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The decision to randomise specialised foundation programme places must be revised, if not reversed

The decision by statutory health education bodies to randomise specialised foundation programme places across the UK must be revised, write **Narut Pakunwanich**, **Jeremy Bjørndal**, and **Alexander Demby**

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The UK Foundation Programme Office (UKFPO) announced in February 2024 that places on the specialised foundation programme (SFP) will be allocated by a “preference information allocation” system—a random number generator.¹ This randomised system removes both the autonomy of applicants and the ability of SFP providers to select suitable candidates.² Randomly allocating research opportunities is inefficient and does not maximise the potential of applicants or the research outputs of universities. The changes must be revised, if not reversed, or they will undermine the future of the SFP.

There has been significant opposition to the proposed changes, especially from students and clinical academics.^{3,4} Much of the criticism has focused on the false pretence of “widening participation”⁵ as an attempt to mask the problem underlying the changes—oversubscription of the SFP caused by UKFPO’s previous changes.^{6–8} The BMA’s Medical Students Committee and Medical Academic Staff Committee have warned that this decision jeopardises the long term viability of the SFP.³ The changes that are intended to equalise applicants will only push the top performing graduates and aspiring researchers abroad or out of medicine, further reducing already abysmal retention.

Strengths of the current system

The current devolution of selection criteria and processes to “specialised units of applications”—localised groupings of foundation schools and universities which provide SFP programmes and determine recruitment—are a critical strength of the SFP. Students are considered as individuals with unique strengths and merits assessed on personalised applications. This allows NHS foundation schools to tailor their local SFP delivery to match regional strengths. Increased competition between applicants for places on programmes, and from foundation schools for top performing graduates, enables effective allocation of places.

Currently, graduates can apply for both the non-specialised foundation programme, based on geographical preferences, and two SFP applications, based on academic preferences. This allows students to separate their academic and geographical preferences, which are not necessarily linked. Under the proposed randomisation, this is not possible.

Proposed revisions

If this decision cannot be reversed, we propose three options for revision. The best option is to allow the current specialised units of applications to select for SFP candidates after foundation schools have already been allocated. This gives SFP providers the power to select capable candidates and keeps the current local processes relatively intact. There are concerns over the ability of successful applicants to cope with balancing the academic and clinical pressures of the SFP if they lack previous experience of completing research during clinical rotations at medical school, as academic trainees have less time to complete their clinical competencies. Having a meritocratic selection process would ensure that trainees with a high likelihood of completing the SFP and using the opportunities would be allocated a spot.

Most SFPs only provide protected academic time in foundation year 2. Inspired by the current Edinburgh SFP, we propose another solution involving allotting protected academic time after completion of foundation year 1. All candidates would be allocated to foundation schools through the randomised process. All trainees in foundation year 1 would, however, have a small amount (5–10 days) of protected time to develop and write an application for a research project. The application and subsequent interview process would select the most coherent, well researched project proposals and motivated applicants, who would then be granted protected academic time in their second foundation year. In this system, those without previous experience would not necessarily be excluded, but those with significant experience would still retain an advantage. We believe this would level the research experience for foundation trainees.

Lastly, in the scenario that no meritocratic approach can be implemented, we believe the two stage application process proposed by the BMA in 2023⁹ could be an acceptable solution. This is a two stage process where the ranking used to allocate to foundation deanery is reversed when it comes to job selection, including for SFP jobs. This would give applicants who were randomly allocated to foundation schools in subjectively undesirable areas to be given more desirable rotations, including academic rotations.

The lack of consultation with the affected parties may be because the decision was made unilaterally by the NHS Health Education Bodies without the involvement of UKFPO. This is in contrast to the last

revision of the allocation system, which was based on extensive consultation with those affected by the changes.⁸ If the NHS wishes to invest in long term research capacity and talent retention, it must reconsider and revise this decision.

Provenance: not commissioned, not externally peer reviewed.

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