



Royal College  
of Physicians

# Medical CCT classes of 2019 and 2020



In partnership with the Federation of the Royal Colleges of Physicians  
of the United Kingdom

# Introduction

This short report summarises the results of our twelfth and thirteenth surveys on the experiences of and outcomes for certificate of completion of training (CCT) holders within a year of gaining their CCT. Physicians in 30 medical specialties in the UK who gained their CCT during 2019 and 2020 were asked about their current working situation, experience of training and transition to a consultant role.

This unique annual survey is a collaboration between the Royal College of Physicians' (RCP) Medical Workforce Unit and the Joint Royal Colleges of Physicians Training Board (JRCPTB) and is carried out on behalf of the three royal colleges of physicians of the UK. It has monitored changing outcomes for CCT holders since 2009.



## Demographics and current work situation

22%



A total of 2,108 CCT holders were contacted (1,211 from the class of 2019 and 897 from the class of 2020) and we received 471 completed surveys (22%). There were no significant differences in terms of age group, gender or speciality between those who replied and the whole cohort.

69%

The number of CCT holders in substantive consultant posts was 69%, compared with 71% in the class of 2018 survey.

52%

52% of respondents were women and 48% were men. All specialties were represented, with the highest number of responses from geriatric medicine, gastroenterology and respiratory medicine.

94%

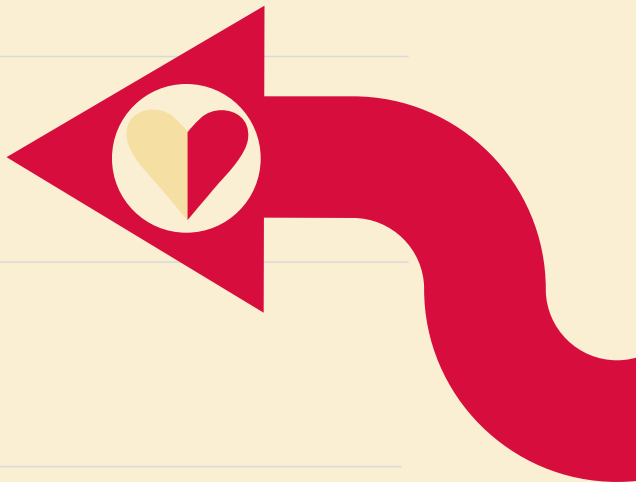
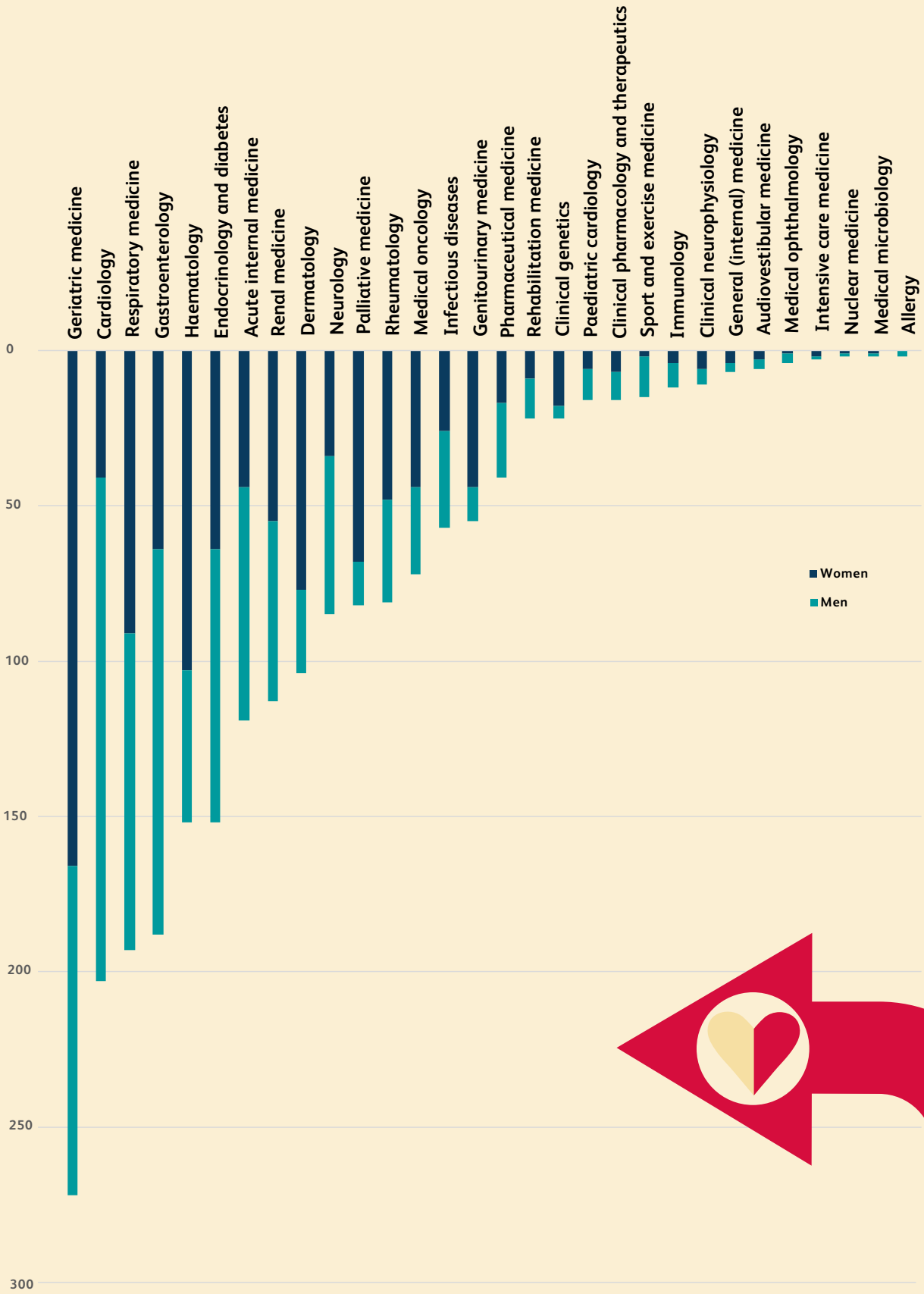
94% of respondents were UK citizens and 80% had graduated in the UK. Of the 20% who graduated outside the UK, the majority (57%) had graduated from countries in Asia.

12%



12% reported that their trust had a specific new consultant programme, a drop from 25% in 2018.

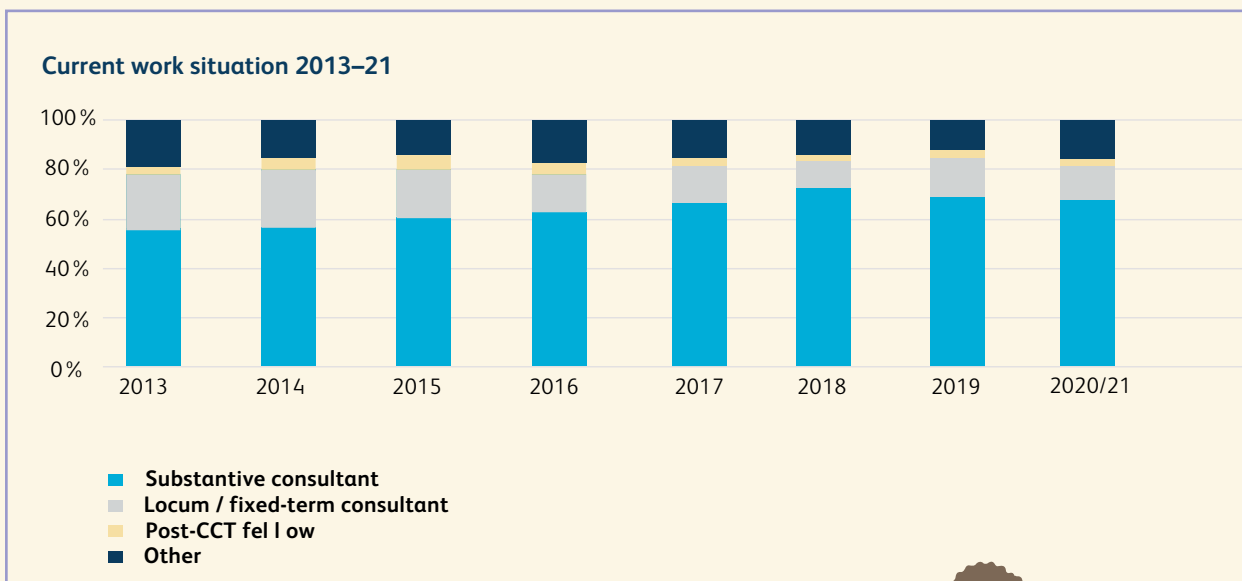
Number of CCTs awarded by specialty and gender



# Training

- > 56% of respondents dual accredited in general internal medicine (GIM) compared with 54% in the previous survey. Of these, 87% felt they were trained very well or fairly well. Only 1% felt that they had been trained poorly in GIM. As in previous surveys, the majority (93%) felt that they were trained very well or fairly well in their specialty.
- > 68% of respondents had acted up for post-take rounds or in a consultant role in their hospital. Once again, the majority (95%) said that they would recommend acting up to trainees, compared with 97% in the previous survey.
- > 27% of respondents had trained less than full time (LTFT) at some point, compared with 20% in the previous survey. 95% recommended training LTFT, the main reason being a better work–life balance.
- > 68% of those who trained LTFT at some point were aware that when starting a consultant post their pay threshold would need to be adjusted. This is an improvement compared with the last survey, when only 50% said they were aware.

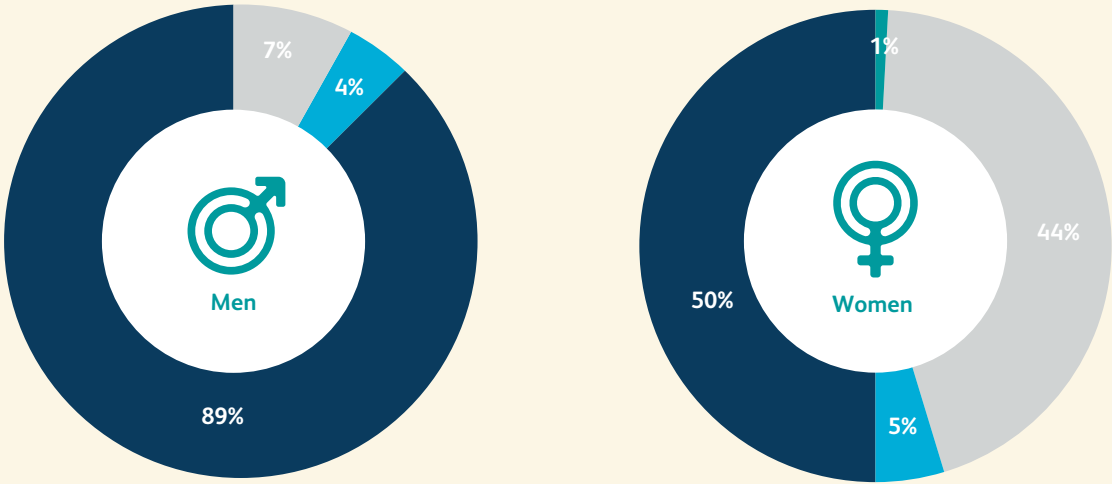
**56% of respondents dual accredited in general internal medicine.**



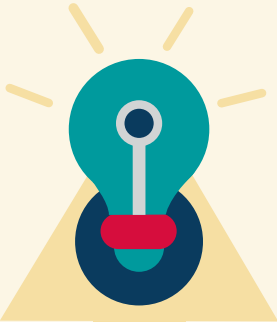
# Shortlisting and appointment success rates

- > 82% of respondents had applied for a consultant post, with a quarter (26%) applying outside their deanery. Of those who are now consultants, the majority started in post within 2 months of gaining their CCT.
- > 32% of respondents were working LTFT or flexibly. 85% of them said that it was very or quite easy to have their LTFT or flexible working arrangement approved by their new department.
- > In 2020 we said we had analysed the data from the past 8 years of surveys and found consistent evidence of trainees from ethnic minority backgrounds being less successful at consultant interview. This is despite adjustment for potential confounding factors. That work will be published soon.
- > In this survey, respondents of White ethnicity applied for a mean of 1.14 posts compared with 1.38 for all other ethnic groups. 88% of White respondents received an offer after interview compared with 72% for all other ethnic groups.
- > The response rate was lower this year (22%) and the difference between groups is small and not statistically significant. But while there has been a year-on-year increase in the number of offers made after interview, there does still appear to be a difference according to ethnicity.
- > We will follow these results closely, particularly given the publication of the [NHS Medical Workforce Race Equality Standard](#). Indicator 2 – the relative likelihood of White applicants being appointed from shortlisting compared to BME applicants – was included as a direct result of this work.

Working pattern of men and women who have progressed to consultant posts



- 10 or more PAs (majority of work between 9am–5pm Monday–Friday)
- Fewer than 10 PAs
- 10 PAs delivered flexibly across the week in / out of hours (eg 3 long days)
- Other



## Transition from trainee to consultant

- > 41 % of respondents said they found transition from trainee to consultant very or quite easy, while 38 % found it neither easy nor difficult. The main areas of difficulty were service development, patient administration and COVID-19.
- > In terms of their personal wellbeing, 75 % of respondents said they felt very or quite prepared to take up their consultant post. 13 % said they felt a little unprepared.

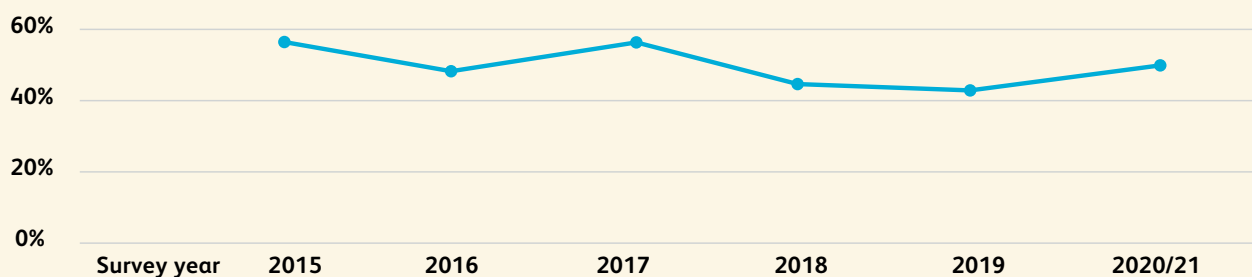
## Support in a new consultant post

- > Only 49 % of newly appointed consultants were offered a mentor or equivalent. Of those, 83 % took up the offer and 79 % found it helpful.
- > Only 28 % had a specific new consultant induction when they started in post. Inductions were mainly delivered by the trust or specific department. This is lower than the classes of 2018 (36 %) and 2017 (33 %).
- > Only 12 % of respondents said their trust had a new consultant development programme, while 49 % didn't know. 38 % said their trust didn't have a programme and the majority (87 %) felt it would have been beneficial.

Top five difficult areas on transition from trainee to consultant

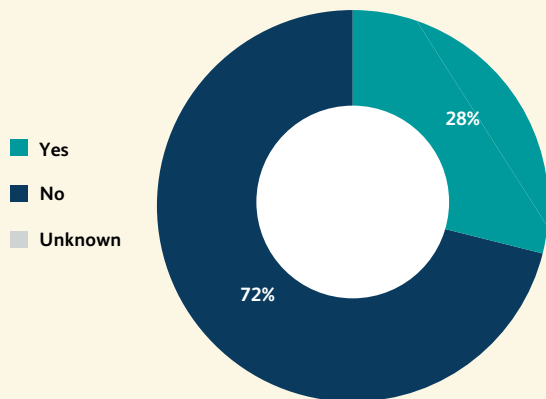


Doctors offered mentor/equivalent support as a new consultant

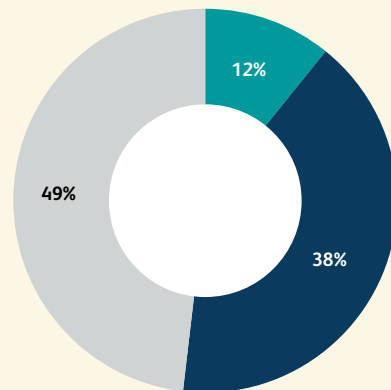


- > Respondents said they would want the following topics covered in a new consultant development programme: job planning support and review, appraisal guidance, mentorship programme, specific formal induction for new consultants and guidance for managing complaints, support for service development.
- > 60% had a job planning meeting before they started in post (compared with 64% in the class of 2018 survey).
- > The top three areas where respondents wanted support from the RCP were mentoring, support with appraisal and revalidation, and facilitating a network for newly appointed consultants.

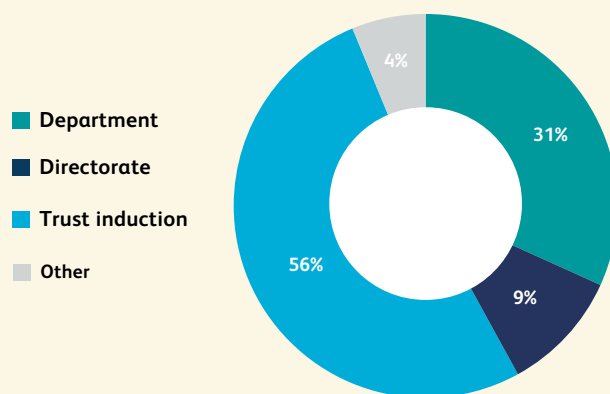
**Only 12% of respondents said their trust had a new consultant development programme.**



Doctors who were offered a new consultant induction



Trusts that have a new consultant development programme



Who delivers the new consultant development programme?



## Key points

69%



In summary, of the 471 new post-CCT physicians who responded to the survey, 69% are now in substantive consultant posts, the majority within the deanery in which they trained. The majority felt prepared for their consultant post, that they were well-trained in their specialty and, for the 56% who dual accredited, well-trained in GIM too.

32%

The greater acceptance of different working patterns is illustrated by the increasing number who are working LTFT as new consultants (32% in this survey) and the relative ease with which they had that working pattern agreed.

41%



Unfortunately, little progress has been made with the introduction of local trust support for new consultants. New consultant induction, mentoring and early job planning are key to embedding a new consultant in their role and supporting their wellbeing. Only 41% of new CCT holders found the transition from trainee to consultant easy; we should aim for this to increase substantially in future.



**Only 41% of new CCT holders found the transition from trainee to consultant easy.**

A large yellow graphic of a curved arrow pointing left, with a person running inside it. The person is wearing a blue shirt and dark pants, and is running towards the right. Two blue arrows are positioned in front of the person, pointing to the right.

**Find out more** and read  
previous survey reports

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