

Debate & Analysis

Raising the profile of academic general practice to our medical students

RECRUITMENT TO AND PERCEPTION OF GENERAL PRACTICE

General practice is struggling to recruit and retain high-quality trainees. There is a national target to increase recruitment to general practice in order to create 5000 extra GPs by 2020.¹ However, the attractiveness of the specialty has fallen relative to hospital practice.² Currently only 15.3% of doctors completing foundation training are appointed to GP training programmes.³ Reasons for this are multifactorial but one postulated influence is students' misperception that general practice is not a prestigious or academically challenging career choice.⁴ National studies support this concept: the recent 'Destination GP' survey jointly led by the Royal College of General Practitioners (RCGP) and the Medical Schools Council (MSC) found that only 3% of medical students associated general practice with being intellectually challenging.⁵ It has been acknowledged that correcting this misperception and raising the profile of academic general practice among medical students is vital in order to attract high-quality doctors and potential future educationalists and researchers into general practice, and we offer some consensus-based and evidence-based suggestions.

The Wass report *By Choice – Not by Chance* was commissioned by Health Education England to support medical students towards careers in general practice.⁶ The report found that students perceive that the specialty fails to offer the variety of academic challenge that they aspire to. The report made suggestions to support institutions with raising the profile of academic general practice. These included making academic training opportunities in primary care more accessible, ensuring that all students have access to scholarly activity and supervision by primary care leads, and raising the profile of senior academic GP leaders.

PROPOSALS FOR CHANGE AND BARRIERS IN THE UK

A recent international systematic review identified five interventions that are successful in encouraging careers in academic medicine:

- formalised postgraduate training programmes;

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- postgraduate funding;
- undergraduate interventions;
- mentoring; and
- institutional change.⁷

An American study looked at why trainees in family medicine do not choose academic career pathways, finding that lack of readiness or mentorship was the most common barrier to pursuing an academic career.⁸ This would support the recommendation to ensure that students have access to supervisors and supervision, and to extend it to postgraduate trainees.

Currently, in the UK, academic experience is not seen as important in applying for general practice training. The application form does not include a field for publications and academic activity. GPs in medical schools often teach communication skills and other more peripheral topics rather than 'academic' subjects, and this has been misportrayed by students as suggesting that GPs are therefore not academic.⁴ There are few academic GPs relative to other specialties, with only 6.5% of clinical academics being GPs in the UK,⁹ and GP educators often do not identify themselves as academics. Moreover, once doctors embark

Box 1. Proposals to raise the profile of academic general practice at Newcastle Medical School

Problem	Suggestion	Responsibility
Students are not exposed to academic GPs	Increase exposure by increasing the presence of academic GPs within the institution	Medical schools
GPs in medical schools tend to teach communication skills	Create opportunities and encourage GPs to teach academic subjects	Medical schools
Lack of intercalation opportunities in academic general practice	Develop these opportunities and advertise them to medical students	Medical schools
GPs tend to view themselves as 'not academic'	Encourage GP teachers to promote the academic side of their role and to apply for honorary status at universities (for example, as clinical lecturers)	GP teachers
Academic experience is not seen as important in applying for GP training, evidenced by the fact that there is no space on the application form for academic achievement	Add a section to the application form on academic experience/publications	RCGP
GP trainees are not encouraged to add academic achievements to their ePortfolio or to celebrate these achievements	Add a specific section for publications/academic activity Reward GP trainees who undertake academic work	RCGP
Lack of flexibility in GP training for academic opportunities	Raise awareness of academic opportunities, work with the training programmes and Health Education England to deliver more of these opportunities	GP training programmes

“The input of GPs in delivering teaching throughout all years of medical school is recognised as important, many institutions are increasing their number of GP teaching fellows, and both the fellows and more senior GP educators are being encouraged to teach intellectually challenging subjects ...”

on GP training they are not encouraged to record academic opportunities on their ePortfolio, they are not rewarded for academic achievements, and there are very few academic training posts available.

IMPLEMENTING THE PROPOSALS

In response to the Wass report, 14 leaders of GP teaching at UK medical schools responded to a request to outline their plans to implement the proposed areas for change. Collated responses demonstrated that there was a range of strategies to raise the profile of academic general practice to medical students across the institutions. A common theme was that academic training posts in general practice were seen as valuable and that these opportunities appear to be increasing (for example, as academic clinical fellows or innovative training posts). The input of GPs in delivering teaching throughout all years of medical school is recognised as important, many institutions are increasing their number of GP teaching fellows, and both the fellows and more senior GP educators are being encouraged to teach intellectually challenging subjects and to increase the time they spend teaching students.

Opportunities to undertake electives, summer projects, and student-selected components linked to academic primary care are being made more widely available, and funding to enable students to attend conferences and present their primary care research with prizes for scholarly activities in this field are proposed by GP teaching leads as an incentive to encourage more academic activity. Some universities offer higher degrees in primary care and support access to doctoral-level fellowships. Most medical schools suggested that the academic contribution of GPs needs to be recognised within institutions and some are having success, evidenced by GP academics holding senior positions within the medical school. One institution suggested that strengthening links with both the Society for Academic Primary Care and the RCGP would be helpful in raising the profile of academic general practice.

In addition to asking GP leaders their plans for raising the profile of academic general practice at their institutions, we convened a ‘think-tank’ meeting at our institution including experienced and inexperienced academic GPs, academic GP trainees, and medical students undertaking a student-selected component in academic general practice. The group proposed several interventions to help raise the profile of academic general practice (Box 1).

CONCLUSION

Medical students form opinions on careers based on their experiences during medical school. If the majority of contact they have with GPs occurs through the teaching of non-academic topics such as communications skills by educators who do not hold senior positions within the university, or in practice when little time is available for research due to clinical workload, it is unsurprising that they do not perceive general practice to be an academic career. It is essential that general practice attracts high-quality individuals with the potential to become academics in primary care where research and education are of huge importance. We hope the suggestions offered from a variety of interested parties will go some way to supporting changing perceptions of our medical students and increase awareness of academic career pathways in general practice. Some of these initiatives were implemented prior to publication of the Wass report and it appears that the report has been a helpful stimulant to develop existing initiatives as much as an opportunity to initiate new strategies. We would recommend urgent research to evaluate the success of these interventions and to explore further students’ understanding of the academic nature of general practice.

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