Investigating the career intentions and training requirements of Staff & Associate Specialist (SAS) Doctors in one Deanery

Background.
Career intentions & training needs of Staff Grade & Associate Specialist (SAS) doctors in the National Health Service (NHS) in England have not been widely investigated.
- **SAS Doctors** are practicing in a grade that is not included in a run-through training programme.
- They are experienced & senior Career Grade Doctors working within the NHS.
- They work across all specialties, both in clinical & non-clinical areas.
- Previously, staff grade doctors have focused almost entirely on service delivery.
- Training has not been part of the SAS doctor contract & often Continuing Professional Development (CPD) has not been facilitated.
- A new contract for SAS Doctors requires them to have regular appraisals whilst developing a portfolio to record their progress in the job.

Aim: To investigate whether there are any significant factors that influence career goals & training needs of SAS doctors.

Methodology
Phase 1 – Online questionnaire. All SAS (467) grade doctors in one region within the North West of England were invited to participate.
Phase 2 – One to one semi-structured interviews. Requests for participation were made via email, flyers, posters & SAS committee meetings. 68 volunteers. A random sample of 20 were interviewed from 17 different sub-specialties from 12 different NHS trusts.

Quantitative Data Analysis - All quantitative data was stored & analysed using SPSS™ 18 (PASW).
Qualitative Data Analysis - A thematic analysis approach incorporating the 4 stages of organization, familiarization, reduction and analysis. (Polit & Beck, 2009)

Summary of Survey Results
Response Rate: 53.75% (n=251),

**Gender**: Male 61.8% (n=155) female 38.2% (n=96),

**Age**: Modal age range: 36-40 years old 19.5%,(n=49)

**Ethnicity**: 51.8% (n=130) Asian, 27.9% (n=70), White British.

**Career Variables**: Very experienced group of doctors, (between 6-25 years experience).

**Time in Post**: 5+ years (n=103, 41%),

**Career Goal**: 21.9% (n=55) ‘remain at their present grade’, 37% (n=99) ‘to become a consultant’

**Gender & Career Goal**: Significant association. ($\chi^2 [4, N = 202] = 10.738, p = .030$). More women wished to remain in their present post & more men wished to become a consultant.

**Ethnicity & Career Goal**: Highly significant association ($\chi^2 [4, N = 202] = 16.979, p = .002$). More ‘white’ respondents wanted to ‘remain in their present post’ & more Asian respondents wished to ‘become a consultant’

**Professional Development**: A lack of educational supervisors was highlighted by the results, as shown below.

**Figure 1—Access to Departmental Job Planning**

Importance of Specific Professional Development Opportunities: Top up training for Article 14/CESR is seen to be most vital (27.1%, 68) & specialty specific education (26.8% 66).

Conclusions
- SAS doctors are highly experienced & keen to engage in CPD.
- Deaneries and Trusts need to tailor CPD to individual doctors.
- Further investment in CPD for SAS doctors is needed & all SAS doctors must be allocated an Educational Supervisor.

UK Issues Explained

**Deanery**: a regional organisation, in NHS, responsible for postgraduate medical & dental training.

**Article 14/CESR**: legislation giving doctors who have not completed UK specialist training the opportunity to apply for eligibility for the General Medical Council’s Specialist Register

Summary of Interview Themes.

**CPD Lack of Guidance**: Lack of formal guidance to facilitate training opportunities, discussions with colleagues, SAS members & others may improve.

**Varying trust experience**: Doctors described wide variations in terms of educational supervisors & appraisals.

**Article 14/CESR**: Requiring protection by SAS doctors from potential adversities faced in the job.

**Lack of Group Identity**: Lack of perceived support from colleagues, differences in workloads, work ethic & that of educational supervisors.

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