THE ‘MOTHER’ SCORE – AN EVIDENCE BASED ASSESSMENT OF PREDICTING TRAINEE CONFIDENCE ON RETURN TO WORK AFTER MATERNITY LEAVE

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Introduction:
In 2014 the GMC published a review on the phenomenon of ‘skills fade’ during time out of practice. Although it recognized that skills fade is related to time out of training, it reported there was a lack of information available on specific risk factors. One common reason for time out of practice is maternity leave. Here we report the results of a national survey of paediatric trainees to investigate experiences of returning to clinical work after maternity leave with a view to establishing what specific factors affect confidence on return.

Methods:
We conducted an online survey of doctors within the paediatric training programme (ST1-8) between March and May 2017. An email was sent out centrally to all 13 deaneries. Trainees currently on maternity leave and those who had completed a period of maternity leave were invited to submit anonymous responses. Statistical analysis was performed to establish those factors that independently predicted confidence levels on return to work.

Results:
We received 144 responses across 12 deaneries. 119 of those respondents had returned to work. 95.8% reported an initial lack of confidence on returning to work lasting more than a week (36.7% more than 3 months).

Analysis of the data revealed that the following were statistically significant independent risk factors for experiencing a lack of confidence on return that continued beyond 3 months: Those whose confidence took > 3 months to return had longer maternity leave times (25% were off for < 9 months compared to 42% whose confidence had returned within 1 month.) They were less likely to be working full time (6.8% versus 31.5%), were less likely to have undertaken medical revision whilst on maternity leave (75% versus 84.2%) and had done so less frequently (27.3% did revision at least monthly versus 38.5%). Working at a registrar grade was also associated with confidence returning more slowly (61.3% versus 79%).

Conclusion:
This work is the first to quantify what factors determine confidence on return to work following maternity leave. We propose a risk stratification score, the “MOTHER” score, to predict those trainees that are likely to feel less confident on return to work. In the score M: months out, O: other children, T: training stage, H: hours worked on return, E: educational activities, R: Recognition by consultant. Trainees with a high MOTHER score could be targeted for extra support on return to work.