Bring Back the Interview for Exiting Medical Students in the United Kingdom

Stephenson-Famy and colleagues¹ have highlighted their insights into the selection process for resident selection. Their findings emphasized numerous advantages of the interview process, allowing for assessment of noncognitive skills, interprofessional learning, and communication abilities.¹

The United Kingdom has done away with the application interview. Currently, entry into foundation training relies solely on the use of an educational performance measure (medical school performance, additional degrees, and publications) and a situational judgement test (SJT, where candidates are assessed on the attributes expected of a newly qualified physician).

Since 2013, feedback regarding the SJT has not been uniformly positive. Between 2013 and 2015, only slightly more than half of the over 7000 applicants who provided their reactions to the SJT reported that the content seemed relevant to the role of a foundation doctor; only around 40% agreed or strongly agreed that the content of the SJT appeared fair to the foundation program, and only about one-fourth of applicants agreed or strongly agreed that the results of the SJT could help selectors differentiate between stronger and marginal applicants.^{2–4} Students commented that the SJT was less fair than the educational performance measure, with some applicants finding it difficult to put several correct options into ranking order.^{2–4}

The literature has highlighted that additional research is needed to evaluate the extent to which situational judgement tests effectively predict performance throughout medical education—from admission to residency education to unsupervised clinical practice.⁵

While it is clear that candidate selection for residency positions is not easy, it is essential to note that judging candidate suitability solely based on test

scores may not be a fair or realistic assessment of their likely abilities or other attributes that they may bring to their chosen professional role as a physician.

Graduate training is a long and arduous process, and the necessary knowledge, skills, and attitudes develop continuously day by day. In that context, it is disappointing to see the United Kingdom's move to pure test-based selection. And I feel deeply sorry as an educator for my students who have to endure such a process.

Neel Sharma, MRCP (UK)

Clinical Research Fellow, Division of Gastroenterology and Hepatology, National University Hospital, Singapore

References

1. Stephenson-Famy A, Houmard BS, Oberoi S, Manyak A, Chiang S, Kim S. Use of the interview in resident candidate selection: a review of the literature. *J Grad Med Educ.* 2015;7(4):539–548.
2. Patterson F, Ashworth V, Murray H, Empey L, Aitkenhead A. Analysis of the situational judgement test for selection to the foundation programme 2013. <http://www.isfp.org.uk/SiteCollectionDocuments/FY1-SJT-2013-Technical-Report-May-2013-updated-for-publication.pdf>. Accessed March 11, 2016.
3. Patterson F, Murray H, Baron H, Aitkenhead A, Flaxman C. Analysis of the situational judgement test for selection to the foundation programme 2014. <http://www.isfp.org.uk/SiteCollectionDocuments/FY1-SJT-2014-Technical-Report-June-2014.pdf>. Accessed March 11, 2016.
4. Patterson F, Aitkenhead A, Edwards H, Flaxman C, Shaw R, Rosselli A. Analysis of the situational judgement test for selection to the foundation programme 2015. <http://www.isfp.org.uk/SiteCollectionDocuments/FY1-SJT-2015-Technical-Report.pdf>. Accessed March 11, 2016.
5. Patterson F, Zibarras L, Ashworth V. Situational judgement tests in medical education and training: research, theory, and practice: AMEE Guide No. 100. *Med Teach.* 2016;38(1):3–17.