



Improving Selection to the Foundation Programme

What was it?

The Improving Selection to the Foundation Programme (ISFP) Project was initiated in 2009 and was designed to find the best method of selecting applicants to the [Foundation Programme](#), a two-year generic training programme which forms the bridge between medical school and specialist/general practice training.

How was it launched?

From 2006, selection to the Foundation Programme was based on an academic quartile rank (40%) and answers to open-ended "white-space" questions (60%). The need to improve the selection process was motivated by issues relating to its reliability, validity, comparability and longevity, as well as risk of plagiarism and NHS consultant time required, as outlined in the Department of Health report '[The Next Stage Review: A High Quality Workforce](#)' (2008).

To address these concerns, in October 2009 the Department of Health (England, on behalf of the four UK Health Departments) commissioned the [Medical Schools Council](#) to carry out a review of the selection methods and the ISFP Project was established.

Evidence for change

- Reviews of international academic literature on alternative selection tools
- Short-list of options by an international panel of experts
- Independent Cost-Benefit analysis
- Extensive stakeholder consultation
- Online questionnaire with 1810 respondents

How did the ISFP project develop?

The first part of the assessment of the possible selection methods was the [Option Appraisal](#) by a cross-stakeholder group. Through evidence derived from a wide range of sources, the Project Group strongly recommended changing the existing selection system. It concluded that the most appropriate methods for selection would be an invigilated Situational Judgement Test (SJT) to replace "white-space" questions, and a more granular version of the existing Educational Performance Measure (EPM).

As the next step, the Department of Health commissioned the Medical Schools Council to lead the Project Group to oversee the development and piloting of these methods.

At this stage, a [Job Analysis](#) of the role of the Foundation Year 1 doctor was undertaken to determine the attributes and skills required of the role, and the target domains for the SJT. In order to test for these capabilities, SJT items were developed by educational and clinical supervisors and subject matter experts, in close conjunction with Foundation doctors.

SJTs were then piloted in two stages from 2010-11. The [results](#) have demonstrated that the SJT is a reliable, valid and appropriate method for selection to the Foundation Programme.

An [EPM Framework](#) was agreed by medical students, employers and all medical schools in 2011, following consultation, piloting of a draft EPM framework, and the advice of an [EPM Task and Finish Group](#). The framework outlines the local flexibilities and common principles in calculating deciles, and uses deciles to better differentiate applicants.



In addition to the initial piloting, a full-scale [Parallel Recruitment Exercise](#) (PRE) was run during the Foundation Programme 2012 application round, in which over 90% of applicants took a pilot SJT and were ranked according to the new EPM framework. The extensive piloting showed that the SJT and EPM in combination were a reliable, robust and fair method of selection to the Foundation Programme.

What is the [SJT](#)?

Situational Judgement Tests (SJTs) are a measure of aptitude and are designed to assess the professional attributes expected of a Foundation doctor.

In the SJT for selection to the Foundation Programme, there are two question formats:

- Rank five possible responses in the most appropriate order
- Select the three most appropriate responses for the situation

The SJT assesses a number of different attributes, which were identified during a [Job Analysis](#) of the Foundation Year One (FY1) role. The attributes form the basis of the SJT items, which are [written by subject matter experts](#) who work closely with Foundation doctors. This ensures that the scenarios presented are an accurate reflection of what FY1s encounter in their role. The items are then reviewed by other subject matter experts including Foundation doctors, to ensure they are both realistic and fair.

Applicants must answer what they 'should' do in the scenario described, not what they 'would' do. This is because research into SJT shows that items asking an applicant what they 'would' do is more susceptible to coaching, and the GMC places an emphasis on probity.

What is the [EPM](#)?

The Educational Performance Measure reflects how applicants have performed academically up to the point of application to the Foundation Programme. It is based on three components, with a combined score of up to 50 points:

- Medical school performance (34 – 43 points)
- Additional degrees (up to 5 points)
- Publications, presentations and prizes (up to 2 points)

Applicants' medical school performance is calculated using a specified and standardised framework of existing performance measures, and reflects performance in deciles in relation to all others in the final year cohort.

What was the outcome?

The Department of Health accepted the recommendations of the cross-stakeholder Project Group in the [ISFP Final Report](#), that selection to the Foundation Programme from FP 2013 onwards should be based upon:

- An invigilated SJT to assess aptitude for the Foundation Programme (to replace "white space" questions); and
- An EPM to reflect educational performance at medical school up to the point of application to the Foundation Programme (to replace quartiles).