

Doubling the number of medical school places in England by 2029

RCPsych briefing | September 2019



Background

None of the ambitions of the *NHS Long Term Plan*¹ are possible without the outstanding staff of the NHS. However, they face unprecedented pressures from rising demand for health and care services. The workforce is now widely recognised as one of the NHS's biggest risks over the next ten years, with an increasing reliance on recruiting expensive locums and doctors from abroad, with half of new doctors in 2017/18 being trained outside the UK.²

To start to address this challenge, the government has already increased the number of medical school places by 1,500 and opened five new medical schools across England. However, medical schools are still oversubscribed with, on average, eight applications from suitable students being rejected for every application accepted.³

As mentioned in the *Interim NHS People Plan*⁴, further medical school places need to be created for the NHS workforce to continue to grow, and to ensure the workforce expansion that will be delivered by the *NHS Long Term Plan* can be sustained in the long term.

The Royal College of Psychiatrists (RCPsych) has modelled an estimated number of new medical school places required to deliver a sustainable supply of psychiatrists in the future and sustain the government's commitments over the next 10 years.

The *Interim NHS People Plan* also mentions the importance of addressing the specialty shortages in doctors. Recruitment trends in psychiatry in the past few months have been consistent, with the most recent year-on-year growth for psychiatrists at all grades being 1.7% (May 2018 - May 2019).⁵ We know that more needs to be done to meet the ambitions contained in both *Stepping forward to 2020/21: The mental health workforce plan for England*⁶ and the *NHS Long Term Plan*.

Psychiatry, more than any other specialties, is heavily reliant on doctors who have trained abroad. The numbers included in this briefing are an attempt to build the consultant psychiatrist capacity of the future as early as possible and enable a reduced reliance on psychiatrists trained overseas.

Nevertheless, we must continue to recognise the valuable contribution of international medical students to the UK and attract and retain them. Any new immigration system should allow those students to enter UK medical schools and continue to foundation training and training posts.

¹ NHS England, *NHS Long-Term Plan*. January 2019. <https://www.longtermplan.nhs.uk/>

² General Medical Council, *The state of medical education and practice in the UK 2018* <https://www.gmc-uk.org/-/media/about/somep-2018/version-one---0412pm/somep-book-20187.pdf?la=en&hash=68A613F355AD187B4B7EE7E06C34863C64E3DD58>

³ Based on information given by 27 medical schools. The Medical Schools Council, *Entry requirements for UK medical schools*. 2020 entry. <https://www.medschools.ac.uk/media/2357/msc-entry-requirements-for-uk-medical-schools.pdf>

⁴ NHS Improvement, *Interim NHS People Plan*. June 2019. https://www.longtermplan.nhs.uk/wp-content/uploads/2019/05/Interim-NHS-People-Plan_June2019.pdf

⁵ NHS Digital, *NHS workforce statistics*, May 2019. <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/may-2019>

⁶ Health Education England, *Stepping forward to 2020/21: The mental health workforce plan for England*. July 2017. <https://www.hee.nhs.uk/sites/default/files/documents/Stepping%20forward%20to%20202021%20-%20The%20mental%20health%20workforce%20plan%20for%20england.pdf>

Distribution of these new places should be allocated to medical schools with strategies to ensure the best undergraduate experience in psychiatry. In order to help medical schools develop such strategies, RCPsych will publish its *Choose Psychiatry: Guidance for Medical Schools* later in September.

Conversion rate for core psychiatry training

Increasing the number of medical students overall will have an impact on the number of doctors who will become consultant psychiatrists. In the latest UK Foundation Programme Careers Destination survey, **5.6% of foundation doctor respondents who proceeded straight on to specialty training confirmed they had been appointed to core psychiatry training.**⁷

Whilst RCPsych and Health Education England (HEE) are making considerable efforts to increase this figure, for this piece of work we assume this conversion rate will remain stable.

We need to keep in mind that many doctors take time out following specialty training. Some leave medicine for good, some work as locums and others work abroad. Whilst some of those who work abroad may be international students who always intended to leave the UK, many decide to return to the UK. The total number of non-UK students studying medicine and dentistry in the UK in 2017-18 was 10,740.⁸

The General Medical Council (GMC) conducted an analysis and found that 'around 90% of foundation trainees who have stepped out of a national training programme return to specialty or core training in the UK within three years'⁹. We have assumed that of those who start specialty training later, 5.6% will train as psychiatrists.

We have based our modelling on the conversion rate for those going straight into specialty training being replicated for all other doctors that ultimately become psychiatrists later in their career.

Recruitment ambitions set up by the government

Stepping forward to 2020/21: The mental health workforce plan for England set an objective to recruit an extra 570 consultant psychiatrists between 2017 and 2021. Between March 2017 and March 2019, 120 consultants have been added to the NHS workforce¹⁰ which means 450 consultant psychiatrists still need to be recruited to meet the plan's targets.

We know that NHS England plan to recruit 470 additional consultant psychiatrists and 80 non-consultant psychiatrists by the end of 2023/24.¹¹ We assume that NHS England will plan to recruit 740 additional consultant psychiatrists and at least 526 additional non-consultant psychiatrists by 2029 to maintain growth in consultants at around the current rate, provide necessary capacity at junior doctor level and ensure the delivery of the ambitions included in the *NHS Long Term Plan*.

⁷ UK Foundation Programme Office, Careers Destination Survey 2018.

<https://www.foundationprogramme.nhs.uk/document/2018-f2-career-destinations-survey-report> Each year UKFPO undertakes a survey of all F2 trainees to determine career aspirations and planned destinations if known. The survey received 6,407 valid responses, an 86.8% response rate.

⁸ UK Council for International Student Affairs, International student statistics: UK higher education. 15 August 2019. <https://ukcisa.org.uk/Research--Policy/Statistics/International-student-statistics-UK-higher-education>.

⁹ General Medical Council. Training pathways: analysis of the transition from the foundation programme to the next stage of training, November 2017. <https://www.gmc-uk.org/education/reports-and-reviews/training-pathways>

¹⁰ NHS Digital, NHS workforce statistics – March 2019. <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics/nhs-workforce-statistics---march-2019-provisional-statistics>

¹¹ NHS England, NHS Mental Health Implementation Plan 2019/20 - 2023/24, July 2019.

<https://www.longtermplan.nhs.uk/publication/nhs-mental-health-implementation-plan-2019-20-2023-24/>

Vacancy rate

In the final quarter of 2018/19, the rate for all medical vacancies in mental health trusts was 12.7% nationally (up from 11.4% in the same period for 2017/18), which varied from 10.0% in London to 14.6% in Midlands & East.¹²

Our modelling suggests halving the vacancy rate for both consultant and non-consultant posts over the course of the decade. We used the medical vacancy data for mental health trusts published each quarter by NHS Improvement and NHS Digital workforce data¹³ to estimate that this would mean filling 568 posts based on current vacancy levels.

Meeting the requirements of *Stepping Forward* and the *NHS Long-Term Plan* (including both the requirements to 2023/24 and an estimate for the remaining period of the *NHS Long-Term Plan*) while filling the posts based on current vacancy levels will therefore require the addition of around **1,950 consultant posts by 2029**, with those posts filled from 2017-19 accounted for.

We also estimated an additional 736 non-consultant posts between 2017 and 2029 (with 113 filled by March 2019). Those include 130 non-consultant posts (as per *Stepping Forward*) and 80 non-consultant posts (as per the *NHS Long-Term Plan*). We also added our estimated 526 non-consultant psychiatrists by 2029 as well as another 284 posts in vacancy reduction.

Retirement Rate

In order to calculate the number of medical school places needed by 2028/29, we need to consider the rate at which doctors retire from the NHS workforce.

Using data on the decades of birth for all NHS doctors¹⁴, we estimate that we could lose around **2,420 psychiatrists to retirement by 2029** (based on doctors born up to 1969 having retired by 2029, changes to retirement rules in the meantime could reduce this estimate). Whilst this data is not psychiatry-specific, the retirement rate will have a significant impact on the number of psychiatrists working in the NHS.

Losses during training

We are anticipating that, in line with the Royal College of Physician's estimate in its report advocating for a doubling in medical school places to 15,000 per year, '**the total loss from medical school to appointment as a consultant is 25%**'.¹⁵

Conclusion: how many extra medical school places do we need?

To meet the government's recruitment targets, cover retirements and reduce vacancies, we need around **4,370 consultant psychiatrists** in place over the next 10 years.

¹² NHS Improvement, Performance of the NHS provider sector for the year ended 31 March 2019, June 2019. <https://improvement.nhs.uk/resources/quarterly-performance-nhs-provider-sector-quarter-4-201819/>

¹³ NHS Improvement, Quarterly performance of the NHS provider sector: quarter 4 2018/19, June 2019. Separate RCPsych analysis of NHS Digital workforce data has found that 90% of doctors within mental health trusts are psychiatrists.

¹⁴ NHS Digital, Doctors by gender, age, ethnicity: September 2009 to 2018. 3 January 2019. <https://digital.nhs.uk/data-and-information/find-data-and-publications/supplementary-information/2019-supplementary-information-files/staff-numbers/consultants-and-doctors/doctors-by-gender-age-ethnicity-september-2009-to-2018>.

¹⁵ The Royal College of Physicians, Double or quit: calculating how many more medical students we need. 22 June 2018. <https://www.rcplondon.ac.uk/news/double-or-quits-calculating-how-many-more-medical-students-we-need>

Based on the current conversation rate, if the number of medical students per year were to remain constant after its rise to 7,500 in 2020/21, a total of 3,142 medical students would ultimately be consultant psychiatrists.

Therefore, we need to double the number of medical school places from 7,500 to 15,000 to deliver a sustainable supply of psychiatrists.

We suggest the government to expand the number of medical school places to 9,000 by 2022/23, and then create 1,000 places per year. This would ultimately lead to a total of **4,497 medical students** becoming consultant psychiatrists based on the current conversation rate.

While this will not enable us to meet the timeframe set up by the NHS Long-Term Plan, it will put the long-term workforce planning on a sustainable footing.

Caveats

There are a few caveats to consider when considering those estimates.

- Our current retirement number is based on all doctors aged 60 and beyond retiring by 2029. Changes to retirement rules could reduce our estimate.
- Brexit introduces a new level of uncertainty for EU doctors, NHS employers and those thinking of coming to the UK. The GMC has been working closely with the four UK health departments to minimise any disruption to the UK workforce. Based on the information currently available:
 - The registration status of the majority of doctors from the EEA and Switzerland who already hold registration with the GMC will not be affected when the UK leaves the EU.
 - If the UK and the EU agree a deal, we will enter a transition period until 31 December 2020. There should be no change to how the GMC registers doctors for the duration of the transition period.
 - In the event of no deal, the GMC has been working with the four UK health departments so that doctors with relevant European qualifications¹⁶ should be able to register with them in a timely and streamlined way.¹⁷

How medical schools can raise medical students' interest in psychiatry

Choose Psychiatry: Guidance for Medical Schools, to be published by RCPsych later in the autumn, has been developed to give advice to medical schools on how to provide a high-quality experience of psychiatry to their students, based on examples of best practice. It is designed to be flexible so that medical schools can use it to enhance the activities they already provide.

Based on our project findings, we encourage all medical schools to:

1. Consider revising their undergraduate curriculum in psychiatry to ensure it reflects what we can learn from medical students' experiences; and integrate psychiatry courses into the curriculum as widely and as early as possible.
2. Work with placement providers to organise high-quality undergraduate placements in psychiatry based on what we learned from medical students' experiences.

¹⁶ Qualifications listed under Annex V of the Recognition of Professional Qualifications directive.

¹⁷ General Medical Council, Brexit – information for doctors. 18 April 2019. <https://www.gmc-uk.org/news/news-archive/brexit---information-for-doctors>.

3. Develop and support a cohort of leaders within psychiatry taking a major role in undergraduate teaching and other educational initiatives.
4. Design and implement a range of enrichment activities to enhance students' exposure to and experience of psychiatry.

Checklists of suggested actions to achieve each recommendation are included in the guidance.

The role of the government

The government must put a transparent process in place to ensure any new medical school places are allocated to those medical schools that have plans in place to raise students' interests in shortage specialties, including psychiatry.

In addition, the government will need to commission adequate and appropriate foundation and specialty training posts to support the increased cohort of medical school graduates. We welcome the HEE's Foundation Programme Review and its proposal to improve options for those interested in psychiatry with new longitudinal psychiatry placements.¹⁸ We look forward to working with HEE to develop a Foundation Priority Programme specifically designed to attract and retain trainees in psychiatry.

Contact

The College would be happy to provide further detail on any of the information contained within this paper and would welcome feedback on these proposals. We recognise this is an iterative process and, as such, we will be refining our recommendations over the coming months. You can find the version number and date on the front cover of this briefing.

For general information about this briefing and the data analysis, please contact Sam Hunt, Data Analysis and Research Manager: samuel.hunt@rcpsych.ac.uk.

For information about *Choose Psychiatry: Guidance for Medical Schools*, please contact Zoé Mulliez, Policy and Campaigns Manager: zoe.mulliez@rcpsych.ac.uk.

¹⁸ Health Education England, The Postgraduate Medical Foundation Programme Review, July 2019. <https://www.hee.nhs.uk/sites/default/files/documents/FoundationReview%20FINAL%20for%20web.pdf>