

A study on the attitudes of Foundation doctors in Malta towards general practice and their experience while working in the specialty

Dr Marilyn BALDACCHINO and Dr Jurgen ABELA

ABSTRACT

Introduction

A substantial number of Foundation year (FY) doctors have a three month rotation in family medicine at the health centres in Malta. The aim of the study was to understand the factors that influence FY doctors' attitudes towards general practice (GP) and the potential reasons why these doctors would choose a career in GP.

Method

This consisted of a cross-sectional questionnaire study carried out with FY doctors in Malta. The online server Google Forms was used to collect data and manage the questionnaires. Data was extracted to Excel 2010 with which it was analysed.

Results

Over the one-year study period 61 FY doctors had a GP rotation. The questionnaire response rate was 54%. For 72.7% of respondents, choosing a rotation in GP had been a priority; of these, 88% would consider a career in GP but it was the preferred career choice for only 50%. Sixty-nine point six per cent of doctors gave a very positive rating (more than 7 out of 10) of their experience at health centres, and 78.8% experienced a positive change in attitude towards the specialty of family medicine after this rotation. The rotation was rated as having the greatest influence on career choice. Quality of life was the most popular factor attracting doctors to GP. Lack of respect towards general practitioners and the

challenge of managing clinical uncertainty with patients in family medicine were the two main factors which discouraged doctors from such a career.

Conclusion

General practice is a popular specialty in Malta and the Foundation rotation in GP was found to be one of the main factors influencing career choice. In view of this, it should be ensured that during the rotation doctors get a complete experience of general practice, which is a true reflection of what the specialty entails.

Keywords: general practice; attitude; career choice.

INTRODUCTION

After graduation from medical school, newly qualified doctors in Malta have to complete the 2-year Foundation Programme before starting specialty training. The Foundation Programme exposes doctors to different specialities in a hospital-based as well as primary care environment, during which they get hands-on training while being supervised (Foundation Programme, 2013). This gives doctors the opportunity to experience different specialities and discover the areas which they would be more inclined to pursue.

In Malta, general practice is one of the specialities attracting a great number of applicants on a yearly basis for its specialization programme. This is in contrast to the situation in the UK, where general practitioners (GPs) are referred to as a 'scarce resource' (Majeed, 2017) with an ongoing campaign to attract more doctors to the speciality

(NHS UK, 2018).

The main aim of the study was to understand the factors that influence Foundation doctors' attitudes towards general practice (GP) and the reasons why these doctors would choose a career in GP. Understanding these factors is especially important when working to attract more trainees and improving the experience of doctors and trainees in the speciality.

Objectives

The objectives of this study were:

- i) To understand the factors that influence Foundation doctors' attitudes towards general practice.
- ii) To understand the reasons why doctors would choose a career in general practice.
- iii) To evaluate the experience of Foundation doctors during their GP rotation and use the results obtained to provide recommendations for improving their experience while working at health centres in Malta.

METHOD

Data collection

This consisted of a cross-sectional, mainly quantitative, questionnaire study carried out with Foundation Year 2 (FY2) doctors in Malta who started a general practice rotation between July 2017 and July 2018. An email explaining the objectives of the study, with the link to the online questionnaire, was sent to all the FY2 doctors after

completion of their rotation in GP. The questionnaire was completely anonymous. Emails were sent through the gov.mt mail server and a reminder email was sent to all doctors after one week. The online server Google Forms was used to collect data and manage the questionnaires.

The questionnaire was devised based on themes emerging from a literature review of similar studies carried out with medical students and junior doctors in the UK (Henderson, Berlin and Fuller, 2002; Merrett, et al., 2017; Wiener-Ogilvie, Begg and Dixon, 2015). The questionnaire was reviewed by two independent authors, who were GP trainees, and suggested modifications were considered while preparing the final version of the questionnaire.

The questionnaire consisted of the following main sections:

- i) Demographic details.
- ii) Questions about the experience of the FY2 doctor during the GP rotation and whether this placement changed the individual's ideas or attitudes towards general practice. 'Free-text' space was provided for doctors to further explain their reply to this question.
- iii) Question about current preferred career choice, and selecting from a provided list of factors that will influence this choice.
- iv) Question about factors that would make the FY2 doctor consider choosing a career in general practice.
- v) 'Free-text' space was provided at the end of the questionnaire for any comments or suggestions.

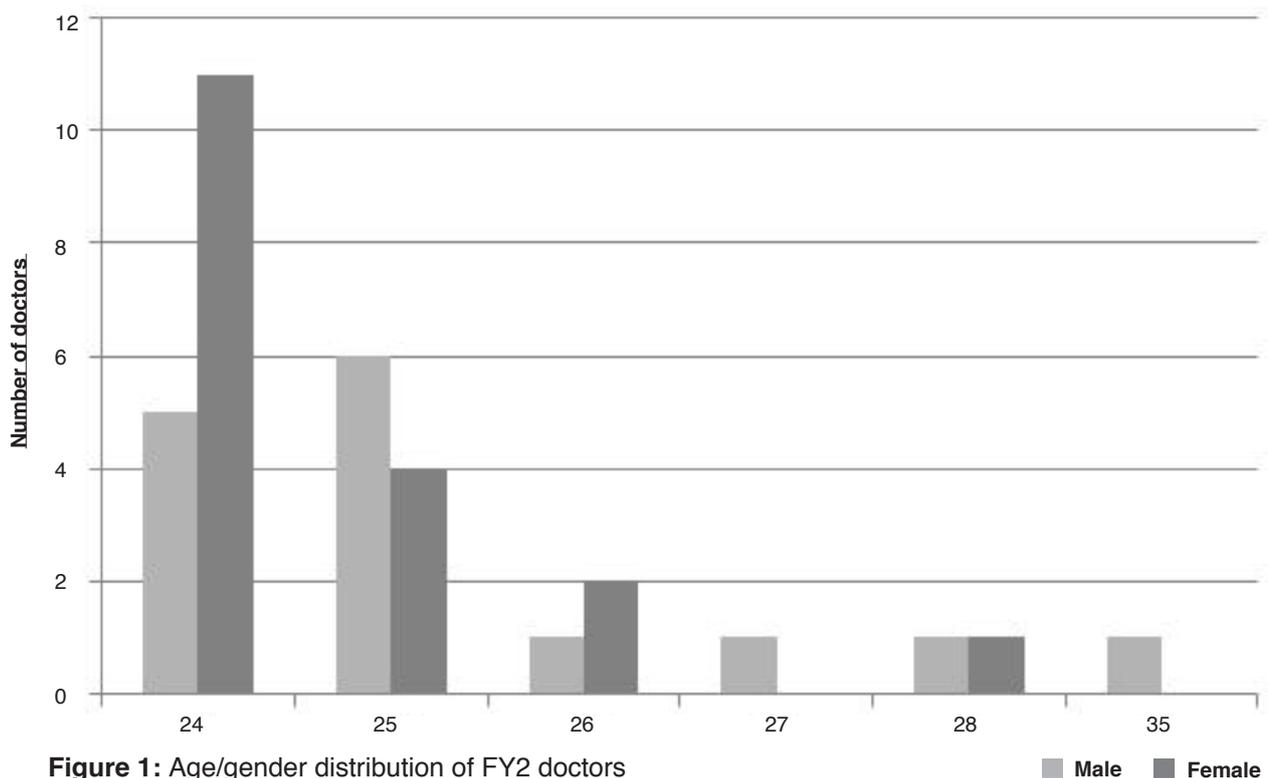


Figure 1: Age/gender distribution of FY2 doctors

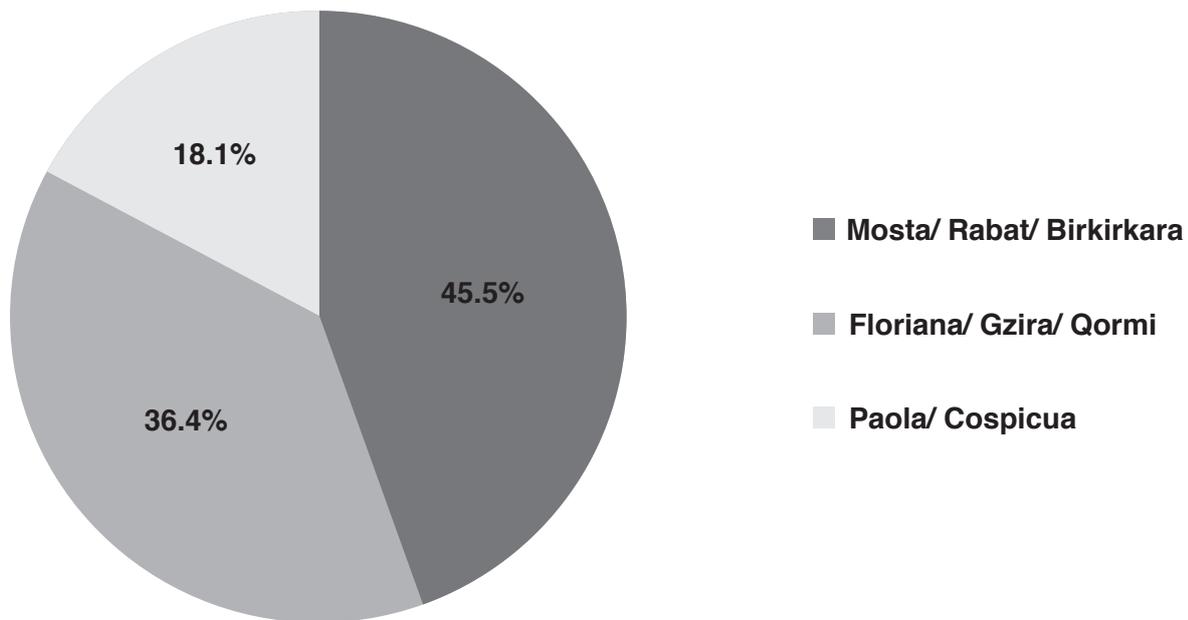


Figure 2: Percentage of responses by area of FY2 rotation

Data analysis

Data from the questionnaire on Google Forms was extracted to Microsoft Excel. Subsequently data analysis was carried out using Microsoft Excel 2010. In view of the small sample number, no advanced statistical techniques were used to analyse the data. The qualitative section of the questionnaire was analyzed using Thematic Analysis.

Study approval

This study was approved by the Department of Primary HealthCare in Malta and by the Data Protection Officer of the Department. Approval was also obtained from the Malta Foundation Programme Training Directors.

RESULTS

Basic demographic details

Over the one year period that this study was being carried out, 61 Foundation Year 2 doctors had a general practice rotation. Of these, 33 (54%) responded to the online questionnaire which was sent to all the doctors.

Fifty-four point five per cent of doctors who responded were females and 45.5% were males. A summary of the age/gender distribution of the FY2 doctors is reproduced in Figure 1. Most doctors had been students of the University of Malta, with only 15.2% coming from other universities.

General Practice FY rotation

During their rotation in general practice Foundation doctors are assigned to a clinical supervisor, who is a qualified GP, and work in one of the three following regions:

- i) North region: Mosta/Rabat/Birkirkara;
- ii) Central region: Floriana/Gzira/Qormi and
- iii) South region: Paola/Cospicua.

Figure 2 shows the percentage of responses from doctors working in the different health centre areas. Forty-five point five per cent were doctors who worked in the North region, followed by 36.4% in the Central area and 18.1% in the South.

For 72.7% of doctors, choosing a rotation in general practice was a priority and they had actually made sure that it would be one of their rotations for FY2.

When asked to rate their overall experience in general practice, a Likert score was presented with 1 signifying a 'poor' experience and 10 an 'excellent' one. A very positive rating (more than 7 out of 10) was given by 69.6% of doctors. The mean score was 8.27 out of 10. A graphic representation of the ratings in response to this question can be seen in Figure 3. There was no remarkable difference in the ratings given by doctors working in the different areas.

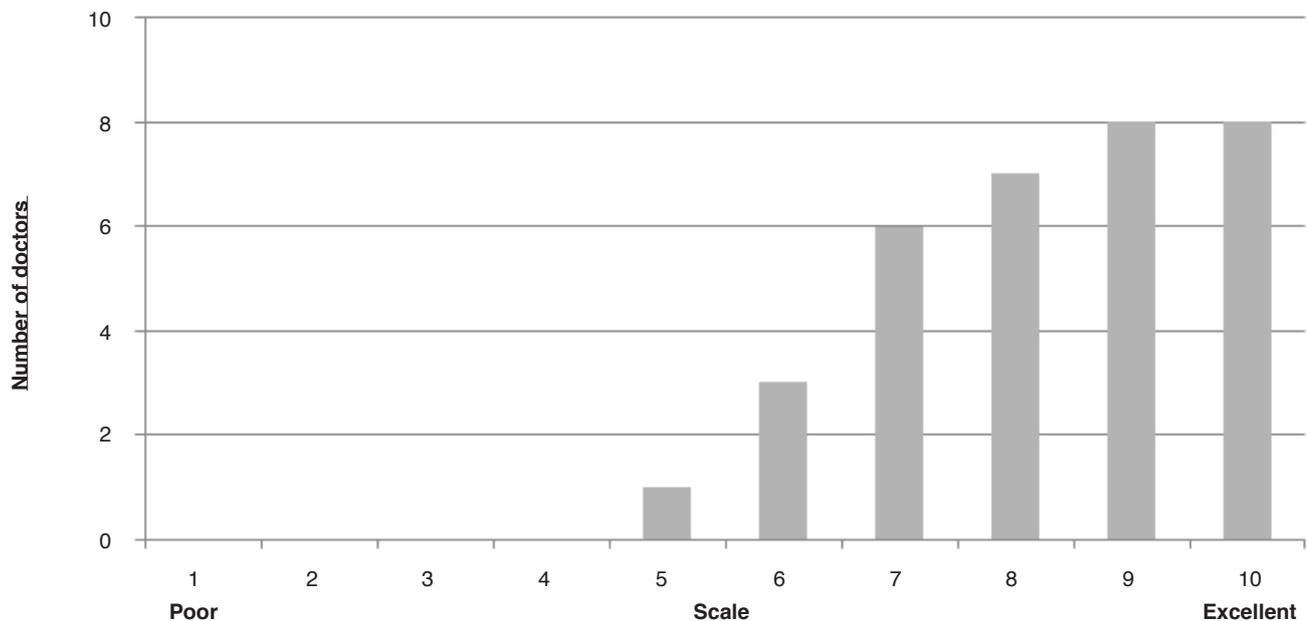


Figure 3: How would you rate your overall experience in GP

Change in perceptions after the 3-month general practice rotation

Seventy-eight point eight per cent of doctors said that their perceptions about general practice did change after working for three months in the specialty. Thematic analysis of the ‘free-text’ responses given in reply to how the rotation changed their ideas of the specialty showed the following themes:

i) Respect towards the specialty

- “More respect to the speciality. Appreciation of limitations within the system” (FY2, South region)
- “I now have much greater respect to the field and more aware of the sort of issues a GP faces on a daily basis and the vast amount of treatment that can be delivered at a community level” (FY2, North region)

ii) Awareness of the challenges faced by GPs in the community

- “Idea that GPs are jack of all trades, master of none as peddled by most doctors working in hospital is wrong as the patient cohort are very different in both cases” (FY2, North region)
- “Diagnosis and management depends more on the clinical picture as there are less haematological and imaging investigations” (FY2, North region)
- “More awareness of the challenges and stresses of the work. More awareness of the realities of the case-mix” (FY2, Central region)

iii) Confirmation or otherwise of the career choice to pursue

- “I never thought I’d want to pursue a career as a GP” (FY2, Central region)

- “Personal realization that I do not like clinic - I prefer working in a hospital based team setting” (FY2, North region)
- “I wouldn’t have considered it before” (FY2, North region)
- “Was not exactly planning on furthering my career as a GP however after the rotation, would love to continue my career in general practice” (FY2, North region)
- “I became more certain that GP is the career I want to pursue” (FY2, Central region)

iv) Variety of cases

- “It was enjoyable dealing with patients in an outpatient setting and having new cases that needed immediate management” (FY2, North region)
- “Interesting cases were seen in addition to routine cases” (FY2, North region)
- “More variety than I expected; more interesting pathology” (FY2, North region)

v) Input from seniors

- “Great support system from most seniors” (FY2, North region)
- “I am lucky to have an excellent trainer and team” (FY2, South region)
- “Unfortunately I did not always agree with the management plan of my seniors when I asked for their advice. However on the other hand, many of the younger GPs were well-knowledged” (FY2, North region)

- “House officer is made to do all the work ... no proper induction. All this puts pressure on the junior doctor resulting in increased chance of poor patient service and quality of health care” (FY2, Central region)
- “There have been both positive and negative changes all condensed to the attitudes of the different GPs that I have worked with” (FY2, Central region)

vi) *Learning experience*

- “It was much more interesting and rewarding than I expected!” (FY2, Central region)
- “I have learnt a great deal. The work placement was far more enlightening than the experience I had as a medical student. I see patients by myself, I get involved in the treatment of acute respiratory, cardiac, traumatic and surgical cases in treatment room, I have gained an appreciation of when to refer, I have learnt how to use the ICE model of interviewing patients” (FY2, South region)

Of the 21.2% of doctors who said that the rotation did not change their ideas about general practice, the majority said that it was what they had expected it to be, with one doctor commenting that the 4th year medical student GP rotation gave a good indication of what it entails to work in General Practice.

General practice as a career choice

Seventy-eight point eight per cent of doctors who responded to the questionnaire said they would consider general practice as a career choice, and it was the preferred career choice for 46.2% of respondents.

Of the 72.7% of doctors for whom choosing a rotation in general practice was a priority, 88% said they would

consider a career in general practice but it was the preferred career choice for only 50% of these respondents.

There was no noteworthy difference in reply to these questions between male and female doctors.

Factors influencing career choice

Doctors were presented with and asked to choose from a list of factors that they feel would influence their choice of career. There was no limit to the number of factors they could choose. The three factors which were considered to have the highest influence on career choice were:

- ‘Foundation GP rotation’ (66.7%);
- ‘Inspirational teacher or role model during Foundation rotation’ (63.6%) and,
- ‘Discussion with current GP trainees’ (60.6%).

Career seminars, Internet resources (for example, College websites) and discussion with other Foundation doctors were rated to have least influence on career choice by the Foundation doctors.

Figure 4 summarizes the number of responses for each factor provided in the list.

Doctors were also presented with a list of factors and asked to tick whether each factor would make them consider a career in General Practice or not.

Quality of life, chosen by all the respondents, was the most popular factor that would attract doctors to a career in General Practice. This was followed closely by working hours, the holistic management of patients, the GP specialty training programme and the variety of cases seen in everyday practice.

Lack of respect for GPs (among both doctors and the general public) and uncertainty in everyday practice were the two main factors which discouraged doctors from choosing a career in General Practice.

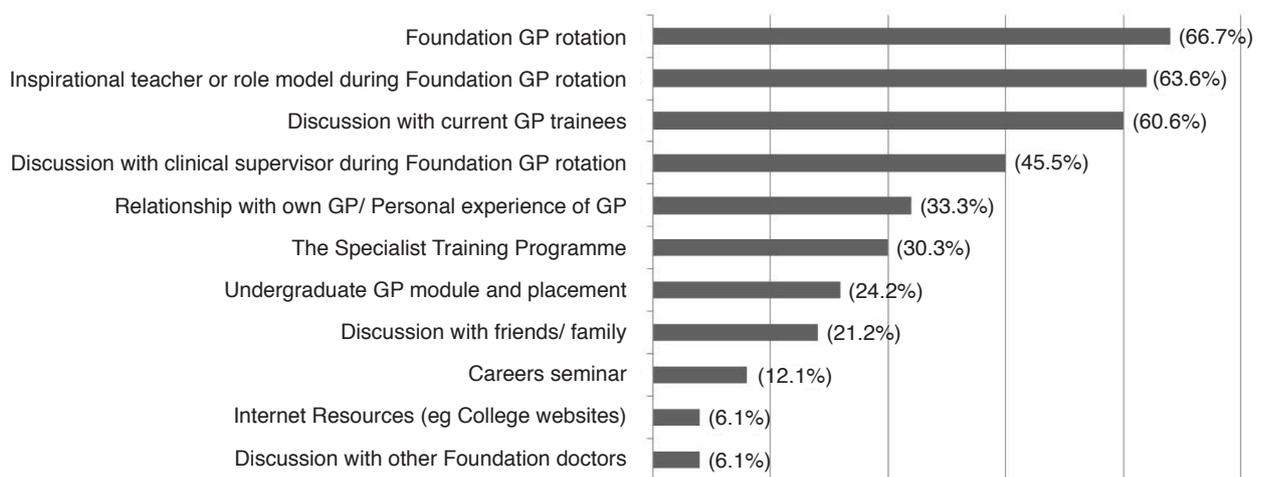


Figure 4: Factors influencing career choice

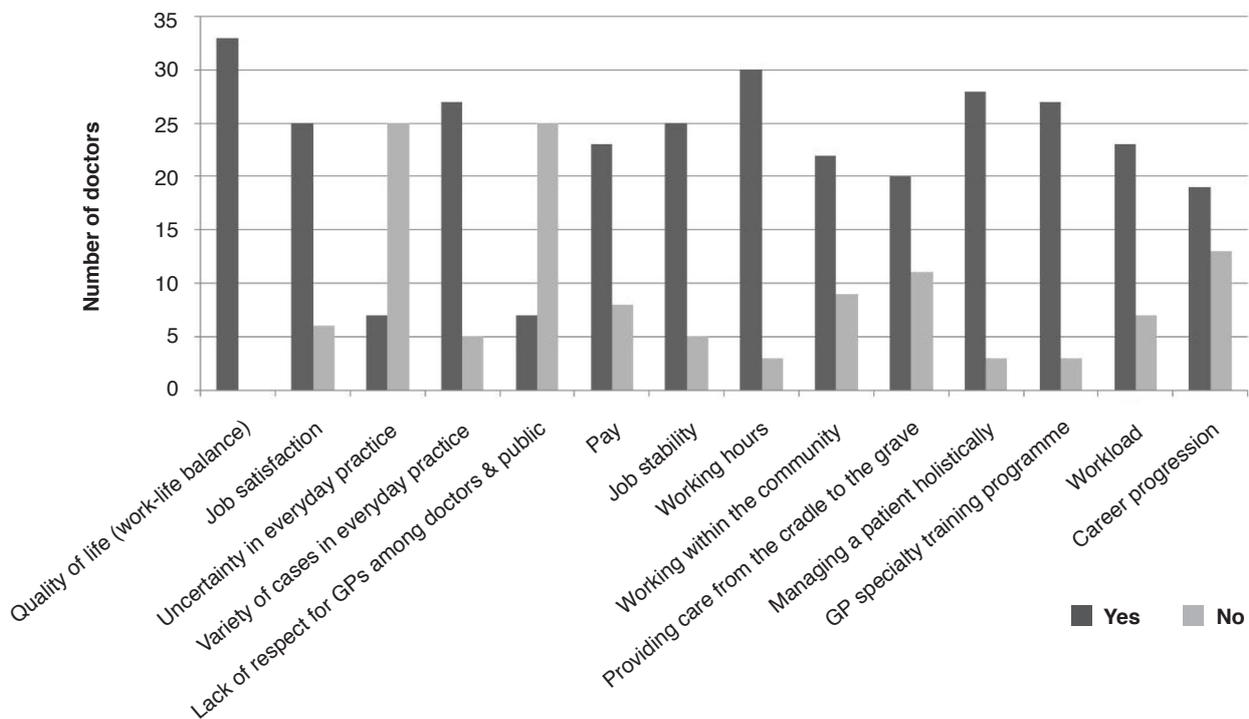


Figure 5: Factors attracting doctors to a career in GP

A summary of the results to this question are illustrated in Figure 5.

Comments/Suggestions

Fifteen per cent of the respondents left a comment in the 'free-text' space provided at the end of the questionnaire. Two doctors mentioned the importance of the GP rotation as it gives doctors the opportunity to work independently and take autonomous decisions, while having senior help readily available if needed. Another doctor suggested that a refundable clinic fee would help ease unnecessary workload and allow GPs to focus on more important clinical and social problems. Another comment was about the importance of GPs to be role models to the general public by leading a healthy lifestyle.

DISCUSSION

Strengths and limitations

The questionnaire was completely anonymous, which helped to mitigate any bias or concerns of possible consequences resulting from replies given by the Foundation doctors, and was sent to all the doctors who started a GP rotation between July 2017 and July 2018. The questionnaire was sent at the end of each rotation with the aim of avoiding any recall bias. The response rate of 54% was reasonably good for such a questionnaire, as in general response rates to surveys sent to doctors tend to be lower (Cunningham et al, 2015). Possible

reasons for non-responders might include doctors who were not particularly interested in GP and therefore less inclined to reply to such a questionnaire, doctors who forgot to reply and possible issues with the email being marked as Spam. 'Free text' space responses allowed for clarification of certain answers, as well as other comments or suggestions, which would have otherwise been lost.

Limitations of the study include the small sample number, and the fact that the questionnaire was sent only to Foundation doctors who had a GP rotation during their second Foundation year. It would have been interesting if the questionnaire was modified and sent to all Foundation Year 2 doctors to be able to understand the difference in attitudes or perceptions of this population of doctors when compared to those who worked in general practice. The validation process of the questionnaire could have been more rigorous, and peer review could have included more than two independent reviewers. Also the questionnaire was not piloted prior to being sent out, and this might have led to errors or unclear questions which were not corrected. A possible source of bias was the fact that the authors worked at Mosta Health Centre, which could have had an effect on the high response rate in this particular area. However it should be noted that the questionnaires were sent once the rotation had ended and there was no discussion between the authors and the Foundation doctors about this study. In the questions where a list of factors was provided, no 'other' option was

given and the choices were solely restricted to the ones suggested by the authors. It would have been interesting to note any factors suggested by the doctors themselves and not previously considered by the authors.

Comparison of results from this study with existing literature

The majority of doctors (78.8%) who responded to the questionnaire in this study would consider a career in general practice, which is unlike a similar study in the UK which showed that only half the respondents were considering such a career (Wiener-Ogilvie, Begg and Dixon, 2015). Similarly, in this study general practice was not the first choice for 53.8% of respondents, compared to 73.5% in the UK study (Wiener-Ogilvie, Begg and Dixon, 2015). This continues to highlight the fact that general practice is a popular specialty in Malta, attracting a substantial number of trainees, when compared to the situation in the UK where there is an ongoing campaign aimed at recruiting more doctors to the specialty (NHS UK, 2018). Ensuring there are adequate numbers of doctors in general practice is a challenge for health planners worldwide. This is particularly important when faced with an ever-increasing ageing population for which primary care will play a very important role in providing medical and social care to people with multiple morbidities (Majeed, 2017).

The factors found to have the highest influence on doctors' career choice were factors related to the Foundation rotation in general practice – the actual GP rotation, inspirational role models encountered during the rotation, discussion with current GP trainees and discussion with the clinical supervisor. This was similar to the results reported in the UK study carried out in 2015 by Wiener-Ogilvie, Begg and Dixon, which also found that doctors who had completed a Foundation rotation in general practice were more likely to choose GP as a first career choice than those who did not have a rotation. This highlights the importance of the Foundation GP rotation. Therefore, healthcare professionals working in primary care should strive to make this the best experience possible for the FY doctors. GP trainees have an inspirational effect on Foundation doctors' career choice, as shown in the results of this study. This ripple effect underlines the importance of the selection of diligent, enthusiastic and motivated GP trainees who would eventually become good role models to junior doctors working in the specialty.

Not all Foundation doctors have the opportunity to work in general practice during their Foundation Year 2 and, unless the doctors ask for a taster week in the specialty, the undergraduate GP module and placement would possibly be their only exposure to general practice. In our study, only 24.2% of doctors felt that the undergraduate rotation influenced their career choice. This is in contrast to a study showing that in the UK the undergraduate GP placement had the greatest influence on doctors in favour of a career in general practice (Wiener-Ogilvie, Begg and Dixon, 2015). This might be an indication that certain changes need to be made to the local undergraduate family medicine curriculum, with the aim of making it a more valuable experience for students, in particular those for whom this placement would be the only exposure they will ever get to the specialty. The Royal College of General Practitioners recommends that more importance should be given to promoting general practice as a career during undergraduate medical training by providing students with better GP placements and encounters with inspirational GP teachers (Hawthorne and Bull, 2017). It is important that during these placements students are exposed to the complexity of the specialty, the uncertainty associated with work in general practice and the intellectual challenge it provides.

Career seminars, internet resources and discussion with other Foundation doctors were found to have the least influence on career choice, and this compares well with previous studies (Wiener-Ogilvie, Begg and Dixon, 2015).

It is a well-known fact that general practice is one of the most badmouthed medical specialties (Ajaz, et al., 2016; RCGP, 2017) and in our study this lack of respect was one of the main factors found to discourage doctors from choosing a career in general practice, which is similar to the findings in the study by Merrett et al. published in 2017.

'Quality of life' and 'working hours' were the two factors found to attract doctors the most to a career in general practice. This might be an indication that doctors who choose general practice tend to give great importance to work-life balance and believe that the specialty will give them a better quality of life compared with other hospital-based specialties (Lambert, et al., 2017; Merrett, et al., 2017). The Specialist Training Programme, which was one of the first training programmes locally, was another important influencing factor in favour of general practice as considered by the doctors in our study. The Specialist Training Programme in Family Medicine in Malta is a

three-year programme based in family practice under the guidance of GP trainers, with additional hospital attachments in different specialties. The programme also consists of weekly formal teaching sessions, and an electronic portfolio which serves to record all educational activities and assessments, and is eventually used to assess the workplace based assessment. In addition to the latter, a clinical skills assessment and applied knowledge test take place at the end of the three-year programme (Government of Malta, 2017).

Recommendations

The following recommendations were drawn up after this study:

- Promote general practice as a career option to medical students and Foundation doctors. This can be done by ensuring that the undergraduate family medicine programme is exposing medical students to a complete and realistic experience of the specialty, and also by creating spaces that can facilitate discussion, clarification of any issues and sharing of ideas between students/junior doctors and GP trainees/qualified GPs. These can take the format of workshops or informal meetings, which can also be an opportunity to give information about the Specialist Training Programme in Family Medicine, as well as to deal with factors that discourage doctors from considering a career in GP (for example, explaining what skills can be used to deal with the uncertainty in everyday clinical practice).
- Promote the taster week in family medicine, or organize 'A day with a GP' as an opportunity for doctors with no Foundation rotation to experience the specialty.
- Organize structured and improved induction meetings for Foundation doctors prior to starting their rotation in general practice, which is often overwhelming for doctors coming from working solely in a hospital-based environment.
- Ensure that clinical supervisors are well-trained and continue to strengthen the good support they provide during the Foundation GP placement, together with other healthcare professionals. It is also important to make sure that during their rotation doctors are well-supported, not overloaded with work, exposed to inspirational role models and get a positive and complete experience of general practice (including the challenges, rewarding experiences, home visits, teaching, and research opportunities).

- Ensure that the selection process for GP trainees is thorough, and results in the selection of diligent and motivated candidates who would eventually be good role models to junior doctors.

CONCLUSION

General practice is a popular specialty in Malta attracting a substantial number of trainees, and the results of our study show that the Foundation rotation in general practice is a very important factor influencing career choice. This rotation was found to be a valuable learning experience, while increasing Foundation doctors' respect towards GPs and helping them understand and appreciate the variety of cases and challenges encountered by doctors in the community. Further research is needed to explore any difference in attitudes and perceptions between Foundation doctors who would have had a rotation in General Practice and those who would not have had the opportunity to work in the community. It would also be interesting to study any trends and changes in these attitudes and perceptions over the years.

Dr Marilyn BALDACCHINO

MD, MMCFD, MRCP (INT)

Mosta Health Centre, Primary HealthCare, Malta

Email: marbaldacchino@gmail.com

Dr Jurgen ABELA

MD, DCH (Lond.), MSc (Warw.), FMCDF, FLCM, FRCGP (UK)

Mosta Health Centre, Primary HealthCare, Malta

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