

# Supply and demand for preregistration placements: don't believe the hype!

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Reports of pharmacy graduates experiencing difficulties in securing suitable preregistration placements appear regularly in *The Pharmaceutical Journal*. These difficulties are generally attributed to a mismatch between the supply and demand for training placements. Certainly, demand for posts has increased because undergraduate pharmacy student numbers have more than doubled over the past 20 years and because current training providers have been asked to offer cross-sector placements. With estimates of a need to increase capacity by 20 per cent, and with some training providers reluctant to create additional posts, there have been calls for new posts in a wider range of sectors to be created to avoid the potential bottleneck at the preregistration level. Without such an expansion in the supply of training posts, an editorial in *The Journal* in 2004 (1 May 2004, p530) speculated that the pharmacy degree was in danger of becoming a "passport to nowhere", producing pharmacy graduates rather than future pharmacists.

## No current shortage in training posts

While we accept that it is difficult to determine the effects of increasing pressures on supply in the future, evidence emerging from our cohort study of students graduating in 2006 (*PJ*, 22 July 2006, pp107–8; 29 July 2006, pp137–8; and 5 August 2006, pp164–5) suggests that the experience of applying for and securing a preregistration training post is not characterised by a shortage in available training posts. Instead, what we did find was that while 86 per cent of the students in their third year expected that it would be difficult to secure their first choice of preregistration training post (probably reflecting widely reported speculation of an under-supply of placements), on being surveyed a year later as fourth-year students, the majority (63 per cent) had in fact found the process of securing a training post to be easy.

There is, though, a significant difference between expectations and experience of securing a preregistration training post when respondents' ethnicity is explored: while expectations were relatively constant across the two subgroups white/minority ethnic, experiences of securing a post varied widely. We found that students from black and minority ethnic groups were significantly more likely than white students to have found it difficult to get a training post. The reasons for these differences — and whether they can be attributed to differences in perceptions of the relative difficulty of securing a post or

whether they have occurred for other reasons, such as preferences for particular posts with particular pharmacy employers in particular geographical locations — will need careful unpacking in further analysis of the data and further research.

Another encouraging finding from our work is that most students (68 per cent) succeeded in getting their first choice of preregistration training post. And whether respondents had succeeded in getting their first choice of post did not depend on the sector of pharmacy practice they applied to: 76.2 per cent of those who had secured a training post in the hospital sector and 78.6 per cent of those who had secured a training post in the community sector had got their first choice of post. Less encouraging is the finding that, once again, significantly fewer students from black and other ethnic minority groups (58.1 per cent) than white students (76.8 per cent) secured their first choice of post, a finding that emerged irrespective of gender. The implication of this result is that variation between groups within the sample in relation to whether they had secured their first choice of post cannot be explained simply in terms of preferences for one sector over another.

In terms of geographical mobility, we found that, on the whole, schools of pharmacy tended to supply preregistration trainees for the local pharmacy workforce, since the median (straight line) distance between a student's preregistration training post work address postcode and the school of pharmacy they attended was 39 miles. Not surprisingly, we found that over half of students graduating from four city-based schools moved less than 20 miles from their undergraduate institution to take up a training post. More generally, we observed that students who had attended a school of pharmacy in England or Scotland were more likely to train in the same country that they studied in than students studying in Wales. In Scotland, 96.2 per cent of those students who had secured a preregistration training post there had also studied in Scotland. In England the figure was 94.3 per cent. But the largest proportion of respondents who secured a preregistration training post in Wales had studied in England (53.7 per cent).

So is the supply of preregistration training posts meeting demand? Our results indicate that most of last year's graduates found it easy to find a placement and that, equally importantly, they found a post in their preferred sector — and that they even got their first choice of post. We also found that most grad-

uates secured a training post reasonably near where they had studied, suggesting that areas currently experiencing recruitment problems may continue to experience problems if the tendency to remain relatively local to where they had studied stays unchanged as the cohort enters pharmacy practice.

## But questions remain

But among those who were less lucky, many questions remain unanswered. Were they unsuccessful in securing their first choice post because they had unrealistic expectations, lacked relevant undergraduate work experience and so did not meet an employer's requirements, applied too late, or wanted to work in a particular sector or geographical location with especially high demand? Further analysis of the data should help us to tease out the answers to these questions. In addition, because our study is longitudinal, we will be able to track the effects on longer-term pharmacy career satisfaction and retention of preregistration training.

What can be seen from our research is that recent reports of a shortage in preregistration placements is hype that does not reflect the actual experiences of last year's graduates when they came to apply for and secure a training post. But with 6,800 undergraduates now studying pharmacy in the UK at either fully or partially accredited institutions offering a pharmacy degree course, such a large increase in graduates in the future surely cannot be matched by equivalent increases in preregistration places unless the number of entrants is regulated, or unless pharmacy employers, government and the Department of Health increase their commitment to training. Without such a commitment, future cohorts of pharmacy graduates may find themselves without a training post on the scale of those recently experienced by junior doctors at the hands of the Medical Training Application Service.

Of course, preregistration training is more than a numbers game and a matter of meeting demand with supply. Concentrating on the quantity of posts provided tells us nothing about their quality. Perhaps debate should now focus on determining the role, content, and purpose, educationally, of preregistration placements, and on how the training year works to bridge both undergraduate education and future professional development.

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