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**Website:** [www.mmc.nhs.uk](http://www.mmc.nhs.uk)

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Dear Doctor,

### **Specialty Training Recruitment in 2008**

On 7<sup>th</sup> December we wrote to you to describe the process for recruitment to specialty training posts in 2008. We promised to write to you again with further details and the final forecast of posts which will be available across England.

#### **1. 'Uncoupling' in 2008**

In 2007 a large proportion of specialist training places were offered on a 'run-through' basis which meant that, providing they were judged to have made adequate clinical and professional progress at the Annual Review of Competence Progression (ARCP), doctors would not need to re-apply for posts as they moved through their training years, up to the award of a CCT. However, alongside arguments that run-through training offers security and a clear career pathway for trainees, there is a clear case that it disadvantages some of them by making them make too early a choice about their chosen specialty; something which is also an important feature of the interim report of the Tooke Review, and an integral principle of the original MMC review

The MMC Programme Board have agreed that run-through training should be applied to selected specialties in 2008. Those specialties who feel it is of benefit to them can retain it, while those specialties who feel their trainees would benefit from greater flexibility can choose to 'uncouple'. In other words if you apply for a post in an 'uncoupled' specialty, you will get the benefit of greater freedom to reconsider your chosen specialty, but at the cost of having to re-apply for a training post in the future.

This means that in 2008 some specialties will offer run-through training and other specialties will 'uncouple' by offering specialty training entrants two or three years of specialty core training followed by open competition for ST3 or ST4.

Following consultation with Royal Colleges and others, the change for specialty training in England in 2008 is that there will be different training offers for different specialties, to fit the particular needs of that specialty. Some specialties will continue

to offer run-through training, while others will 'uncouple' and offer a two-year core training programme (three years for psychiatry and emergency medicine), followed by an open competition to enter specialty training at ST3 onwards (ST4 for psychiatry and emergency medicine).

For those specialties uncoupling and making core training offers to a larger pool of trainees at ST1 in 2008, the terminology for core training is CT1, CT2 (and CT3 for psychiatry and emergency medicine), as agreed with the Postgraduate Medical Education and Training Board (PMETB). These terms refer to one of the following approved training programmes:

- Core medical training
- Acute care common stem
- Core surgical training
- Core psychiatric training

The table below sets out those specialties offering run-through training and which will be uncoupled.

<b>Offer of run-through training in 2008</b>	<b>Offer with Uncoupling in 2008</b>
Obstetrics and Gynaecology	General Medicine
Ophthalmology	Anaesthesia
Paediatrics and Child Health	Psychiatry
General Practice	Occupational Medicine
Public Health Medicine	Emergency Medicine
Neurosurgery	Cardiothoracic surgery
	General surgery
Histopathology	Oral and Maxillofacial Surgery
Chemical Pathology	Otolaryngology (ENT)
Medical Microbiology	Paediatric surgery
	Plastic surgery
Clinical Radiology	Trauma & orthopaedic surgery
	Urology

Please note that part of the eligibility criteria for application to ST1 posts is that applicants should have 12 months or less whole time equivalent training, not including Foundation modules, in the specialty they are applying for. However, this does not rule out those with a greater degree of experience in other specialties from applying for these posts.

## **2. Post advertising and acceptance**

The MMC Programme Board has agreed that the **minimum** period for the advertisement of specialty training posts will be 72 hours, excluding Saturdays, Sundays and public holidays. This will mean that applicants should keep a careful eye on Deanery websites for advertisements throughout the application timetable.

On the period of time that applicants will have to accept or reject the offer of a post, trainees' representatives on the Programme Board strongly urged that the minimum period should also be 72 hours. However, after recruitment for most ST1 and ST2 level posts ends on 16<sup>th</sup> May for the August start date, NHS Trusts also need to carry out normal pre-employment checks on their new appointments for patient safety reasons, which places a restriction on the timetable. For this reason, and to maximise

the number of offers that can be made to junior doctors before 16<sup>th</sup> May, the Programme Board has agreed that applicants will have a **minimum** of 48 hours (excepting weekends and public holidays) to accept or decline the offer of a post.

### 3. The number of available places

In our 7<sup>th</sup> December letter to you, we set out indicative figures for the number of posts ST1, 2, and 3 equivalent levels.

Below are the latest forecast numbers of training places which will be available for specialty training in 2008. We must stress that these numbers will change as Deaneries agree changes in training posts. It is crucial that potential applicants keep looking at individual Deanery websites for the latest information.

When considering which posts and specialties to apply for, we urge all applicants to consider carefully the likely levels of competition involved. For example, at the end of Round One recruitment in 2007, there were over 15 applicants for every general surgical ST2 post in Mersey Deanery, but just over 3 applicants for every ST2 oral and maxillofacial surgery post in the same deanery. Considering a different location to train also makes a difference to competition ratios. At the end of Round One recruitment in 2007, for example, there was just one applicant per training post for ST2 oral and maxillofacial surgery in Northern Deanery.

You can access the most recent available competition ratios via the MMC website: <http://www.mmc.nhs.uk/pages/cr>.

The latest forecast of the total number of available posts in 2008 will be in the range of 8,900 to 9,100. This has increased from the indicative 8,400 to 8,700 range originally reported to the MMC Programme Board four weeks ago.

#### ST1 level

Table 1 shows the latest forecast number of ST1 equivalent level posts. The total number of available posts has increased from an indicative 5,800 to the latest forecast of 6,100.

<b>Table 1</b>	<b>ST1/CT1 Posts</b>	<b>FTSTA 1 posts</b>	<b>Total Indicative</b>
<b>General Practice</b>	2,200	-	2,200
<b>Specialty posts</b>	3,500	400	3,900
<b>Total ST1 level posts</b>	<b>5,700</b>	<b>400</b>	<b>6,100</b>

#### ST2 level

Table 2 shows the latest forecast posts planned at ST2 level. The number of posts has risen from an indicative 2,000 to the latest forecast of 2,070.

<b>Table 2</b>	<b>ST2 posts (ST3 for Psych &amp; Paeds)</b>	<b>CT2/FTSTA2 Posts (CT3/FTSTA3 for Psych and Paeds)</b>	<b>Total</b>
<b>General Practice</b>	30	-	30
<b>Specialty posts</b>	40	2,000	2,040
<b>Total ST2 level posts</b>	<b>70</b>	<b>2,000</b>	<b>2,070</b>

### **ST3 level range**

The indicative figures included in our letter last week indicated a range of 600 to 900 available ST3 posts over the course of 2008.

The latest forecast is that over 380 ST3 posts will be advertised in early January, with a further 165 towards the end of January. Therefore the total number of ST3 posts likely to be advertised in the January to May recruitment period is likely to be about 550.

There will be two further recruitment exercises in June and September. The Department of Health forecasts that between 200 and 400 ST3 posts may be advertised in these two later recruitment exercises in 2008, depending on the rate at which current holders of NTN obtain their CCTs and then consultant posts, so releasing their NTN.

Therefore the latest forecast of the total number of ST3 posts likely to be advertised during the whole of the year 2008 is between 750 and 950.

The Department of Health is about to publish the MMC 2008 Applicant Guide, as well as a new national website for the 2008 process ([www.mmc.nhs.uk](http://www.mmc.nhs.uk)). Once the switch has been made from the 2007 website to the 2008 website, there may be a delay of up to 24 hours whilst your particular server adjusts to the new technical location ([www.mmc.nhs.uk](http://www.mmc.nhs.uk) will remain the URL address). If you receive an error message, please be patient for a few hours or try again the next day.

These will be able to provide greater detail on the numbers of available posts by specialty and deanery, as well as detailed competition ratios on the 2008 website. We would urge you to study them carefully.

Thank you.

Yours faithfully,

Dr Mary Armitage  
Co-Chair  
MMC England Programme Board

Professor David Haslam  
Co-Chair  
MMC England Programme Board

On behalf of the MMC England Programme Board.