

Prof. Tom Lawson and Dr. Mike Masding

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Wednesday 9 December 2020

Removal of Educational Achievements

Dear Prof. Lawson and Dr. Masding,

The BMA's Medical Students Committee (MSC) and Medical Academic Staff Committee (MASC) have seen the recent announcement to remove points for Educational Achievements (EAs) from the UK Foundation Programme Application Score (FPAS). As you will be aware, throughout deliberations on this particular topic, the BMA MSC has been clear in its fervent opposition to such removal of EAs from the FPAS at every stage of discussion.

The MSC attends the UK Foundation Programme Office's Recruitment Delivery Group on behalf of the BMA and has been aware of these proposals since February 2020. The opposition the MSC have presented consistently to refute this proposal is based on feedback from a wide caucus of students across many years, and has been unambiguous in its message that this change is not made in the interest, nor to the benefit of students. The recent reaction from the current student cohort to this change has been loud and uncompromising and shows that the MSC has always, and continues to, accurately represent the feelings of its constituents on this issue.

The MSC has been disappointed by the timing of the announcement, as we were informed that the decision would be made later in 2020 following medical recruitment governance processes. However, the decision to make this change has been made outwith these governance processes. We believe that the announcement was delayed because of this need, however we are disappointed that this move was made despite commitments about processes.

Our position is that removal of EAs from FPAS shows a disregard for the academic excellence, success and drive that students demonstrate on the journey to complete their primary medical qualification. Intercalated degrees provide important opportunities for medical students to gather differing perspectives and skills from alternative degrees and contributing to publications gives early tastes of research and academic processes that will benefit students for their long medical careers that still lie ahead of them.

Sharing this concern, MASC consider that this will be a real setback to widening experience, diminishing significantly the student opportunity to do more in-depth study before they are plunged into the long hour, increasingly intensive clinical training and postgraduate examinations. If opportunities for additional academic experience are de-incentivised in this way, the committee feels strongly that this will

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cause long term damage to the enquiring approach that we all believe needs to be fostered in future doctors.

The proposal is due to be introduced for doctors graduating from 2023, which will still leave significant groups of medical students without credit for activities that they are committed to undertaking, or have undertaken. This date of re-introduction must be reconsidered immediately, as many students have already committed time and money to intercalated degrees and research based on their knowledge of the application process prior to this announcement. For students from widening participation backgrounds in particular, the impact of discounting the financial and time commitments already undertaken cannot be overstated. Medical schools give students the option to intercalate at different points in their degrees, with some students deciding before even becoming medical students - choosing six year courses with guaranteed intercalation.

We understand that the rationale for this change is to reduce inequity in the system. The BMA has been and will continue to support change which achieves this aim. We are, however, unaware of evidence other than opinion and anecdote that the EA is discriminatory. Furthermore, this change disadvantages student from all backgrounds who, in good faith, sought to legitimately enhance their prospects. A greater analysis of the data should be presented in order to demonstrate the benefit of such a change, modelled on multiple years of previous applicants, so that discourse on this proposal can be properly informed. As such, the BMA is asking for the UKFPO to produce and publicly share an analysis of the impact the removal will have, modelled on application information from the previous three years.

The beneficiaries of retaining EAs will be the patients that these future doctors will treat, due to the broader understanding or academic interest developed from activities undertaken outside of their medical degree. We believe that removal of EAs will narrow the breadth of experience and interest students bring with them to their future career, running contrary to the move to generalism that has recently been articulated in Health Education England's [Future Doctor publication](#).

The BMA strongly supports moves to Widen Participation in Medicine, however widening participation is a complex and important area of policy. As such, any changes to the system should be clearly and comprehensively evidenced based and made transparently for the scrutiny of both stakeholders and applicants.

We, therefore, call on you to withdraw this proposal, at the very least pending further consideration of the evidence, as well as properly considering the views the BMA's constituent committees and other UKFPO stakeholders.


Yours sincerely,



Becky Bates
Co-chair, Medical Students Committee



Tinaye Mapako
Co-chair, Medical Students Committee



Professor David Katz
Acting Chair, Medical Academic Staff Committee