

UK Medical Careers Research Group

1996 cohort of UK Medical Graduates

Report of Second Survey

August 2000

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Contents

Contents	2
Figures	3
Tables	3
Summary	4
Introduction	6
Methods	6
Response	6
Demographics	7
Age	7
Marital status	7
Children and adult dependants	7
Ethnicity	8
Current employment in 1999	8
Occupation group	8
Specialties	9
Grades	10
Full-time and part-time working in medicine	11
Career choices in 1999	11
Factors affecting career choices	15
Intentions to practice in the United Kingdom	19
Postgraduate qualifications	19
Views and attitudes	21
Working conditions and support, training and duties	21
The NHS and equality of opportunity	25
Career planning and future career	29
Job satisfaction	33
Job enjoyment and lifestyle	33
Questionnaire	36
Specialty mainstream groupings	48

Figures

1. Factors affecting career choice a great deal, a little, or not at all – Men
2. Factors affecting career choice a great deal, a little, or not at all – Women
3. Factors affecting career choice a great deal, a little, or not at all – All respondents
4. Working conditions and support, training and duties – Men
5. Working conditions and support, training and duties – Women
6. Working conditions and support, training and duties – All respondents
7. The NHS and equality of opportunity – Men
8. The NHS and equality of opportunity – Women
9. The NHS and equality of opportunity – All respondents
10. Career planning and future career – Men
11. Career planning and future career – Women
12. Career planning and future career – All respondents
13. Enjoyment of current position
14. Satisfaction with leisure time

Tables

1. Response rate
2. Marital status of respondents
3. Numbers of children of respondents
4. Ethnicity of respondents
5. Occupation group of respondents in September 1999
6. Mainstream specialties of respondents in the NHS and UK Universities in September 1999
7. Mainstream specialties of respondents in medicine abroad in September 1999
8. Grades of respondents in the NHS and UK Universities in September 1999
9. (a) Working patterns of respondents in the NHS in September 1999
(b) Working patterns of respondents in hospital specialties in the NHS in September 1999
(c) Working patterns of respondents in general practice in the NHS in September 1999
(d) Working patterns of respondents in UK Universities in September 1999
10. Firmness of career choice in 1999
11. (a) First choices of long-term career in 1999
(b) Second choices of long-term career in 1999
(c) Third choices of long-term career in 1999
12. Percentages of those choosing each mainstream as their first choice of long-term career, whose choice was definite, probable or not really certain in 1999
13. Intentions of respondents to practise medicine in the UK for the foreseeable future
14. Percentages of respondents considering different alternatives to UK medicine
15. (a) Postgraduate qualifications held – First part
(b) Postgraduate qualifications held – Second part

Summary

- The UK Medical Careers Research Group has surveyed doctors who qualified in the UK in 1996 twice – in 1997 and in 1999. This report describes the findings from the 1999 survey.
- Mailing began in July 1999. A response rate of 70.7% (2721/3849) was achieved.
- The doctors' median age was 27 years at the time of the survey, half were single and almost a half were living with a spouse or partner, 90% had no children, and a fifth were non-white.
- In September 1999, 90.7% of the respondents were working in the UK NHS / University sector. In all, 3.8% of respondents were not in paid employment either in the UK or abroad.
- In September 1999, 29.4% of respondents in the UK NHS / University sector were working in the hospital medical specialties and 18.8% in the surgical specialties (including general surgery). Only 5.8% were working in general practice at this stage. Differences by sex were most notable in the percentages working in surgery, paediatrics and obstetrics and gynaecology.
- Almost all respondents (97.6%) were working full-time in September 1999, although 18.9% (32% of women, 4% of men) expressed an intention to undertake part or all of their training part-time.
- In 1999, over 90% of NHS respondents were senior house officers, 5.7% were in GP registrar posts and 1% had begun specialist training.
- The respondents, three years after graduation, were reasonably sure of their long-term career choice, with 84.5% describing their career choice as a 'definite' or 'probable' choice (39.4% definite). There was little difference between men and women in the certainty of their choice.
- At this stage of SHO rotations there were substantially more choices for general practice than the numbers currently working in it, and substantially fewer choices for the hospital medical specialties than the numbers currently working in them. A higher percentage of those choosing general practice, the surgical specialties, obstetrics and gynaecology and anaesthetics were definite about their choice, compared with other specialties.
- Fifteen named factors which might affect career choice were each scored by the doctors for the degree to which they affected their choice. Four factors - enthusiasm and commitment, experience of jobs in training, hours or working conditions and self-appraisal - had the most effect on career choice; ease of obtaining a training post, financial factors and inability to secure qualifications had the least effect. Hours or working conditions and domestic circumstances were more significant for women than for men; otherwise, the results for men and women were very similar.
- A large majority (79%) of respondents definitely or probably intended to practise medicine in the UK for the foreseeable future. There was no appreciable difference by sex.
- Twelve statements on aspects of respondents' work and training were scored with *strongly agree*, *agree*, *neither agree nor disagree*, *disagree*, *strongly disagree*, or *no opinion*. Almost two-thirds of respondents felt they worked excessive hours and half were dissatisfied with the working conditions in their current post. 57% felt they had to perform an excessive amount of routine work, and only 16.5% thought that cover for absent doctors was satisfactory. Whilst over two-thirds said they received good support from senior doctors and nursing staff, only 16% held the same view of management. Almost a quarter of respondents felt under too much pressure at work and a over a fifth said they were required to perform tasks for which they were not adequately trained; half were happy with arrangements for their annual leave.

- Respondents working in the NHS scored eight statements about the NHS and equality of opportunity in the same way. Only 16.5% felt fairly treated by the NHS, fewer than half felt they were fairly remunerated for their basic contracted hours, and the great majority (91%) disagreed that they were fairly remunerated for their additional duty hours. Over half (women 59%, men 41.9%) felt that there were few opportunities for flexible or part time postgraduate training. Over half thought the NHS was a good equal opportunities employer with regard to women and over 40% with regard to ethnicity, but most rated it as poor with regard to disability.
- Seven statements about career planning and future career were scored in the same way as above. Over half of respondents were satisfied with their future career prospects. Over half considered information on the availability of Specialist Registrar posts to be scarce, whilst less than a fifth felt this way about GP Registrar posts. Women in particular believed general practice to be more attractive than hospital practice at present, whilst men in particular stated that their experience of hospital work had made it more likely that they would pursue a hospital career. Over a third concluded that their exposure to general practice had been insufficient to assess it as a career option.
- Job enjoyment and job satisfaction were rated more highly than the level of satisfaction felt by respondents with the amount of time their work left them for family, social and leisure activities.

Introduction

This report describes the results of the second survey of the cohort of 3868 doctors who qualified from UK medical schools in 1996. The first baseline survey of the 1996 qualifiers was carried out during the PRHO year in 1997. The second survey finds the cohort members in their third postgraduate year. Most are in senior house officer posts; a small percentage has begun GP training. The first mailing for this survey was completed in July 1999, and late replies were received up to July 2000.

This report describes the main results from the second survey, focusing on the current employment, career choices and demographics of the respondents. It also contains some information about their views and attitudes and future intentions. It is not intended as an analytical report and does not seek to relate data from this cohort with that obtained from other cohorts.

We expect this report to be of interest to medical workforce planners and policymakers, and researchers and others with an interest in medical careers.

Methods

The study population comprised all doctors who qualified in medicine in the UK in 1996. Subjects were originally identified in early 1997 using medical school graduation lists provided by the General Medical Council (GMC). Both graduates in the summer of 1996 and the smaller numbers who qualified in the spring of 1997 were included, to ensure that the cohort comprised a complete year of medical school intake.

For this survey we mailed the entire cohort of qualifiers, whether or not they had replied to our earlier survey. Only the small numbers who qualified in 1996 but had never registered with the GMC, or were known to be deceased, or who had indicated in the previous survey that they wished to remain non-participants were excluded. After an initial mailing, up to three reminder mailings were sent to non-responders.

The questionnaire used is reproduced at the end of this report. Career choices and posts undertaken were grouped into mainstream specialties based on those initially defined in the Todd Report. A complete list of specialties included in each broad group is reproduced as an appendix.

Response

Table 1 shows the final response. Excluding those deceased and non-participants the response rate was 70.7% (2721/3849). Among women it was 77.8% (1454/1869) and among men it was 64.0% (1267/1980).

Table 1: Response rate

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
No reply	713	35.8	415	22.1	1128	29.2
Replied	1267	63.5	1454	77.6	2721	70.3
Deceased	5	.3	1	.1	6	.2
Not participating	9	.5	4	.2	13	.3
Total	1994	100.0	1874	100.0	3868	100.0

Demographics

Age

The 2684 respondents whose date of birth was known had a median age of 27 years at the end of September 1999. 74.2% were aged 27 or less (36.8% age 27, 34.2% age 26, 2.2% age 25) and 95.3% were 31 or less. The oldest respondent was aged 59 years; the next oldest was 46 years old.

Marital status

Half of the respondents were single, and 45.5% were living with a spouse or partner (Table 2). These proportions did not differ significantly for men and women.

Table 2: Marital status of respondents

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Living with spouse/partner	549	43.3	690	47.5	1239	45.5
Single	657	51.9	704	48.4	1361	50.0
Widowed/Divorced/Separated	7	.6	10	.7	17	.6
Blank	54	4.3	50	3.4	104	3.8
Total	1267	100.0	1454	100.0	2721	100.0

Children and adult dependants

89% of respondents did not have children; the percentage was similar for men and women (Table 3).

Table 3: Numbers of children of respondents

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
0	1112	87.8	1320	90.8	2432	89.4
1	69	5.4	64	4.4	133	4.9
2	23	1.8	15	1.0	38	1.4
3	5	.4	1	.1	6	.2
5	1	.1			1	.0
7	1	.1			1	.0
Not given	56	4.4	54	3.7	110	4.0
Total	1267	100.0	1454	100.0	2721	100.0

Of the 179 respondents with children, 128 had a youngest child under two years of age, and 157 had a youngest child who was pre-school (i.e. under 5 years of age).

Respondents were asked if they had adult dependants who might affect their ability to pursue their chosen career; 34 did so (1.3% of respondents).

Ethnicity

Concerns that an ethnicity question might have a low completion rate were not realised; the 1.3% non-response is lower than for the question about marital status. Non-white respondents comprised 20%, with Indians being the largest component, followed by Asian - Other, and Chinese (Table 4). 127 (4.7%) respondents were overseas students.

Table 4: Ethnicity of respondents

	Count	Col %
White	2178	80.0
Indian	186	6.8
Pakistani	66	2.4
Bangladeshi	19	.7
Chinese	81	3.0
Asian - other	84	3.1
Black Caribbean	6	.2
Black African	17	.6
Black - other	7	.3
Other	42	1.5
Blank	35	1.3
Total	2721	100.0

Current employment in 1999

Occupation group

Table 5 gives a breakdown of the main posts held by respondents at the end of September 1999, three years after qualification. As in previous surveys the posts have been summarised in occupation groups whose descriptions should be largely self-explanatory. The distinction between UK University and NHS posts has been made on the basis of the grade of the post as described to us by the respondents. Posts described in academic terms have been assigned to the 'UK Medical Universities' group. However these posts may carry honorary contracts and involve NHS service work.

Respondents who did not give details of their employment in September 1999 have been excluded from the table.

Overall 90.7% of respondents (90.5% of men, 90.9% of women) were working in the NHS/University sector. Occupation groups for men and women were very similar.

Table 5: Occupation group of respondents in September 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
UK Medical, fully NHS funded	1091	89.2	1279	90.3	2370	89.8
UK Medical Universities	16	1.3	9	.6	25	.9
HM Forces	23	1.9	14	1.0	37	1.4
UK Medical Private Sector	6	.5	4	.3	10	.4
UK Non-Medical	6	.5	6	.4	12	.5
UK Not in Paid Employment	31	2.5	46	3.2	77	2.9
Abroad Medical	41	3.4	44	3.1	85	3.2
Abroad Non-Medical			1	.1	1	.0
Abroad Not in Paid Employment	9	.7	14	1.0	23	.9
Total	1223	100.0	1417	100.0	2640	100.0

Specialties

Three years after qualification a large majority of doctors are working in SHO posts. Table 6 shows the breakdown by mainstream specialty grouping of the respondents who were working in the NHS/University sector in September 1999. The largest percentage (29.4%) was working in the hospital medical specialties, followed by the surgical specialties including general surgery (18.8%), paediatrics (11.5%) and psychiatry (8.1%), obstetrics and gynaecology and anaesthetics (each 8.0%). Differences by sex were most notable in the percentages working in surgery, paediatrics and obstetrics and gynaecology.

Table 6: Mainstream specialties of respondents in the NHS and UK Universities in September 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specialties	321	29.0	382	29.7	703	29.4
Paediatrics	77	7.0	199	15.5	276	11.5
Accident & Emergency	61	5.5	64	5.0	125	5.2
General surgery	87	7.9	39	3.0	126	5.3
Other Surgical Specialty	217	19.6	106	8.2	323	13.5
Obstetrics & Gynaecology	62	5.6	130	10.1	192	8.0
Anaesthetics	106	9.6	86	6.7	192	8.0
Radiology	2	.2			2	.1
Clinical Oncology	10	.9	23	1.8	33	1.4
Pathology	19	1.7	27	2.1	46	1.9
Psychiatry	82	7.4	112	8.7	194	8.1
General Practice	45	4.1	93	7.2	138	5.8
Community Medicine	3	.3	17	1.3	20	.8
Public Health Medicine	6	.5	1	.1	7	.3
Other Medical Specialty	5	.5	4	.3	9	.4
Two or more specialties	4	.4	5	.4	9	.4
Total	1107	100.0	1288	100.0	2395	100.0

Table 7 shows the same breakdown by mainstream specialty for the 85 doctors working abroad. In comparison with respondents working in the UK, a greater percentage was working in the hospital medical specialties and a smaller percentage was in surgical posts.

Table 7: Mainstream specialties of respondents in medicine abroad in September 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specialties	16	39	16	36	32	38
Paediatrics	3	7	7	16	10	12
Accident & Emergency	7	17	4	9	11	13
General surgery	1	2	1	2	2	2
Other Surgical Specialty	3	7	2	5	5	6
Obstetrics & Gynaecology	1	2	4	9	5	6
Anaesthetics	4	10	2	5	6	7
Radiology	1	2			1	1
Clinical Oncology			1	2	1	1
Pathology	1	2	1	2	2	2
Psychiatry	3	7	1	2	4	5
General Practice			4	9	4	5
Two or more specialties	1	2	1	2	2	2
Total	41	100	44	100	85	100

Grades

Table 8 shows the breakdown by grade of those respondents who were working in the NHS/University sector in September 1999.

The vast majority of respondents (90.6% of the total) were senior house officers; registrars in general practice comprised 5.7% at this stage in time. Only a few had begun their specialist registrar training (1%).

Table 8: Grades of respondents in the NHS and UK Universities in September 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Staff Grade	3	.3	2	.2	5	.2
Specialist Registrar	14	1.3	9	.7	23	1.0
SHO	1009	91.6	1153	89.8	2162	90.6
Clinical Assistant	1	.1	2	.2	3	.1
Other Hospital Grades	5	.5	2	.2	7	.3
Public Health Medicine (All Grades)	5	.5	1	.1	6	.3
Community Health (All Grades)	3	.3	14	1.1	17	.7
Research Fellow	9	.8	7	.5	16	.7
Other Academic Grades	2	.2	1	.1	3	.1
GP Registrar	45	4.1	91	7.1	136	5.7
Other Grades / Unspecified	5	.5	2	.2	7	.3
Total	1101	100.0	1284	100.0	2385	100.0

Full-time and part-time working in medicine

Tables 9a – 9d show the percentage of respondents working full-time and part-time in their main post in September 1999, for all NHS, NHS hospital, NHS general practice, and UK University posts respectively. Most were in full-time posts at this stage in their career. 514 (18.9%) expressed their intention to undertake part or all of their training on a part-time basis. Most of these were women, of whom those intending to follow part-time training represented 32%.

Table 9a: Working patterns of respondents in the NHS in September 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Whole-time	1071	98.2	1239	97.1	2310	97.6
Part-time/flexible	20	1.8	37	2.9	57	2.4
Total	1091	100.0	1276	100.0	2367	100.0

Table 9b: Working patterns of respondents in hospital specialties in the NHS in September 1999

	Sex				Total	
	Male		Female		Count	Col %
	Count	Col %	Count	Col %		
Whole-time	1017	98.1	1137	97.4	2154	97.7
Part-time/flexible	20	1.9	30	2.6	50	2.3
Total	1037	100.0	1167	100.0	2204	100.0

Table 9c: Working patterns of respondents in general practice in the NHS in September 1999

	Sex				Total	
	Male		Female		Count	Col %
	Count	Col %	Count	Col %		
Whole-time	45	100.0	87	95.6	132	97.1
Part-time/flexible			4	4.4	4	2.9
Total	45	100.0	91	100.0	136	100.0

Table 9d: Working patterns of respondents in UK universities in September 1999

	Sex				Total	
	Male		Female		Count	Col %
	Count	Col %	Count	Col %		
Whole-time	16	100.0	9	100.0	25	100.0
Total	16	100.0	9	100.0	25	100.0

Career choices in 1999

These respondents, three years after graduation, were reasonably sure of their long-term career choice, with 84.5% describing their career choice as a ‘definite’ or ‘probable’ choice (Table 10).

Table 10: Firmness of career choice in 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Definitely	525	41.4	547	37.6	1072	39.4
Probably	551	43.5	675	46.4	1226	45.1
Not really	131	10.3	183	12.6	314	11.5
Not given	60	4.7	49	3.4	109	4.0
Total	1267	100.0	1454	100.0	2721	100.0

Tables 11a - 11c show the first, second and third choices of career expressed by the respondents, with choices grouped into mainstream specialties. 44% of respondents expressed only a first choice. During this period of SHO rotations it is perhaps not surprising to find that there were substantially more choices for general practice than the numbers currently working in that specialty, and considerably fewer choices for the hospital medical specialties than the numbers currently working in those specialties (Tables 6 and 7).

Table 11a: First choices of long-term career in 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specialties	227	18.8	238	16.9	465	17.8
Paediatrics	49	4.1	124	8.8	173	6.6
Accident & Emergency	50	4.1	62	4.4	112	4.3
General surgery	62	5.1	33	2.3	95	3.6
Other Surgical Specialty	245	20.3	84	6.0	329	12.6
Obstetrics & Gynaecology	13	1.1	64	4.5	77	2.9
Anaesthetics	117	9.7	96	6.8	213	8.2
Radiology	34	2.8	26	1.8	60	2.3
Clinical Oncology	13	1.1	21	1.5	34	1.3
Pathology	29	2.4	34	2.4	63	2.4
Psychiatry	65	5.4	63	4.5	128	4.9
General Practice	253	21.0	504	35.8	757	29.0
Community Medicine	2	.2	13	.9	15	.6
Public Health Medicine	10	.8	9	.6	19	.7
Other Medical Specialty	20	1.7	19	1.4	39	1.5
Specialty not stated	0	.0	2	.1	2	.1
Non-Medical	17	1.4	14	1.0	31	1.2
Not in Paid Employment	0	.0	1	.1	1	.0
Total	1206	100.0	1407	100.0	2613	100.0

Table 11b: Second choices of long-term career in 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specialties	175	25.3	195	27.0	370	26.2
Paediatrics	18	2.6	40	5.5	58	4.1
Accident & Emergency	54	7.8	71	9.8	125	8.9
General surgery	44	6.4	13	1.8	57	4.0
Other Surgical Specialty	116	16.8	43	6.0	159	11.3
Obstetrics & Gynaecology	3	.4	10	1.4	13	.9
Anaesthetics	50	7.2	32	4.4	82	5.8
Radiology	14	2.0	8	1.1	22	1.6
Clinical Oncology	5	.7	19	2.6	24	1.7
Pathology	19	2.7	21	2.9	40	2.8
Psychiatry	30	4.3	31	4.3	61	4.3
General Practice	105	15.2	133	18.4	238	16.9
Community Medicine	7	1.0	34	4.7	41	2.9
Public Health Medicine	10	1.4	9	1.2	19	1.3
Other Medical Specialty	20	2.9	32	4.4	52	3.7
Non-Medical	20	2.9	30	4.2	50	3.5
Not in Paid Employment	1	.1	0	.0	1	.1
Total	691	100.0	721	100.0	1412	100.0

Table 11c: Third choices of long-term career in 1999

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Medical Specialties	64	17.8	67	20.6	131	19.1
Paediatrics	10	2.8	14	4.3	24	3.5
Accident & Emergency	26	7.2	18	5.5	44	6.4
General surgery	17	4.7	6	1.8	23	3.4
Other Surgical Specialty	46	12.8	16	4.9	62	9.1
Obstetrics & Gynaecology	6	1.7	2	.6	8	1.2
Anaesthetics	25	7.0	24	7.4	49	7.2
Radiology	11	3.1	8	2.5	19	2.8
Clinical Oncology	8	2.2	4	1.2	12	1.8
Pathology	9	2.5	9	2.8	18	2.6
Psychiatry	15	4.2	10	3.1	25	3.6
General Practice	55	15.3	71	21.8	126	18.4
Community Medicine	0	.0	4	1.2	4	.6
Public Health Medicine	2	.6	8	2.5	10	1.5
Other Medical Specialty	20	5.6	21	6.4	41	6.0
Non-Medical	45	12.5	42	12.9	87	12.7
Not in Paid Employment	0	.0	2	.6	2	.3
Total	359	100.0	326	100.0	685	100.0

Table 12 shows the percentages of those choosing each mainstream specialty who were expressing a definite, probable or uncertain choice. There was considerable variation by specialty.

Table 12: Percentages of those choosing each mainstream as their first choice of long-term career, whose choice was definite, probable or not really certain in 1999

	Definitely	Probably	Not really	N (100%)
Medical Specialties	21%	54%	25%	464
Paediatrics	40%	47%	13%	173
Accident & Emergency	30%	53%	17%	112
General surgery	35%	50%	15%	94
Other Surgical Specialty	51%	45%	3%	328
Obstetrics & Gynaecology	48%	44%	8%	75
Anaesthetics	46%	49%	5%	212
Radiology	37%	38%	25%	60
Clinical Oncology	24%	68%	9%	34
Pathology	37%	52%	11%	63
Psychiatry	42%	52%	6%	127
General Practice	54%	41%	4%	752
Community Medicine	7%	87%	7%	15
Public Health Medicine	37%	47%	16%	19
Other Medical Specialty	10%	38%	51%	39
Specialty not stated	50%	0%	50%	2
Non-Medical	24%	28%	48%	29
Not in Paid Employment	0%	100%	0%	1
Total	41%	47%	12%	2599

Factors affecting career choices

Figures 1 to 3 summarise the degree to which each of 13 factors affected the career choice of respondents. Overall, enthusiasm and commitment, experience of jobs in training, hours or working conditions and self-appraisal had the most effect on career choices, and ease of obtaining a training post, financial factors and inability to secure qualifications had the least (see Figure 3). Hours or working conditions and domestic circumstances were more significant for women than for men; otherwise, the results for men and women were very similar.

Figure 1: Factors affecting career choice a great deal, a little, or not at all - Men

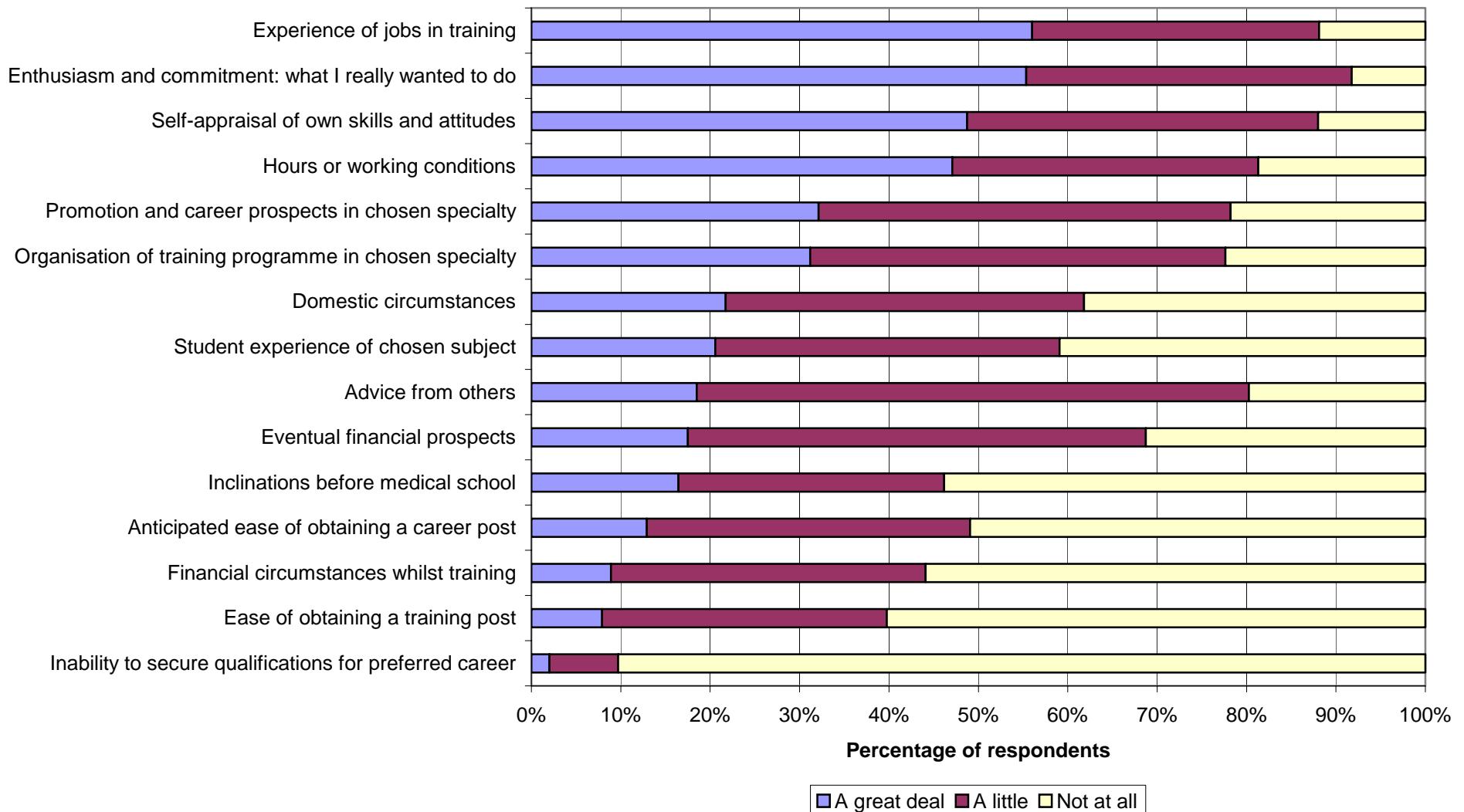


Figure 2: Factors affecting career choice a great deal, a little, or not at all - Women

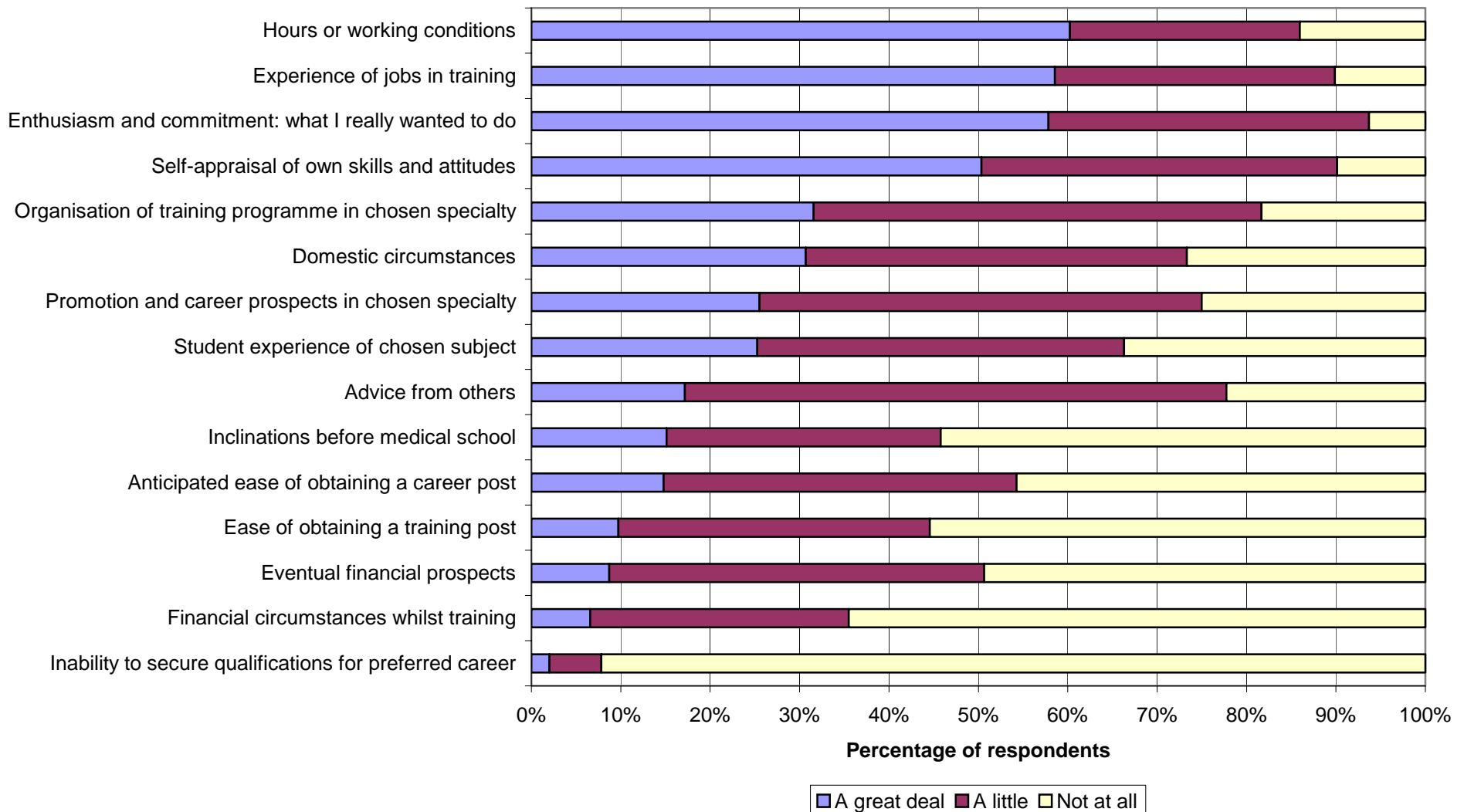
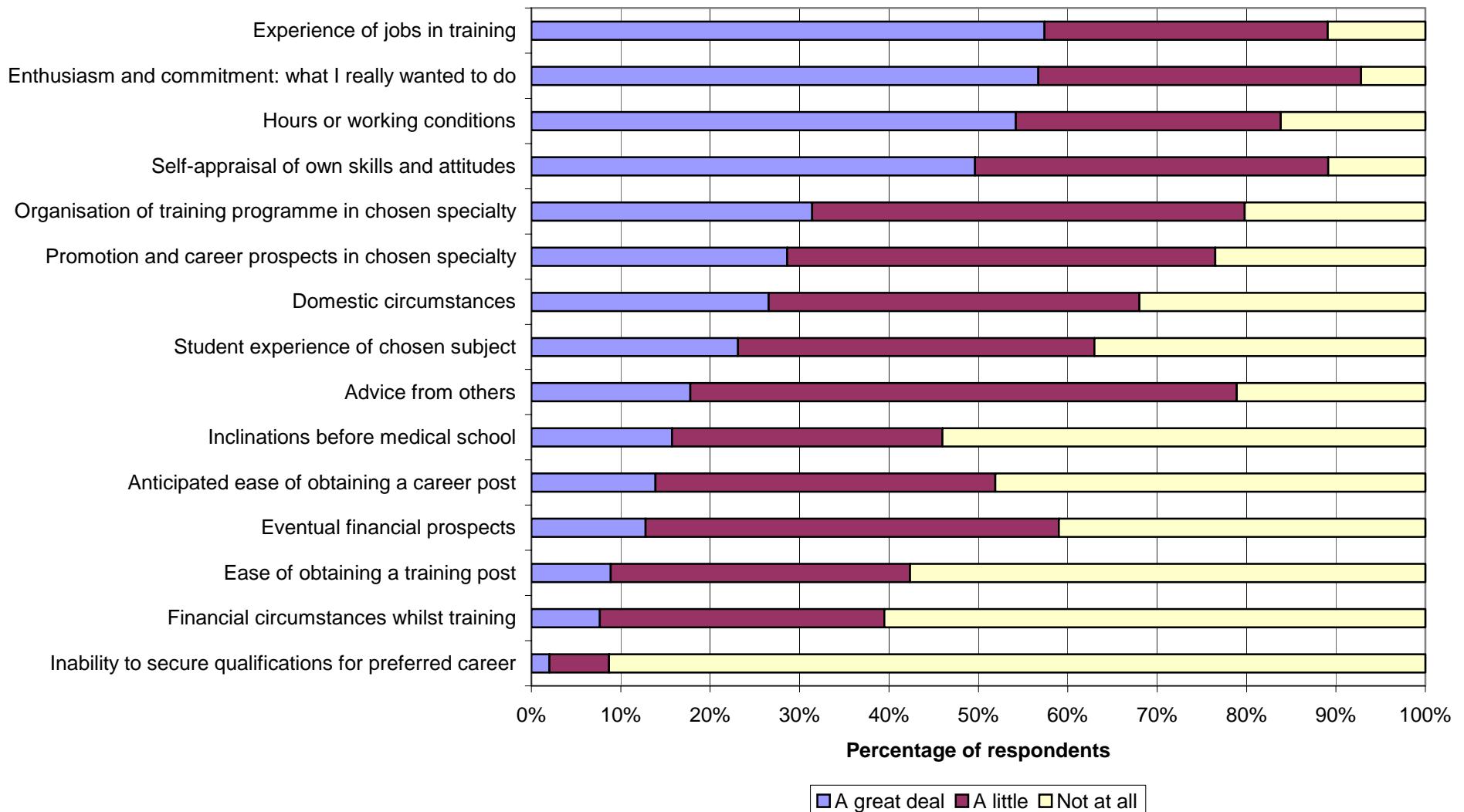


Figure 3: Factors affecting career choice a great deal, a little, or not at all - All respondents



Intentions to practice in the United Kingdom

A large majority (79%) of respondents definitely or probably intended to practise medicine in the UK for the foreseeable future (Table 13); 10.3% were undecided and 6.7% definitely or probably did not intend to do so. There was no appreciable difference by sex.

Table 13: Intentions of respondents to practise medicine in the UK for the foreseeable future

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Yes-definitely	533	42.1	674	46.4	1207	44.4
Yes-probably	445	35.1	496	34.1	941	34.6
Undecided	135	10.7	146	10.0	281	10.3
No-probably not	71	5.6	67	4.6	138	5.1
No-definitely not	22	1.7	21	1.4	43	1.6
Blank	61	4.8	50	3.4	111	4.1
Total	1267	100.0	1454	100.0	2721	100.0

Table 14 shows the alternative intentions expressed by those who did not definitely intend to practise in the UK. The three categories in Table 14 were not mutually exclusive. 40.9% of respondents would consider practising medicine abroad, 11.2% leaving medicine but remaining in the UK, and 3.6% leaving medicine and the UK.

Table 14: Percentages of respondents considering different alternatives to UK medicine

	Male		Female		Total	
	Count	Col %	Count	Col %	Count	Col %
Practising medicine abroad	533	42.2%	579	39.9%	1112	40.9%
Leaving medicine, remaining in UK	149	11.7%	154	10.6%	303	11.2%
Leaving medicine & UK	51	4.0%	48	3.3%	99	3.6%
Total	1264	100.0%	1452	100.0%	2716	100.0%

Postgraduate qualifications

Respondents were asked to list their postgraduate qualifications. Tables 15a and 15b show the number of respondents holding each qualification mentioned.

Table 15a : Postgraduate qualifications held - First part

Advanced Cardiac Life Support	74
Advanced Life Support	163
Advanced Paediatric Life Support	22
Advanced Trauma Life Support	135
Associate Fellow of the Royal College of Surgeons	5
Bachelor of Arts, Bachelor of Science, Master of Arts	36
Battlefield Advanced Trauma Life Support	2
Child Health Surveillance	2
Diploma in Aviation Medicine	2
Diploma in Child & Community Health	1
Diploma in Child Health	61
Diploma in Geriatric Medicine	12
Diploma in Immediate Medical Care, RCS Edinburgh	1
Diploma in Mental Health	4
Diploma in Therapeutics	1
Diploma in Tropical Medicine and Hygiene	12
Diploma of the Royal College of Obstetricians & Gynaecologists	181
Doctor of Philosophy	2
Drug & Hyperbaric Medicine	1
Education Council for Foreign Medical Graduates	2
Family Planning Association Training Cert., Diploma in Family Planning	18
Family Planning Diploma	75
Family Planning qualification	2
Federal Licensing Examination	1
Fellow in Dental Surgery (Final)	5
Fellow in Dental Surgery (Primary)	1
Fellow of the Faculty of Anaesthetists, Royal College of Surgeons (Primary)	1
Fellow of the Royal College of Anaesthetists (Part 1)	18
Fellow of the Royal College of Ophthalmologists	1
Fellow of the Royal College of Surgeons Dublin Part A	2
Fellow of the Royal College of Surgeons Edinburgh (no subject given)	1
Fellow of the Royal College of Surgeons Edinburgh Oral/ Maxillofacial Surg.	3
Fellow of the Royal College of Surgeons Edinburgh Pt 2	1
Fellow of the Royal College of Surgeons England no subject given	13
Fellow of the Royal College of Surgeons London Part 1	5
Licentiate of the Faculty of Homeopathy	1
Master of Medicine (Anaesthetics)	1
Master of Science	5
Member of the Royal College of General Practitioners	1
Total	874

Table 15b : Postgraduate qualifications held - Second part

Member of the Royal College of Obstetricians & Gynaecologists (Pt 1)	68
Member of the Royal College of Obstetricians & Gynaecologists (Pt 2)	3
Member of the Royal College of Ophthalmologists	31
Member of the Royal College of Paediatrics & Child Health	31
Member of the Royal College of Pathologists (Part 1)	1
Member of the Royal College of Physicians (Part 1)	431
Member of the Royal College of Physicians (Part 2)	277
Member of the Royal College of Psychiatrists	32
Member of the Royal College of Surgeons	56
Member of the Royal College of Surgeons Part 1	161
Member of the Royal College of Surgeons Part 2	62
Non-medical diploma, degree etc. after leaving medical school	9
Other American Boards	13
Other overseas qualification	9
Other UK qualification	15
Paediatric Advanced life Support	58
Pre-Hospital Trauma Life Support	4
Protection Of Persons Undergoing Medical Examination Or Treatment	2
Radiation Protection Certificate	3
Total	1266

Views and attitudes

Working conditions and support, training and duties

Figures 4-6 show, for men, women and all respondents respectively, the percentages of respondents who scored each of twelve statements on aspects of their work and training to date with *strongly agree, agree, neither agree nor disagree, disagree, strongly disagree, or no opinion*. The statements have been ordered from top to bottom in each figure in declining value for the total of the *strongly agree* and *agree* percentages.

Responses to these statements form a discomfiting picture of working life for junior doctors in their early SHO years. Almost two-thirds of respondents, and significantly more women than men, worked longer hours than they thought they should, and only a fifth agreed that if they worked fewer hours their training would suffer. Under a third were satisfied with the working conditions (for example, food, accommodation) associated with their present posts. 57% said they were expected to perform an excessive amount of routine work, which could be done by staff without medical qualifications. Only 16.5% felt that cover for absent doctors was satisfactory. Whilst 70% received good support from senior doctors on their firm in their current post, and almost as many received good support from nursing staff (although the latter was stated by significantly fewer men than women: men 63%, women 70%), only 16% felt they received good support from management. On a slightly more positive note, only a quarter of respondents felt under too much pressure whilst at work, or that they were required to perform clinical tasks for which they did not feel adequately trained (significantly more women than men: women 26.8%, men 16.5%), and half found arrangements for annual leave to be satisfactory.

Figure 4: Views on working conditions and support, training and duties - Men

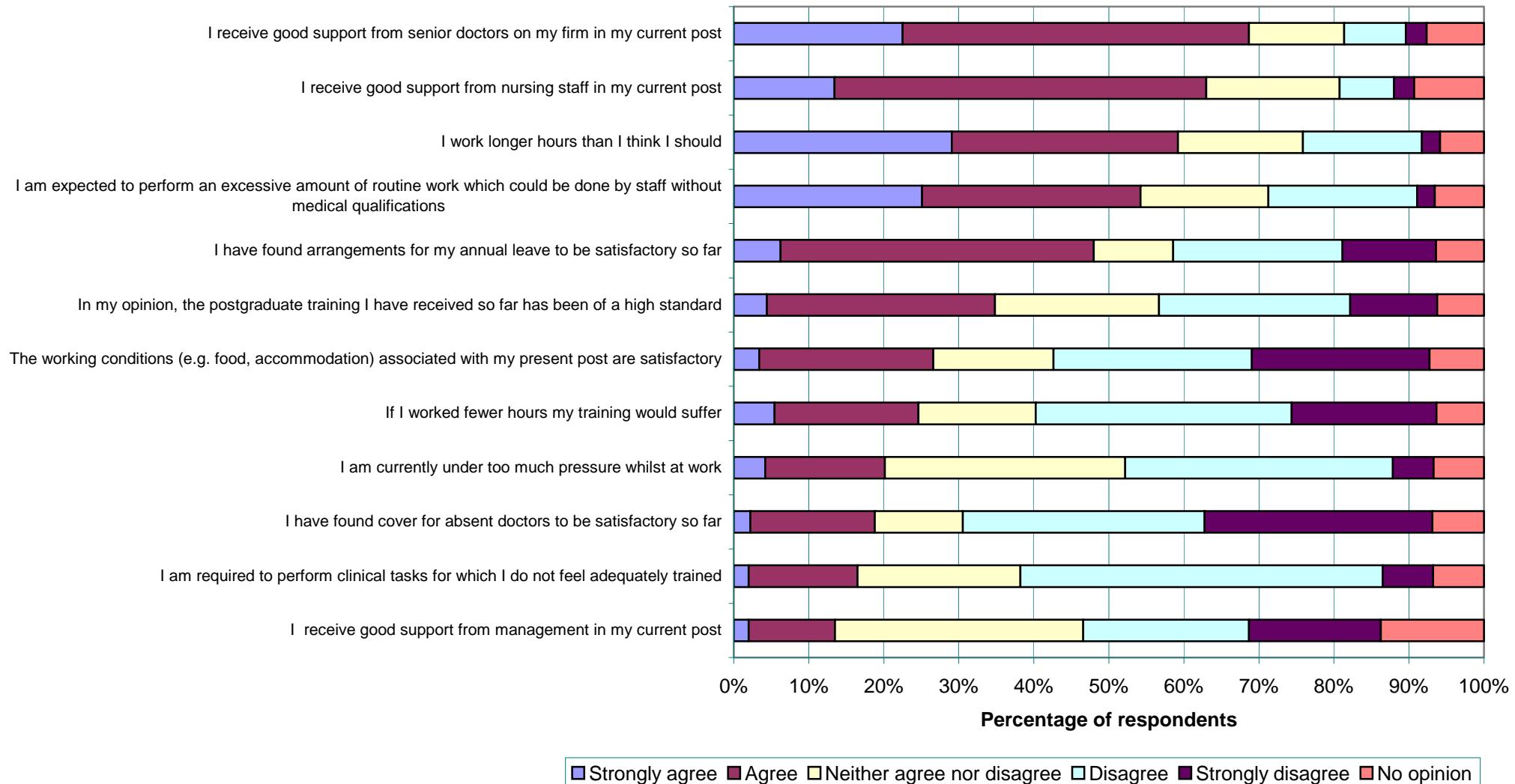


Figure 5: Views on working conditions and support, training and duties - Women

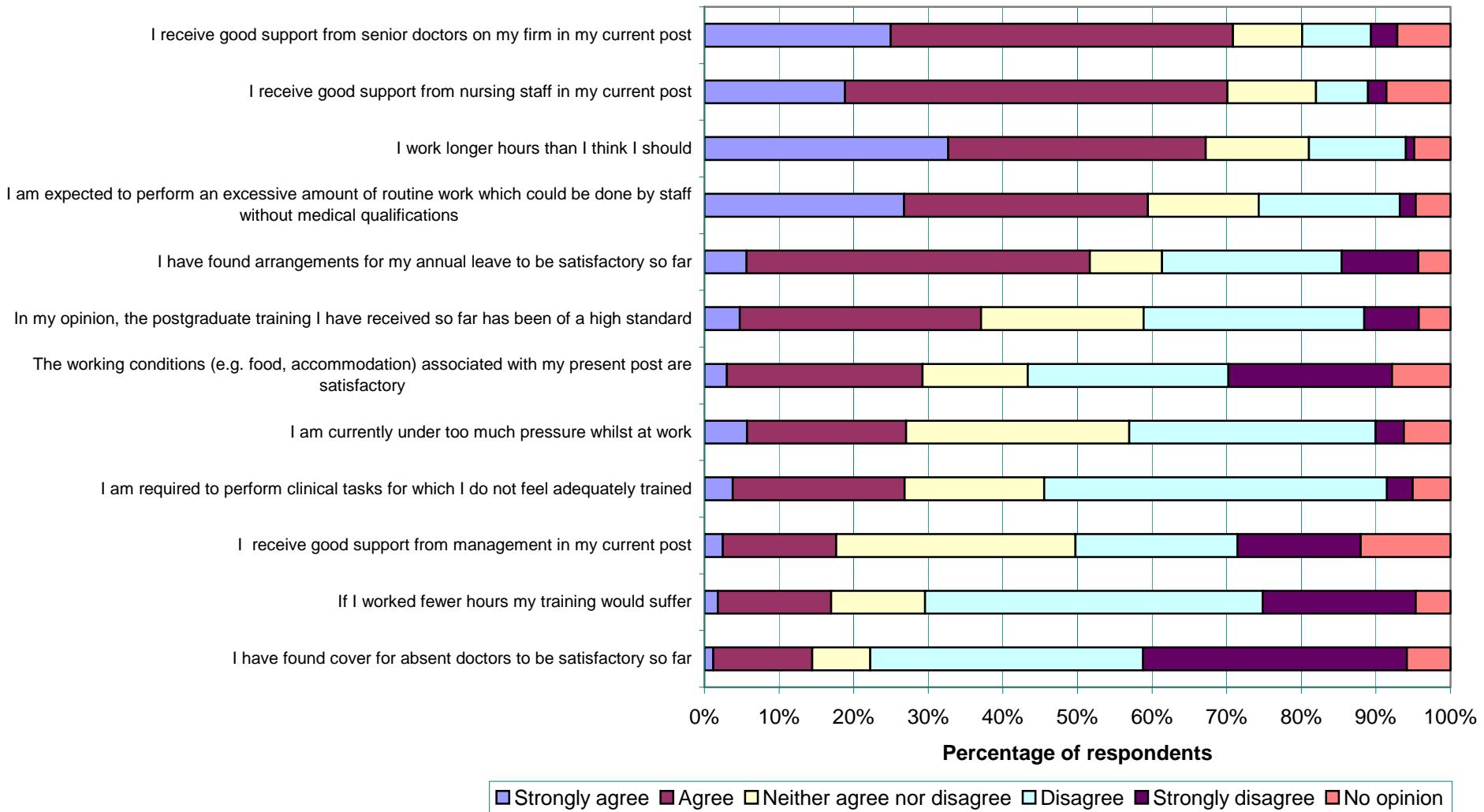
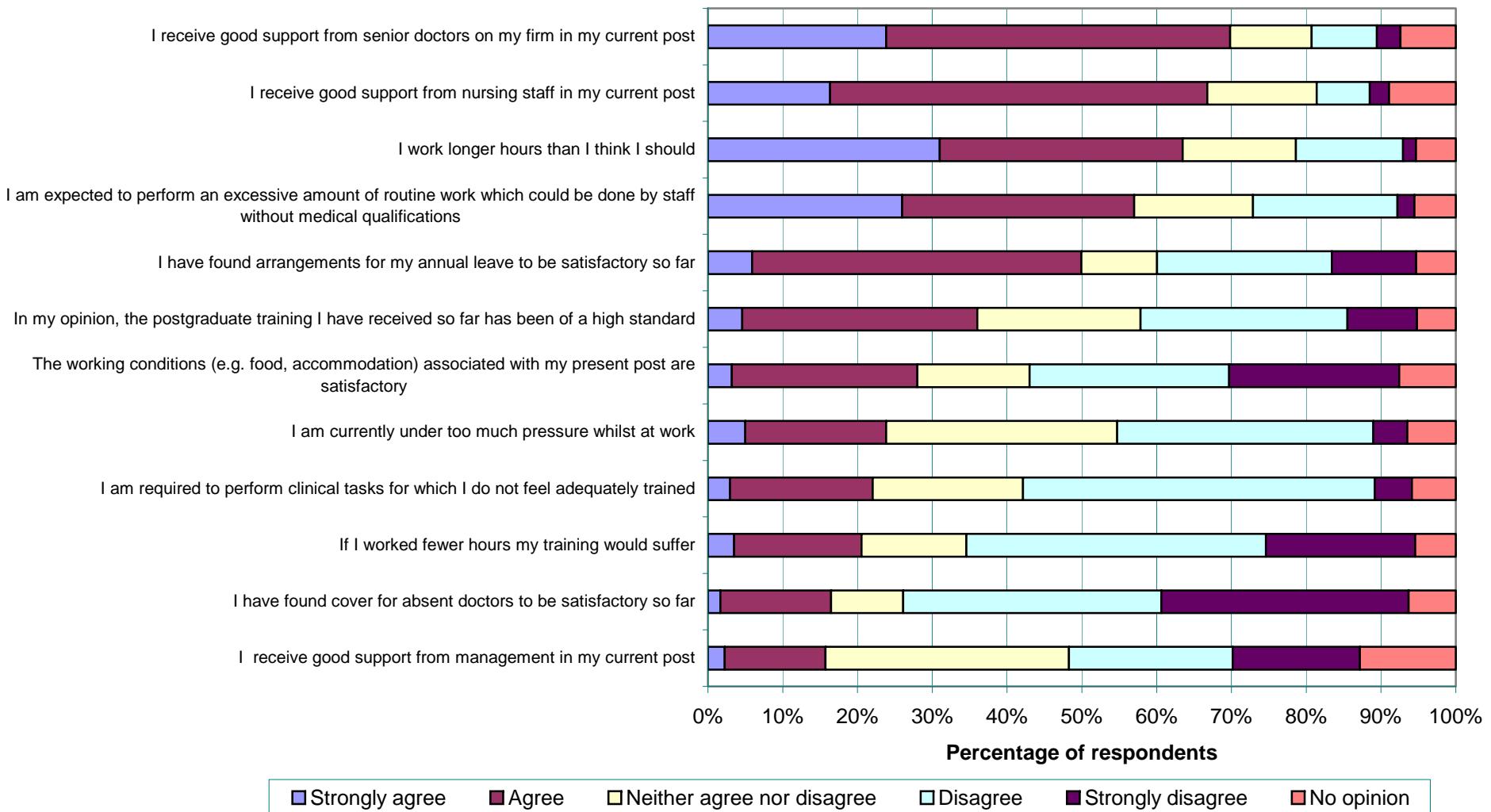


Figure 6: Views on working conditions and support, training and duties - All respondents



The NHS and equality of opportunity

Figures 7-9 show the results from statements relating to the NHS, for those respondents currently (September 1999) working in the NHS. Only 16.5% of respondents felt that they were treated fairly by the NHS in their current job. On pay, fewer than half of the respondents thought that they were fairly remunerated for their basic contracted hours (significantly fewer men than women: men 37.2%, women 44.6%), and 91.3% disagreed or strongly disagreed with the premise that the NHS remunerated them fairly for additional hours worked beyond their basic contracted hours. Over half of the respondents (significantly more women than men: women 59.0%, men 41.9%) felt that there were few opportunities to pursue flexible or part time postgraduate training, and very few felt that these should be discouraged. Over half thought that the NHS was a good equal opportunities employer with regard to women, and over 40% thought it a good equal opportunities employer with regard to ethnicity, but most rated it as poor with regard to disability. Except where specified, sex differences in the responses to these statements were small.

Figure 7: The NHS and equality of opportunity - Men

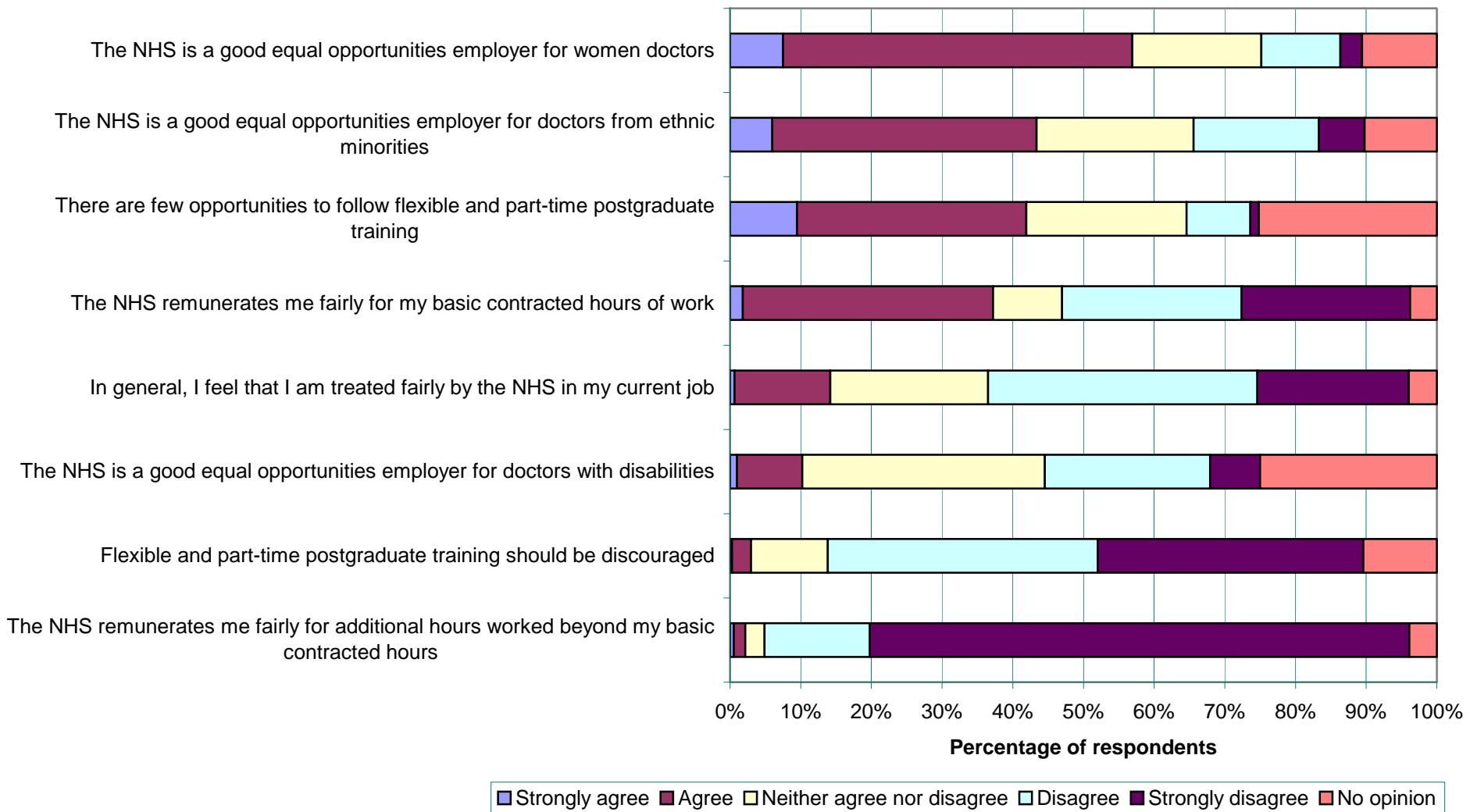


Figure 8: The NHS and equality of opportunity - Women

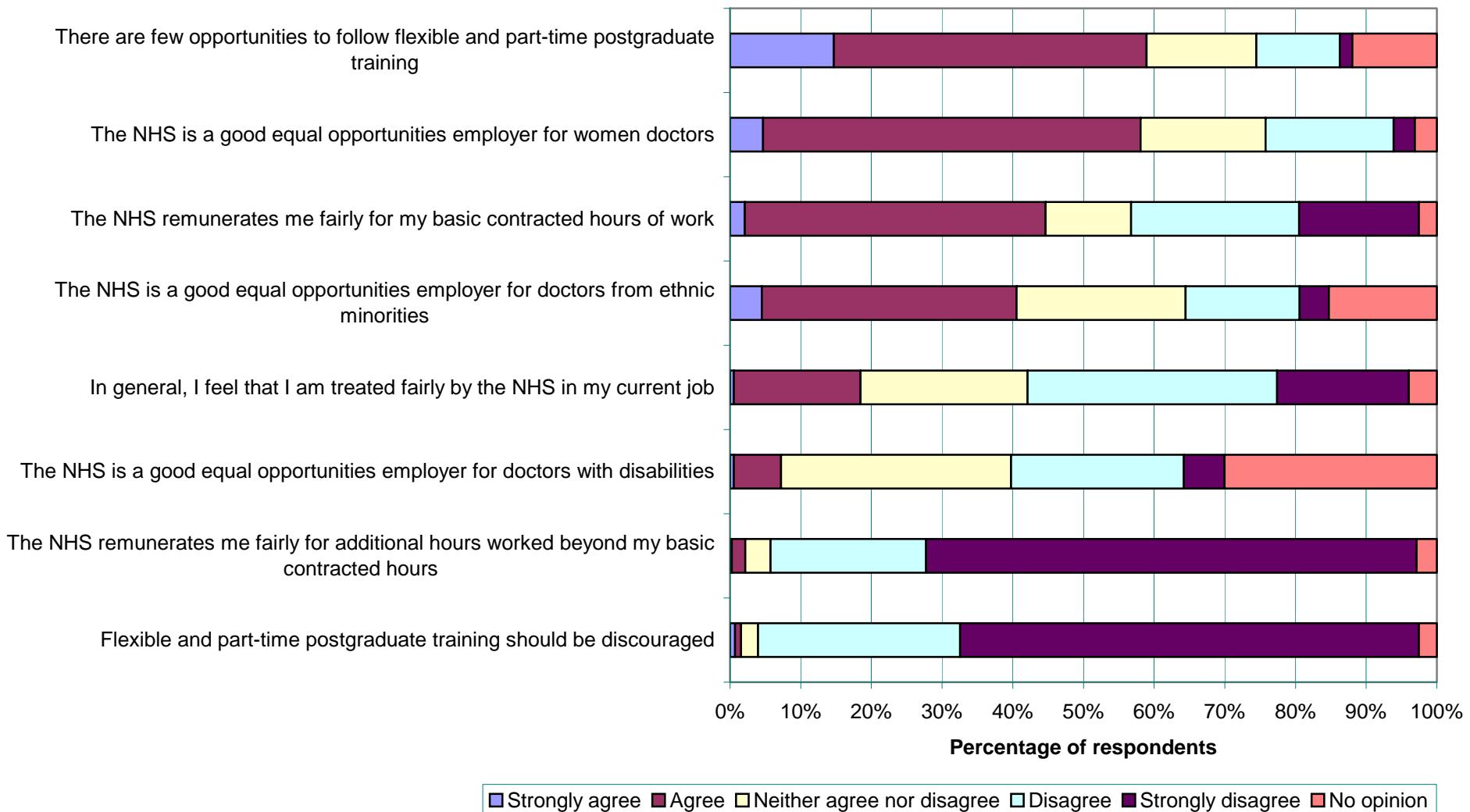
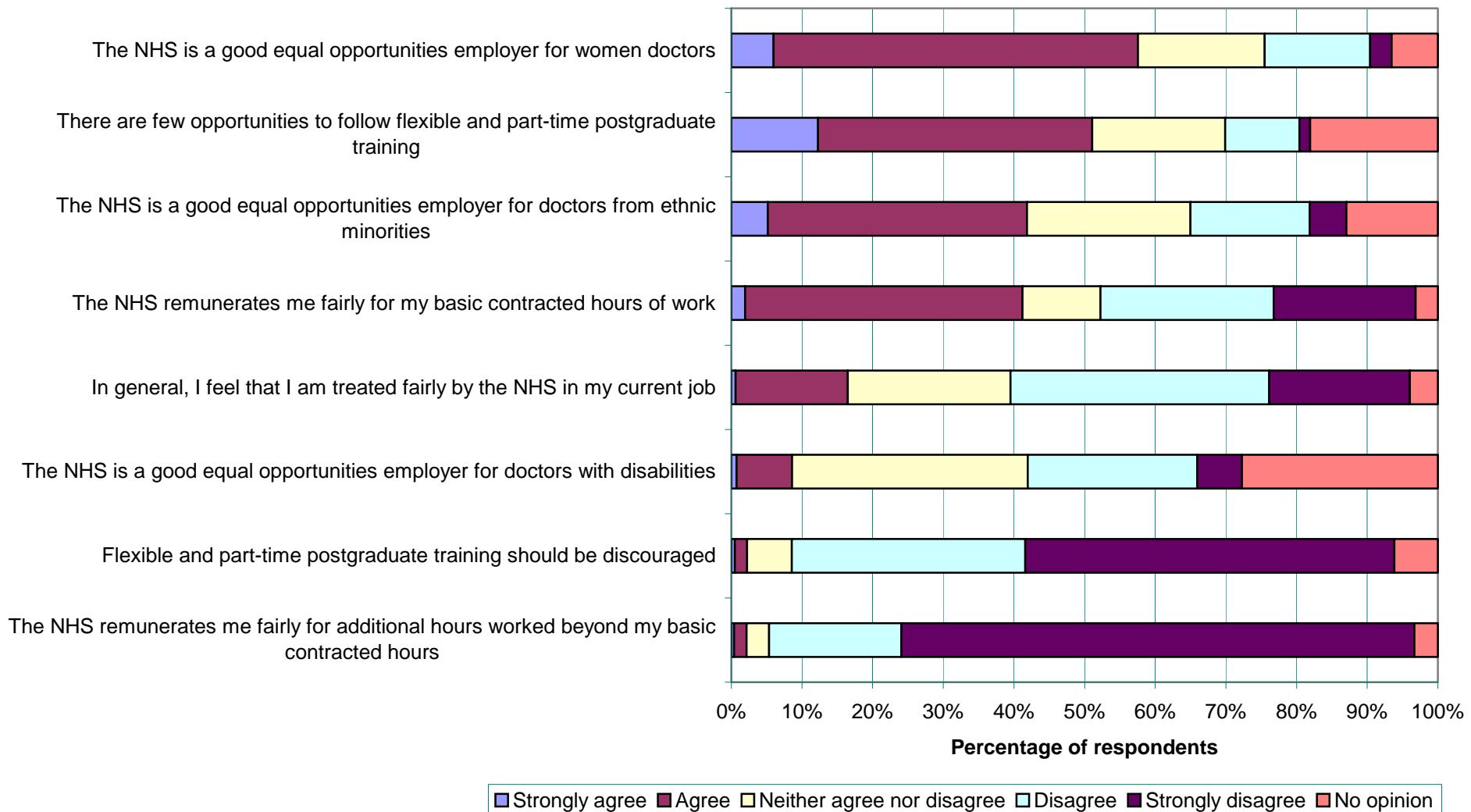


Figure 9: The NHS and equality of opportunity - All respondents



Career planning and future career

Figures 10 to 12 show the results of statements relating to career planning and future career. Over half of respondents were satisfied with their future career prospects. Roughly the same percentage overall (although significantly more men than women: men 58.4%, women 52.8%) considered that information about the availability of Specialist Registrar posts in different hospital specialties was scarce, although only a fifth held the view that information about the availability of GP posts was scarce. Women in particular believed that general practice was more attractive than hospital practice for doctors at present (women 56.9%, men 49.0%), whilst significantly more men than women stated that their experience of hospital work since graduation had increased the likelihood of their pursuing a hospital career (men 47.5%, women 40.5%). Over a third concluded that their exposure to general practice had been insufficient to assess it as a career option (men 39.5%, women 33.7%). Overall, 41.2% agreed with the statement that making career choices had been made difficult by inadequate career advice.

Figure 10: Career planning and future career - Men

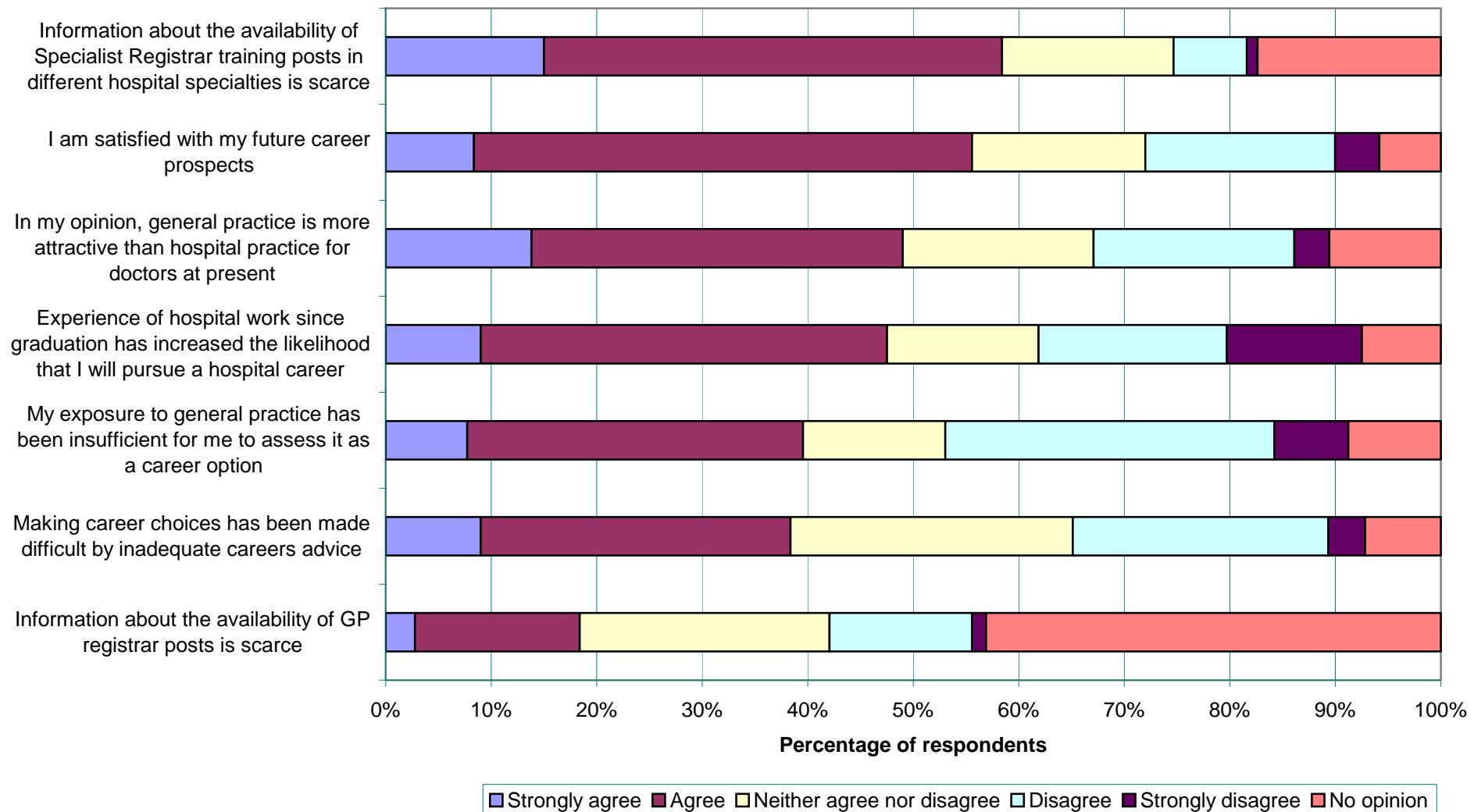


Figure 11: Career planning and future career - Women

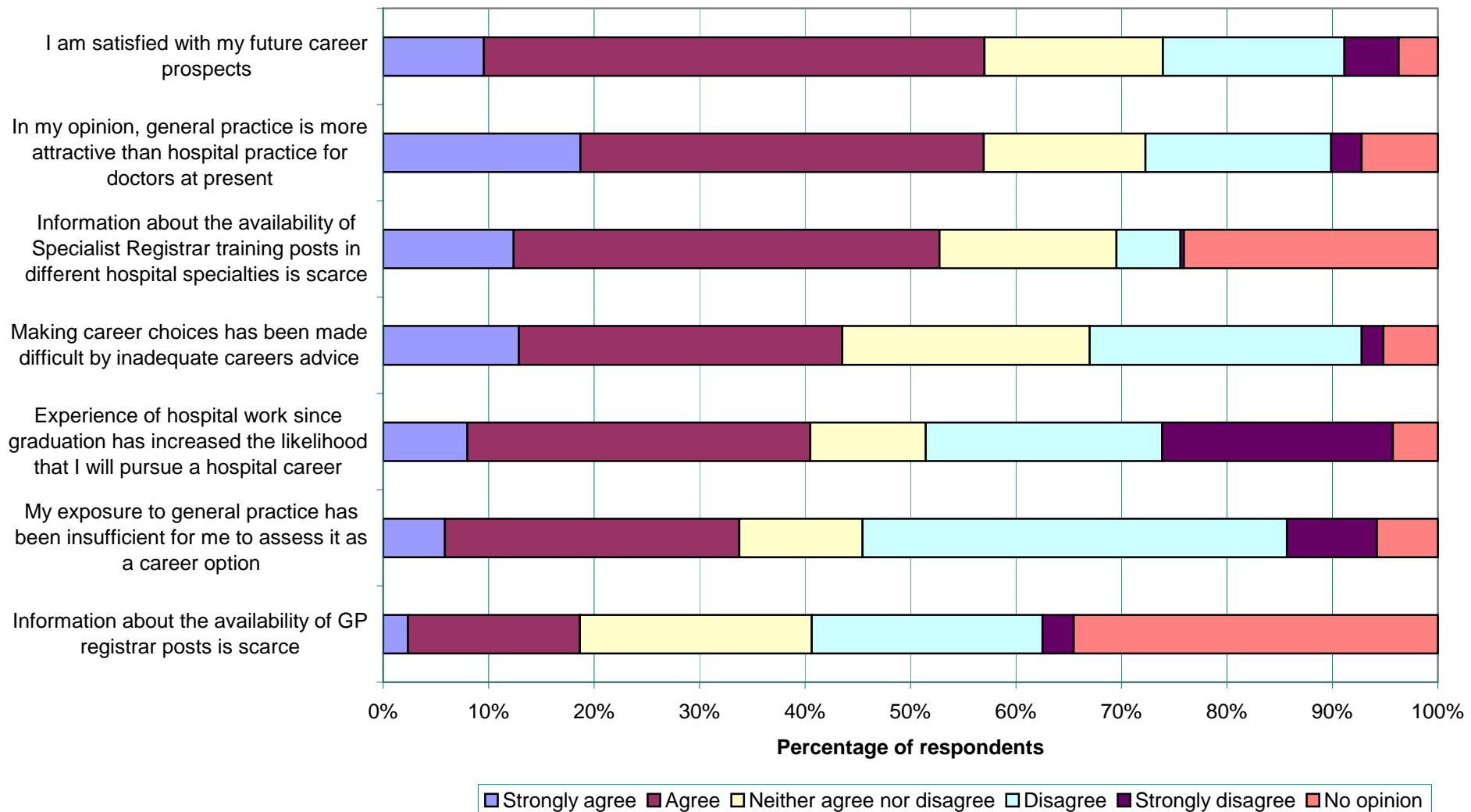
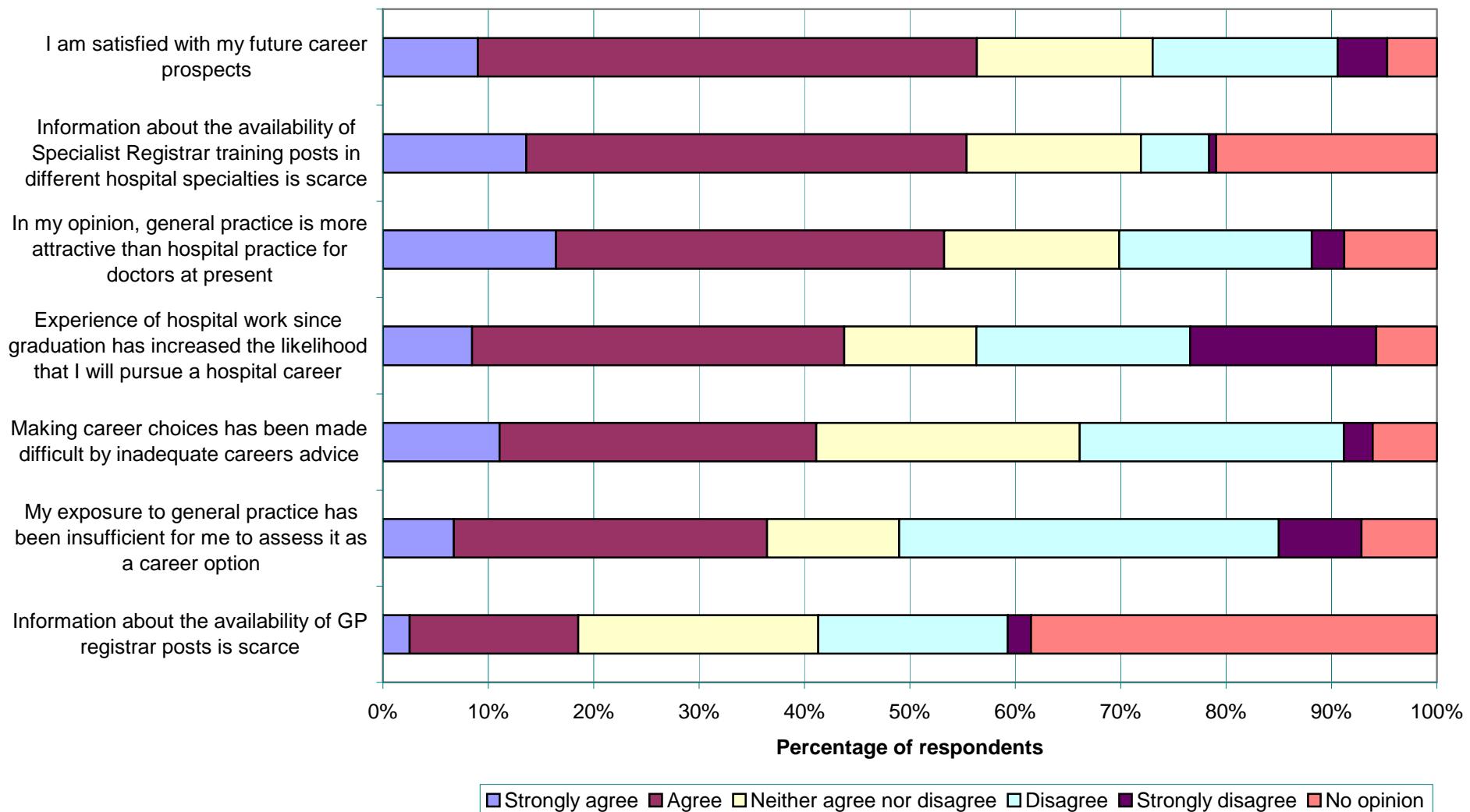


Figure 12: Career planning and future career - All respondents



Job satisfaction

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 the average for the 5 statements was calculated. The average score for both men and women was 3.6, indicating a good level of job satisfaction.

Job enjoyment and lifestyle

Respondents were asked how much they enjoyed their current position, on a scale from 1 (*not at all*) to 10 (*greatly*). Figure 13 shows cumulative percentages for men and women. Less than a quarter of respondents scored 5 or less, approximately 40% scored 6 or 7 indicating a reasonable level of enjoyment, and a third scored 8, 9 or 10 indicating a high level of enjoyment.

They were also asked how satisfied they were with the amount of time left by work for family, social and recreational activities, on a scale from 1 (*not at all satisfied*) to 10 (*extremely satisfied*). Over two-thirds scored 5 or less (see Figure 14), indicating a low level of satisfaction; only a tenth scored 8, 9 or 10. There was little difference between men and women.

Figure 13: Enjoyment of current position

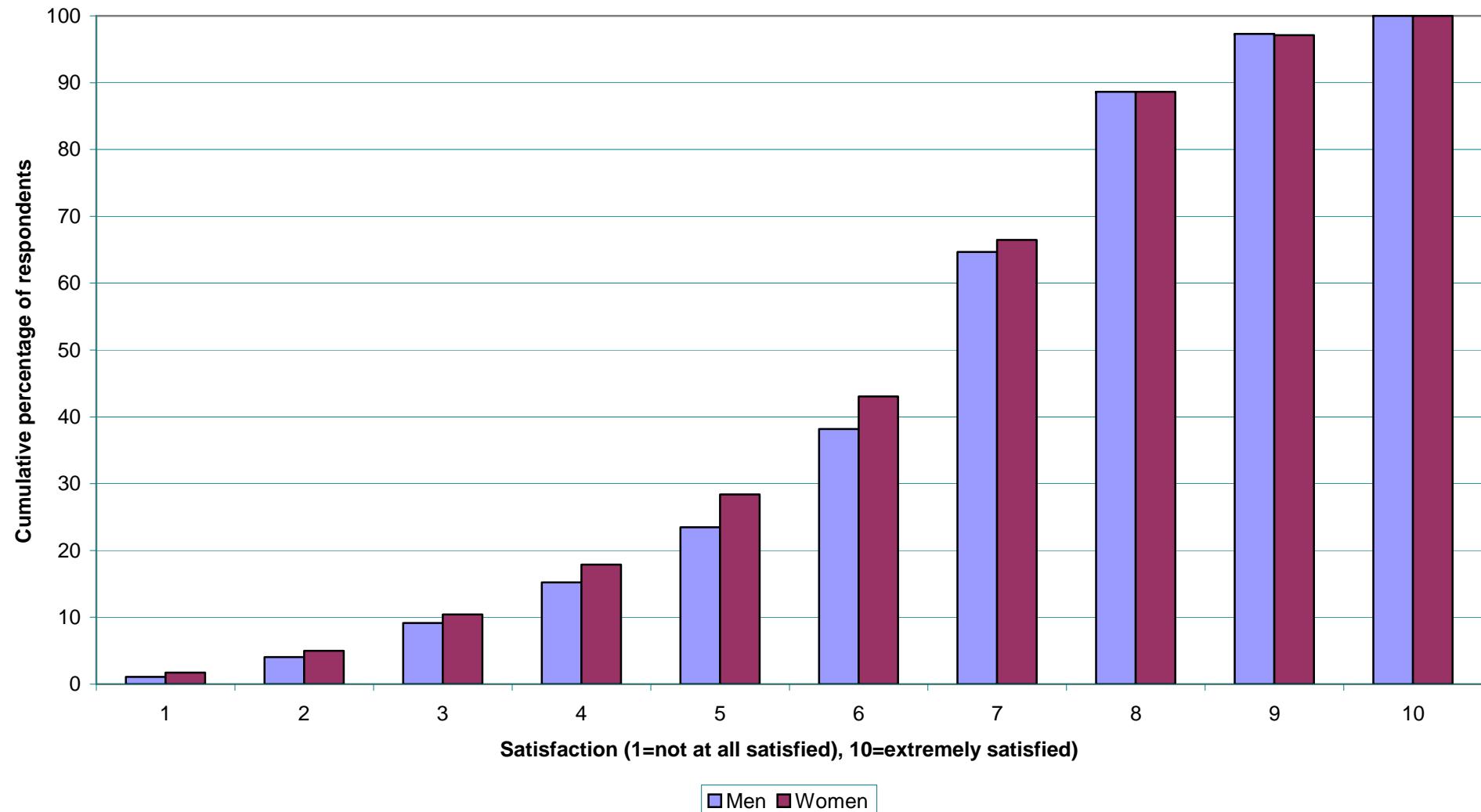
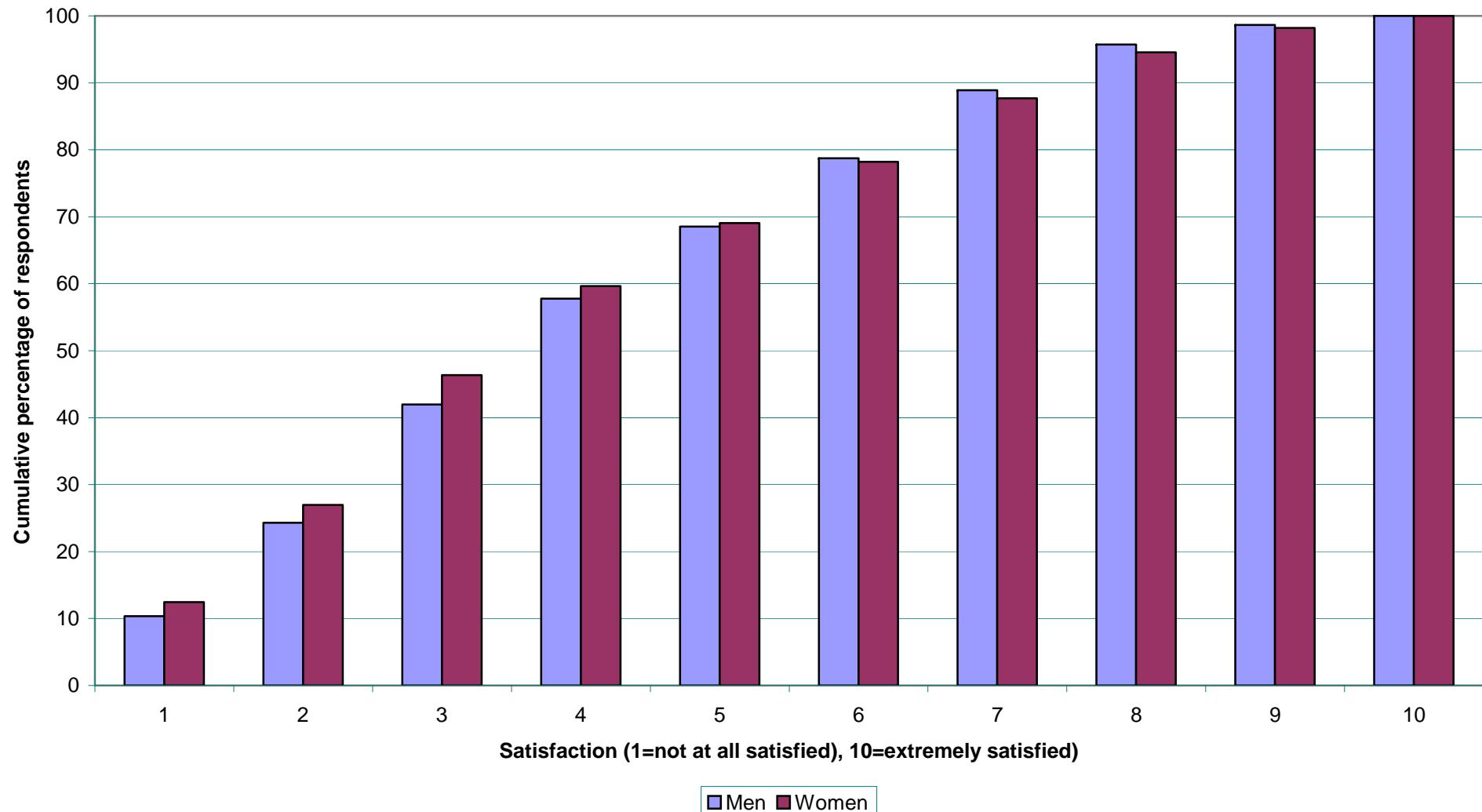


Figure 14: Satisfaction with leisure time



Questionnaire

The following pages contain a copy of the questionnaire used for the survey.

**Career Preferences and Experiences of Doctors qualifying in 1996
1999 Enquiry**

YOUR NAME, ADDRESS AND DATE OF BIRTH

We use this information to match your replies to previous surveys in the study.

This sheet is stored separately from the rest of the questionnaire.

Study Reference Number **9 6** /

Name used professionally

Maiden/married /former name (if any)

Current address
(Your preferred address for our use)

Date of birth day month year

Date of completion of questionnaire day month year

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**Career Preferences and Experiences of Doctors qualifying in 1996
1999 Enquiry**

Your replies will be treated as strictly confidential to members of our research team and in reporting results we will take all reasonable steps to preserve your anonymity.

Please answer the following questions as fully as you are able, by ticking or writing in the shaded boxes provided, and return the questionnaire in the envelope provided.

Please write clearly.

A. BACKGROUND INFORMATION

1. What is your sex? Male Female
2. What was your age last birthday? years
3. What is your current marital status? Living with spouse or partner
Single
Widowed/Divorced/Separated
4. How many children under 16 are normally resident in your household?

If there are children, what are their ages in years?
(Enter 0 for 0-11 months)

5. Are there any dependent adults (e.g. disabled, sick or elderly) in your household whose needs could affect your ability to pursue your chosen career? Yes
No
6. What is your nationality? UK Other* Joint UK/Other*
** Please specify*
7. Which of the following best describes your ethnic origin?

White <input type="checkbox"/> Asian: Indian <input type="checkbox"/> Pakistani <input type="checkbox"/> Bangladeshi <input type="checkbox"/> Chinese <input type="checkbox"/> Asian-other* <input type="checkbox"/>	Black: Black Caribbean <input type="checkbox"/> Black African <input type="checkbox"/> Black-other* <input type="checkbox"/> Other* <input type="checkbox"/>
--	--

** Please specify*
8. Are or were your parents medically qualified? Mother Yes No
Father Yes No

9. Which was your *pre-clinical* medical school?

10. Which was your *clinical* medical school?

11. How old were you when you started as a pre-clinical medical student? years

12. At the time of your application for medical school:
which town or city did you live in (or near)?

(If rural, give nearest town or city)

How many years had you lived there (or near there)? years

13. Were you an overseas-based student (as defined by level of fees paid) during your time at medical school in the UK? Yes No

B. PROFESSIONAL QUALIFICATIONS

1. Did you obtain any professional or other 'post-school' qualifications *before* entering medical school? Yes* No

* Please specify

2. Did you obtain any non-clinical qualifications *during* medical school?
(Exclude primary medical qualifications, e.g. MB, ChB)

Yes-BSc, BA, BMedSci Yes-Other* No

* Please specify

3. Please list all higher professional or academic qualifications obtained since leaving medical school. Please give details below (spell out in full rather than initials) and the year passed.

Qualification	Year

C. PREVIOUS EMPLOYMENT (*current employment details are requested on the next page*)

We would like details of all completed periods of employment (i.e. **excluding** your current employment) since the end of your pre-registration house officer year.

Please either

Enclose the relevant portion of your curriculum vitae

or

Complete details of your past employment in the table below.

Please supply us below with brief details of each post (**excluding your current employment**), whether as a medical practitioner or in a non-medical job. Please include any substantial period(s) of time not in paid employment. **Dates:** Please give month and year. **Details of post:** Please complete. **Location:** Please give the town or city if in the UK, or the country if abroad. **Additional details:** Please tick if yes.

Dates		Details of post			Additional details				
From	To	Specialty/ Type of work	Grade/ Job title	Location	Full-time?	NHS?	Locum?	Retainer scheme?	HM Forces?

D. CURRENT EMPLOYMENT

1. Are you currently in medical employment?

Yes <input type="checkbox"/>	No; I am in <i>non-medical</i> employment <input type="checkbox"/>	⇒ GO TO QUESTION 7	
GO TO QUESTION 2		No, I am <i>not</i> in employment <input type="checkbox"/>	⇒ GO TO QUESTION 4

2. Which one of these broad groupings best describes your current **main** medical post?

General Medicine Group Paediatrics Accident and Emergency General Surgery Other Surgical specialty	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Obstetrics and Gynaecology Anaesthetics Radiology Clinical Oncology Pathology	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Psychiatry General Practice Community Health Public Health Medicine Other	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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3. Details of your current **main** post

Specialty <i>If your specialty has a more precise title than that ticked in Question 2 above, please name it precisely</i>	<input type="text"/>
Grade <i>Give the grade (SHO, Specialist registrar, GP registrar; and specify if locum, retainer scheme or other scheme)</i>	<input type="text"/>
Name of employer <i>e.g. NHS trust. Specialists and GPs contracted to provide services to the NHS (including locums) – please just enter NHS. Private GPs please enter 'Private'</i>	<input type="text"/>
Name of funding body <i>e.g. NHS, MRC, University, HM Armed Forces, Private company or Charity (please name), Honorary (unpaid)</i>	<input type="text"/>
Start date <i>Give the month and year</i>	<input type="text"/>
Place of work <i>Give the name of the town or city in UK, or country if outside the UK</i>	<input type="text"/>

Are you working full-time or part-time in this post?
If part-time, **how many** weekly sessions/hours do you usually work?

Full-time ⇒ Sessions
Part-time or Hours

Does this post carry an NHS contract (*include honorary as 'Yes'*) ?

Yes No

GO TO QUESTION 9

4. When were you last employed?
Give month and year

5. Why are you currently not in employment?
e.g. illness, career break/travel/holiday, domestic commitments, inability to obtain suitable work

6. Are you currently seeking employment?

No-not seeking paid work <input type="checkbox"/>	Yes-part-time, in medicine <input type="checkbox"/>
Yes-whole-time, in medicine <input type="checkbox"/>	Yes-outside medicine <input type="checkbox"/>

GO TO QUESTION 9

7. When did you start your non-medical post?
Give month and year

8. Please describe your post and give its location

GO TO QUESTION 9

9. Please give brief details of any other posts you currently hold.

*For medical posts please include specialty, grade, whether within the NHS, and the weekly time commitment.
Please continue on a separate sheet if necessary.*

--

E. FUTURE CAREER INTENTIONS, AND INFLUENCES ON YOUR CAREER TO DATE

1. Have you made up your mind about your choice of long-term career ?

Definitely Probably Not really

What is your choice of long-term career ? *List up to 3 choices in order of preference.
Bracket together any choices that are equal. Be as specific or as general as you wish.*

1	
2	
3	

2. How much has each of the following factors influenced your choice of career to date?

For each factor, please tick one of the three boxes :

	Not at all	A little	A great deal
Domestic circumstances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hours / working conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial circumstances whilst training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eventual financial prospects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organisation of training programme in chosen specialty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Promotion/career prospects in chosen specialty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Self-appraisal of own skills/aptitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Advice from others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inclinations before medical school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student experience of chosen subject	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Experience of jobs in training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enthusiasm/commitment: what I really wanted to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inability to secure qualifications for preferred career	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ease of obtaining a training post	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anticipated ease of obtaining a career post	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* Other reasons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Please specify

3. Career influence of non-clinical factors.

*We are interested in ways in which **non-clinical** factors such as domestic circumstances, disability or career opportunities have affected your career choices and career development. If such factors have significantly affected your career please give details.*

4. Intention to practise medicine in the UK

Apart from temporary visits abroad, do you intend to practise medicine in the United Kingdom for the foreseeable future?

Yes-definitely
Yes-probably
Undecided
No-probably not
No-definitely not

a) If you did *not* answer ‘Yes-definitely’, are you

Considering practising medicine abroad?
Considering leaving medicine but remaining in the United Kingdom?
Considering leaving medicine **and** leaving the United Kingdom?

b) If you are considering one of the options in Question 4a above, what is your main reason for doing so?

c) If you intend to practise medicine outside the UK, in which country or continent?

5. Do you plan to undertake part or all of your training on a part-time basis?

Yes
No

* If you wish to make fuller comment on any of these points, please do so in Section H.

F. YOUR VIEWS AND ATTITUDES

This part of the questionnaire consists of a number of attitude statements. Please consider each statement and tick the response box which most accurately reflects your own opinion. Although it may be difficult to make a choice, please answer every statement. Please use 'No opinion' for topics about which you do not feel you have enough information to express an opinion. For example, if you are working outside the NHS you may be unable to respond to some statements.

We would be pleased to receive more detailed comments on any of these issues in section H below.

Working conditions and support		Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
1.	I work longer hours than I think I should.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2.	I have found arrangements for my annual leave to be satisfactory so far.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3.	I have found cover for absent doctors to be satisfactory so far.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	I receive good support from senior doctors on my firm in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5.	I receive good support from nursing staff in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	I receive good support from management in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	The working conditions (e.g. food, accommodation) associated with my present post are satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8.	I am currently under too much pressure whilst at work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Training and duties		Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
9.	In my opinion, the postgraduate training I have received so far has been of a high standard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10.	If I worked fewer hours my training would suffer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11.	I am expected to perform an excessive amount of routine work which could be done by staff without medical qualifications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12.	I am required to perform clinical tasks for which I do not feel adequately trained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The NHS and equality of opportunity		Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
13.	The NHS is a good equal opportunities employer for doctors from ethnic minorities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14.	The NHS is a good equal opportunities employer for women doctors.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15.	The NHS is a good equal opportunities employer for doctors with disabilities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16.	The NHS remunerates me fairly for my basic contracted hours of work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17.	The NHS remunerates me fairly for additional hours worked beyond my basic contracted hours.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18.	In general, I feel that I am treated fairly by the NHS in my current job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19.	There are few opportunities to follow flexible and part-time postgraduate training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20.	Flexible and part-time postgraduate training should be discouraged.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Career planning and future career

		Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	No opinion
21.	I am satisfied with my future career prospects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.	Making career choices has been made difficult by inadequate careers advice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23.	Information about the availability of Specialist Registrar training posts in different hospital specialties is scarce.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24.	Information about the availability of GP registrar posts is scarce.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25.	In my opinion, general practice is more attractive than hospital practice for doctors at present.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26.	My exposure to general practice has been insufficient for me to assess it as a career option.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27.	Experience of hospital work since graduation has increased the likelihood that I will pursue a hospital career.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

G. ENJOYING YOUR JOB

1. Job satisfaction

This section provides a simple measure of job satisfaction which we can use to compare doctors with other professional groups.

	Strongly Agree	Agree	Neither Agree nor disagree	Disagree	Strongly disagree
I find enjoyment in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am doing interesting and challenging work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel dissatisfied in my current post.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most days I am enthusiastic about my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am often bored with my work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. Job enjoyment and lifestyle

We would like you to respond to the following two questions by circling the number which you think most accurately reflects your opinion.

a) How much are you enjoying your current position?

1	2	3	4	5	6	7	8	9	10
Not enjoying it at all					Enjoying it greatly				

b) How satisfied are you with the amount of time your work currently leaves you for family, social and recreational activities?

1	2	3	4	5	6	7	8	9	10
Not at all satisfied					Extremely satisfied				

H. ADDITIONAL COMMENTS

Please give us any comments you wish to make, on any aspect of your training, career choices or work, on this page (and continuation sheets if necessary).

Thank you for your co-operation.

Please return this questionnaire to: UK Medical Careers Research Group, Unit of Health-Care Epidemiology, Institute of Health Sciences, Old Road, Oxford OX3 7BR.

Specialty mainstream groupings

1. Accident and emergency
2. Anaesthetics (includes intensive care)
3. Clinical Oncology
4. Community Health (includes family planning)
5. General Practice
6. Medical specialties (includes academic medicine, cardiology, chest medicine, clinical pharmacology, dermatology, endocrinology, gastroenterology, general medicine, genetics, geriatrics, industrial medicine, infectious diseases, nephrology, neurology, rheumatology / rehabilitation, tropical medicine, venereology)
7. Obstetrics and gynaecology
8. Other medical (includes academic work, general hospital work, HM Forces, Third World medicine)
9. Surgical specialties (includes academic surgery, cardiac surgery, dental surgery, ear nose and throat, general surgery, neurosurgery, ophthalmology, orthopaedics/trauma, paediatric surgery, plastic surgery, urology, vascular surgery)
10. Paediatrics
11. Pathology (includes clinical chemistry, forensic medicine, haematology, histopathology, immunology, microbiology)
12. Psychiatry (includes adult psychiatry, child / adolescent psychiatry, forensic psychiatry, psychogeriatrics, psychotherapy)
13. Public health medicine
14. Radiology