

Core surgical training statement

3 February

In the last month many junior doctors have raised problems they have experienced with the current Core Surgical Training applications with the BMA's Junior Doctor Committee (JDC), ASiT and BOTA. These have all related to the verification of self-assessments and range from inconsistent, subjective scoring that lacks transparency, to changing of the scoring criteria after submission deadlines, and unclear guidance for both trainees and assessors.

The JDC believes strongly that such experiences fall short of the agreed core principles of transparency, consistency and equity that have been discussed throughout recruitment planning meetings and raise issues about the validity of the current recruitment system.

Last week we met virtually with Health Education England (HEE) and Medical and Dental Recruitment to Specialties (MDRS). We were joined in the meeting by leading members of the Association of Surgeons in Training (ASiT). Together, we proposed the following:

- That the **appeals window for applicants be extended by at least 1 week** (which we are glad to see did occur)
- **An urgent clarification on how consistently evidence has been counted in or out**
- A short life working group, in **a mirror of the process such as that undertaken by the IMT recruitment group**, to engage with key stakeholders including trainee groups (ATDG, ASiT and JDC, for example), **to clearly define, formalise and explain the evidence requirements** ahead of remarking of all contested scores.
- **A resubmission window** to be introduced to allow applicants to upload evidence meeting any specific requirements that were not originally stated and are upheld in the review or that was missing but already exists (such as is the process in the HEE special circumstances panels)
- **Communications to all applicants informing them of the ability to appeal**



Although the appeals deadline was extended and communicated to all applicants – which we welcome – our other proposals were unfortunately rejected by HEE and MDRS, due to a belief that the existing appeals process will mitigate for any issues, and that there have been no systemic issues with the process. They also wished to mimic the normal recruitment process in the virtual environment, and so rejected the idea of allowing any supplementary uploading of material to support an appeal. They insisted that the information provided to applicants had been sufficiently clear, and that issues with evidence were due to the documents uploaded, not their interpretation by the panels, which they believe to have been consistent throughout the process. We feel this represents both a failure to hear trainees concerns and a missed opportunity to use the virtual assessment process to deliver improvements over traditional methods. We believe that self-assessment cannot be used unverified in isolation for recruitment at any stage: all applicants should have their evidence verified before long-listing cut-offs are applied to ensure a consistent and equitable process for all applicants.

Whilst we understand running training recruitment systems and processes are challenging in the current pandemic, more flexibility, thought and planning are needed to ensure they are delivering an equitable and transparent system for all trainees. Trainees are under considerable pressures, this year more than ever, juggling intense clinical work, personal life upheaval and the mental load of the pandemic; they should not have to contend with more uncertainty and system-driven stress.

We continue to urge HEE and MDRS to review this situation again and reconsider the experience of our members to ensure that all junior doctors receive equal, transparent and reasonable treatment during this process. We welcome with ASiT the pledge from the recruitment team to work proactively and constructively with trainee groups (including the BMA and ASiT) on future systems, although we regret that many of our proposals were not acted on in this instance.

Any BMA member disadvantaged by these issues can contact the BMA on: **0300 123 1233**

Any ASiT member can contact info@asit.otg.