Royal College of General Practitioners and Warwick Medical School Annual Education, Research and Innovation Symposium 18th May 2017 Abstract Submission Form

PRESENTER'S DETAILS	Session B. Workforce
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Category Education Project	
PRESENTATION DETAILS	
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What's the problem you are tackling?

Few applicants and entrants to medical school come from socially disadvantaged backgrounds (e.g. poorly performing schools, deprived local neighbourhoods, and non-professional/managerial families).

Difficulty in recruitment and retention of GPs has a long history in the UK. Currently in the East Midlands there is an acute crisis, with low recruitment rates to training schemes and significant vacancies. Recruitment of local resident medical students is one step to address this problem since evidence shows that a substantial proportion of locally resident students return to their area of origin after qualification.

How did/will you do it?

Funding from Health Education East Midlands enabled the development of work experience placements for year 12 pupils from socially disadvantaged backgrounds. In the first cycle, 20 young people participated, recruited via schools performing below average and meeting widening participation (WP) criteria. The placement comprised a high intensity, high impact week modelled on the HEE Work Experience Toolkit, with an initial induction day, followed by three structured days in general practice, and a final day of reflection back in the medical school. All participants consented to follow-up. Evaluation consisted of self-report questionnaires, focus groups carried out by EMWPEP, and telephone follow-up.

What did you find?

Participants came from WP schools, the majority were women, and two thirds lived in deprived neighbourhoods. After placement they reported improvement in their understanding of general practice, knowledge of medical school admissions, confidence in new situations, communicating with professionals, and teamwork. They set 59 personal learning objectives and fulfilled 81% of them. They reported learning about themselves too: confirmation of career plans, personal strengths and shortcomings, and confidence. Feedback from practices was also uniformly positive, with no difficulties reported and all practices happy to offer placements again.

Follow up in autumn 2016 showed that the majority had applied to medicine courses or were planning to do so after a year out.

Why does this matter?

Initial experience was positive and the structure of placements sound. Work is now in progress to upscale the number and spread of placements, particularly in Lincolnshire, allied to initiatives to attract school pupils to general practice and provide schools with information and guidance about medical school admissions.

Attraction and recruitment to general practice are complex and multifactorial processes. Success in improving the image and understanding of family practice, as in the current project, will undoubtedly need to ally with the changes occurring in medial school placements and improvements in the conditions under which GPs work in the UK to produce sustained recruitment and retention in primary care.