

House of Commons: Written Statement (HCWS350)

Department of Health and Social Care

Written Statement made by: **Minister of State for Health (Secondary Care)**
(Karin Smyth) on 15 Sep 2026.

Prioritisation of doctors for UK medical specialty training programmes

We have now laid before Parliament *The Medical Training (Prioritisation for Specialty Training Programmes) Regulations 2026*. These regulations specify categories of person who will be prioritised for interviews and offers for UK medical specialty training programmes from 2027 onwards.

The Medical Training (Prioritisation) Act 2026 introduced a system of prioritisation for the allocation of postgraduate medical training places across the UK. It delivered the commitment in the Government's *Fit for the Future: The 10 Year Health Plan for England* to prioritise UK medical graduates for foundation training and to prioritise UK medical graduates and other doctors with significant NHS experience for specialty training places.

The Act is designed to support a sustainable medical workforce that can meet population health needs, reducing the UK's reliance on the international labour market, and ensuring we make best use of the substantial taxpayer investment in UK based medical education and training. By creating a clear pathway from medical school to specialty training, we strengthen domestic talent and improve retention.

For specialty training, the Act prioritises graduates of medical schools in the UK or Ireland; international medical graduates who studied in Iceland, Norway, Liechtenstein and Switzerland, to reflect international agreements; and individuals who have completed or are completing the UK Foundation Programme or the relevant previous stage of a UK specialty training programme.

For specialty training offers made in 2026 only, the Act also prioritises individuals holding the following immigration statuses: British citizens; Irish citizens who do not require leave to enter or remain in the UK; Commonwealth citizens with the right of abode; individuals with indefinite leave to enter or remain in the UK; and those with EU settled and pre-settled status. These provisions were intended to act as a proxy to capture applicants most likely to have significant experience of working as a doctor in the NHS.

For specialty training places starting from 2027, the Act provides a power to specify by regulations groups to be prioritised, by reference to criteria indicating significant experience of working as a doctor in the NHS or Health and Social Care in Northern Ireland, or described by reference to their immigration status, in a way that best delivers our policy intent.

During the Bill's Parliamentary passage, we committed to engaging with stakeholders on future regulations in this area. In spring 2026, NHS England undertook targeted stakeholder engagement on behalf of the four UK Governments. This included, amongst others, the medical Royal Colleges, bodies representing international medical graduates, trade unions including the

BMA, NHS providers, the General Medical Council, think tanks and medical schools. Most stakeholders favoured moving away from immigration status as the basis for prioritisation once NHS experience can be measured directly. Views on an appropriate minimum threshold for NHS experience were more mixed and based on limited evidence due to how recently prioritisation had been implemented, and we do not believe that we have a sufficiently robust evidence base to define alternative criteria setting a threshold for NHS experience in regulations at this stage.

The urgency of the Act meant that for 2026 it came into force after applications had closed and only introduced prioritisation for the offer of places. This meant that the evidence available from the 2026 recruitment round is necessarily limited, as prioritisation could have had little effect on applicants' behaviour.

Having considered the available evidence, we have concluded that the immigration statuses that applied for specialty training offers made in 2026 remain the most appropriate basis for prioritisation at this stage. These statuses capture people with a permanent, unrestricted right to live and work in the UK and remain an effective proxy to capture doctors most likely to have significant experience working with the NHS. While we recognise this is not a direct measure of NHS experience, applicants with these immigration statuses are more likely to have worked in the NHS for a significant period of time or to remain working in the NHS for longer.

Using these immigration statuses from 2027 provides continuity with 2026 prioritisation arrangements while enabling evidence gathering from future recruitment rounds to support a fuller assessment of potential alternative approaches for future years.

These regulations do not amend the other categories of person already prioritised for specialty training places under the Act as set out above. These regulations also do not affect the prioritisation regime for foundation training under the Act.