

Self-development time (SDT) for Foundation Doctors

Background

All newly qualified doctors in England must undertake the two-year Foundation Programme. The Foundation Programme Curriculum (2021) describes clinical and non-clinical training outcomes which must be achieved for a foundation doctor to receive a successful outcome at ARCP (Annual Review of Competency Progression) and to progress to the next stage of training.

The non-clinical activities required for a successful outcome at ARCP include maintenance of a comprehensive e-portfolio of evidence, regular meetings with named Clinical and Educational Supervisors, preparation and delivery of teaching, involvement in Quality Improvement, and formal reflection on clinical practice. In addition, foundation doctors are expected to explore career opportunities and to prepare for applying for specialty training.

The 2016 Terms and Conditions of Service for NHS Doctors in Training stated, 'work schedules should be designed to meet the service delivery needs of the organisation and the education and training needs of the doctor.' The NHS Employers / BMA Good Rostering Guide subsequently stated that rosters and work schedules should include sufficient time for activities such as teaching and assessment, e-learning, quality improvement, and reflective practice.

Foundation Programme Review findings and relevant Recommendations

In 2018 -2019 Health Education England, as part of its Medical Education Reform Programme, carried out a wide-ranging review into delivery of the Foundation Programme. The review heard from a broad range of stakeholders including many doctors in training.

One finding was that many doctors who were currently, or had recently been, foundation trainees reported that their work schedules did not include time for many, or sometimes any, of these non-clinical curricular requirements. This meant they were having to carry out these activities in their own time.

The review also heard that many foundation doctors, particularly in Foundation Year 2 (FY2), felt exhausted and experienced burnout. One consequence of this was that they reported not having enough 'thinking time' to consider their future career options and choices and had therefore delayed making an application for specialty training. This correlates with the GMC finding, in its 2018 Training Environments Report (https://www.gmc-uk.org/-/media/documents/training-environments-2018_pdf-76667101.pdf) that FY2 doctors

Self-development time for Foundation Doctors

report higher levels of burnout than any other stage of postgraduate medical training. The Foundation Programme FY2 Destination Survey has shown a year-on-year decrease in the number of FY2 doctors progressing directly to specialty training after completing foundation training.

The review therefore concluded there is a need to ensure that all foundation doctors, independent of which trust or specialty they are currently working in, are supported to have sufficient time for non-clinical activities which are essential for their professional development and career progression.

The Foundation Programme Review report said, in recommendation 14, that *'HEE will engage with key stakeholders to assess how Foundation doctors can be given time in the working week for professional self-development ('self-development' time).'*

The intention is that 'self-development' time (SDT) will ensure all foundation doctors have dedicated time within their work schedules for the non-clinical activities that are curricular requirements and essential for success at ARCP. It is hoped that this time will support the efforts to reduce burnout in foundation doctors, will improve foundation doctors experience of working in the NHS and will allow more foundation doctors to make career decisions about applying to specialty training without the need to take a break in training.

Implementation

Subsequent to publication of the Foundation Review Report HEE has engaged with NHS Employers, the UKFPO and Foundation School Directors. **From August 2021, all foundation doctors (both FY1 and FY2) will have at least two hours SDT per week scheduled.**

Following the initial pilot, some trainees have reported that where the time has been collated (e.g into one afternoon or morning per fortnight, or one day every 4 weeks), they have achieved greater outcomes from their SDT. This decision needs to be made locally, to meet clinical and development needs of the Trust and trainee.