Objective: The aim of this study was to examine the speed of response of human resources departments to requests for job application forms for posts advertised in the British Medical Journal (BMJ). Of particular interest was the closing date for applications, postage cost, and the period to reply.

Design: Twenty posts were randomly selected and application forms requested by telephone and then 20 by letter on two separate dates from the BMJ Classified (issues of 21 July 2001 and 28 July 2001). During the first week the forms were requested by telephone on receipt of the BMJ (Friday afternoon). During the second week the forms were requested by first class post. All letters were sent out on Saturday morning.

Outcome measures: The date of receipt of the application form/information pack, the cost of postage, and the closing date for application were recorded for each position.

Results: Fifteen forms were received after the telephone application and 18 forms after the letter applications. One trust sent two replies spaced one week apart for the same job and two replies contained job application forms for the wrong job. The response rates to telephone requests varied from four to 10 days and by letter from three to 12 days. The minimum time between the reply being received and the closing date was one day, and the maximum 21 days. The time between the closing date for applications and the start date of the job varied from minus one week (closing date before advertisement) to three months. Thirteen replies gave no indication of the start date of the job. The cost of postage varied from 27p to £1.90. Thirty one trusts used first class postage.

Conclusion: There is very limited scope to return job application forms on time, and significant delays in sending out application forms and information packs compound this problem. It is recommended that trust human resources departments place advertisements early and respond promptly to requests for application forms.
again selected at random and a standardised letter was sent first class (by first post) to the relevant destinations. When the replies were received they were marked with the date of receipt; the cost of postage and closing date were recorded. The job start date was looked for in the replies and in the original advert and noted.

RESULTS
We received 33 replies; one trust sent the same application form twice (sent one week apart). Eight job application forms were not received. Six non-replies were from the telephone calls, two in response to the letters. Two trusts sent application forms for totally different jobs and one had the wrong reference number in the advert. The response rates varied from three to 12 days by letter and four to 10 days in response to the telephone calls (fig 1).

The cost of postage varied from between 27 pence and £1.90 (fig 2). Thirty one were sent first class (77.5%).

The date of response with reference to the closing date varied from three to 17 by telephone and one to 17 with the letters (fig 3).

Thirteen jobs recorded no start date and in those with start dates the time from closing date to start date varied from “as soon as possible” (or minus one week) to three months.

DISCUSSION
These results show no great difference between the response rates from requests by telephone or letter. Of concern is the fact that eight trusts (20%) completely failed to send any application forms. In most cases the very short time interval between the receipt of the form and the time the post started meant that there is little time to return appropriately completed application forms in the post. Moreover such short time allows limited opportunity to visit the departments. Many application forms are now becoming available over the internet and can be downloaded. This may lead the way for the future, but does assume all doctors have easy access to the internet. During the course of undertaking this study we noted that many of the personnel offices did not have 24 hour answer phones, which is another factor mitigating against prompt replies.

These results are based on applying at the earliest opportunity, having received the BMJ by post. The implication for delayed requesting is that the time scale is narrowed even further. Indeed many junior staff receive their BMJ at their permanent home address, rather than a temporary hospital address, thus the scope for application is again reduced.

While it is clear that in certain conditions jobs come up at short notice, the vast majority of posts are predictable. The majority of junior medical staff will rotate during the months of February and August (often changing accommodation address every six months). Why then are there such a narrow windows for response and start date? Of particular concern is the application for consultant positions, where the information necessary for application and the need to visit is surely greater.

This study demonstrates a major problem with the application process that may jeopardise the chances of the applicants securing important posts. Human resources departments should look at their processes and improve the speed of dispatch of application forms and possibly advertise posts well in advance of the closing date. Improved use of internet technology via hospital websites may aid this improvement.

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