medical education / teaching
Research work
Research work
Other work, supporting professional activities
Other work, supporting professional activities Clinical duties / service work / treating patients 9c. What are the important motivators for your planned changes?
Other work, supporting professional activities Clinical duties / service work / treating patients 9c. What are the important motivators for your planned changes? Please mark X against all that apply.

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Other reason for planned changes (see Question 9c on previous page)

		Your views						
For each statement, p	please indicate your level	of agreement by marking X in or	ne box.					
For all statements	SA =Strongly agree D =Disagree	A =Agree SD =Strongly disagree		leither =No op	agree n oinion	or disa	gree	
10. Working cor	nditions and support							
In my current p		onger hours than I think I should	SA	A	N	D	SD	N/O
	I receive	good support from nursing staf	f 🔲					
Li	receive good support from	hospital / practice managemen	t 🔲					
My workin	g conditions (e.g. resource	es, environment) are satisfactory	′ 🔲					
11. Your career			SA	A	N	D	SD	N/O
I have	e had good professional o	pportunities in my career to date	•					
		My career prospects are good	i 🗌					
I have had g	ood opportunities for cont	inuing professional developmen	t 🔲					
12. The UK NHS	;		SA	•	N	ь.	en.	. N/O
Current org	anisation of postgraduate	training within the NHS imposes		A	N	D	SD	
		demands on hospital consultants						
The reduction	in junior doctors' hours ha	as been counter to the long-term interests of the NHS		Ш		Ш	Ш	ĻL
The NHS is a go	ood equal opportunities em	nployer for doctors with regard to ethnic minorities)					
The NHS is a go	ood equal opportunities em	nployer for doctors with regard to)					
The NHS is a go	ood equal opportunities em	womer oployer for doctors with regard to						
There are g	ood prospects for improve	disability ment of the NHS in my specialty						
Doctors have g	good opportunities for re-tr	aining and re-skilling in the NHS	;		П			

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	Career advice : giving and receiving
13.	Do you give career advice to junior doctors, formally or informally? (Mark X) Yes No
	If yes, have you had any specific training for this role? (Mark X) Yes No
14.	In the past, have you yourself received helpful career advice? (Mark X) Yes No
	If yes, at what point in your career did you receive the most effective career advice? (Mark X)
	Student PRHO SHO Specialist trainee Senior doctor
	Who gave you this advice? A doctor who was A doctor who Relative Independent advisor senior to me was a peer
15.	Do you have any unmet needs, yourself, for advice on future career Yes No Mark X)
	If yes, please give brief details
	Background information
16.	Marital status (Mark X) single living with spouse / partner widowed, divorced or separated
17.	How many children under 16 are normally resident in your household?
	If there are children, what are their ages in years?
40	(Enter 0 for 0-11 months)
18.	Are there any dependent adults (e.g. disabled, sick or elderly) whose Yes No needs could affect your ability to pursue your chosen career? (Mark X)

Additional Comments

Please give us comments on any aspect of your career or work, if you wish. We are also interested in any advice that you would give to aspiring medical students or young doctors. We summarise the views of respondents and report on them to policy-makers and in publications, in ways that ensure that individuals cannot be identified. Your individual comments will remain confidential to researchers in the UK Medical Careers Research Group. Use continuation sheets, if you wish. If you prefer, you may send your comments by e-mail to emma.avers@uhce.ox.ac.uk , adding your reference number (found at the top right hand of page).	

Thank you for your co-operation.

Please return this questionnaire to: UK Medical Careers Research Group,

Department of Public Health, University of Oxford, Old Road Campus, Headington, Oxford OX3 7BR.