

UK Foundation Programme (UKFP)

Removal of Educational Achievements (EA)

Purpose

Further to recent discussions and the decision for the Educational Achievements (EA) score to be removed from the application process for foundation training, the Co-Chairs of the UK Foundation Programme (UKFP) have proposed for this change to take effect for UKFP 2022.

It has also been suggested for the composition and weighting of the component parts of the application score to be reviewed to support the aims of Health Education England's (HEE's) Foundation Review by seeking alternate ways of conducting the allocation process to promote fill and retention in areas which typically experience workforce shortages.

Background

As part of the annual review of the national application process, it has been agreed by the Medical and Dental Recruitment and Selection (MDRS) Programme Board for the additional EA score to be excluded from the total application score for entry to foundation school. In March 2020, the national Recruitment Delivery Group (RDG) considered the options for when this change should be implemented, and the majority voted for the removal of the EA to take effect no sooner than for UKFP 2023.

Current Delivery

The UKFP application score currently consists of two component parts of equal weighting (maximum of 100 points): Educational Performance Measure (EPM) (maximum of 50 points) and the Situational Judgement Test (SJT) (maximum of 50 points).

All applicants are given a unique rank based on their total application score. Where there are tied score, the EPM decile score is used to break the tie in the first instance. If ties persist, the SJT score is then used to try and break the tie. Finally, if ties still exist, they are broken randomly by the system.

Applicants are allocated to foundation school places using a meritocratic algorithm. Applicants are then matched to individual programmes using the same algorithm and their initial rank and preference information.

Educational Performance Measure (EPM)

The EPM is a measure of clinical and non-clinical skills, knowledge, and performance up to the point of application. The EPM comprises two elements: academic decile score assigned by the qualifying medical school, for which 34-43 points are available, and educational achievements, which are worth up to 7 points (maximum of 7 points; 5 for degrees and 2 for publications).

Situational Judgement Test (SJT)

The SJT is an assessment designed to test aptitude for employment and the professional attributes expected of a Foundation doctor, as defined in the National Person Specification. It presents applicants with hypothetical work-relevant scenarios asking for non-clinical judgments about possible responses. While the evaluation of the SJT for selection to the Foundation Programme is ongoing, research into SJTs as a measurement methodology suggested they are a valid and reliable tool and can help predict later job performance.



Proposed Changes

The Co-Chairs of the UKFP have requested for the removal of the EA score to take effect for UKFP 2022 (application process due to open in September/October 2021). This change would also require the weighting of the academic decile to be adjusted alongside the SJT score.

Rationale

The percentage of applicants choosing to submit evidence of additional educational achievements has increased considerably over the years from approximately 30% when the process was first introduced to over 70% in the latest application round. The majority of applicants are now claiming for additional points, thereby resulting in less differentiation between application scores.

The number of universities where students now graduate with two degrees rather than a classic intercalated degree is also a concern as additional points are awarded to students for having completed the requirements of the university course, rather than going over and above to complete an entirely additional degree. The following universities graduate students with two degrees, which would therefore attract additional points as standard: Oxford, Cambridge, University College London (UCL), Imperial, Edinburgh, Nottingham, and any student who went to St. Andrews and finishes their studies at another medical school.

A recent paper by McManus et al¹ has explored the predictive validity of a number of different aspects of undergraduate medical education for a variety of post graduate metrics (including Post Graduate Exams, ARCP outcomes and sanctions by the GMC). The paper represents the aggregated data for 29 medical schools over the period since the introduction of the Improved Selection for Foundation Process. The SJT is a significantly stronger predictor of post graduate performance than the EPM by all measures.

It has been acknowledged that the opportunities for students to obtain additional degrees are not consistent across the applicant cohort, for example, in cases where all courses are intercalated, and the graduating cohort all have an additional degree. As such, there are concerns over the implications of the EA score in terms of widening participation and those applicants who experience financial hardship².

Recruitment to and progress within the Foundation Programme does not require additional degree qualifications.

Analysis of Previous Data

Data from previous years has been used to compare allocation results. Data was tested for two identical cohorts of applicants, one with the inclusion of the EA scores and one without.

The results showed that when applicants were ranked based on their academic decile and SJT score alone, 43% received a higher rank, 6 were assigned the same ranking and 57% moved down in the ranking. The data also showed that the disadvantage suffered by applicants after removal of the additional points was proportional to the number of points they had, with candidates with the most EA points suffering most, as one might expect to be the case. Interestingly, applicants with one or two EA points received higher ranks after the points were removed. Unfortunately, the data lacked granularity to be able to distinguish whether these were applicants with a higher level degree or 'no degree and one or two publications'.

¹ McManus, I.C., Harborne, A.C., Horsfall, H.L. *et al.* Exploring UK medical school differences: the *MedDifs* study of selection, teaching, student and F1 perceptions, postgraduate outcomes and fitness to practise. *BMC Med* **18**, 136 (2020). https://doi.org/10.1186/s12916-020-01572-3

² Kumwenda B, Cleland J, Prescott G, et al Relationship between sociodemographic factors and specialty destination of UK trainee doctors: a national cohort study BMJ Open 2019;9:e026961. doi: 10.1136/bmjopen-2018-026961



Other Considerations

- On the basis of the current research available, it has been concluded by the psychometrician who sits on the national RDG, that prior to the research paper cited above, the relative predictive validity of the SJT and EPM is largely *contested*. Only further studies will enable a clear conclusion to be drawn.
- Administrative systems have inertia and students will have employed long-term strategies for optimising their application outcomes for foundation training.
- > Students will have made commitments to gaining additional points and might have a just grievance if the rules are changed without due notice. Since intercalation frequently occurs between year 4 and 5 of a medical programme, it could be argued that two years' notice would be the minimum that should be given to removing the additional points.

Decision for UKFP Board

The Co-Chairs are seeking the support of the UKFP Board for the removal of the EA score for the application process for UKFP 2022.

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