



Royal College of  
Obstetricians &  
Gynaecologists



# **RCOG Workforce Census**

## **Executive summary**

### **2025**



## Foreword

As President of the Royal College of Obstetricians and Gynaecologists, I am proud to present the 2025 Workforce Census, a vital report that sheds light on the challenges and opportunities facing our dedicated obstetrics and gynaecology workforce across the UK. This report comes at a critical moment for the NHS, as we navigate increasing demands, evolving patient needs, and the publication of the 10-Year Health Plan for England. It is clear that the ambitions of this plan; shifting the focus from sickness to prevention, from hospital to community, and from analogue to digital, can only be realised if we prioritise workforce planning and the wellbeing of our healthcare professionals. I am also acutely aware of the significant pressure our workforce is facing due to the emerging maternity reviews and rising waiting lists.

At the RCOG, advocating for our members is at the heart of everything we do. This census provides invaluable insights into the demographics, workplace conditions, career development opportunities, job satisfaction, and future intentions of O&G doctors. It highlights the systemic pressures they face, including rota gaps, excessive administrative burdens, and insufficient time for career development. These challenges impact both the wellbeing of our members and the care they are able to provide to women and girls, because the two are inseparable.

As President, I am committed to ensuring that our members are supported at every stage of their careers. This report strengthens our calls for increased resources in women's healthcare. It provides recommendations to address the pressing issues of workforce retention, protected time for education and leadership, and improved working conditions. By advocating for these changes, we aim to create a resilient, well-supported workforce that can continue to deliver high-quality, safe care. This is what I have been advocating for during my presidency, and now we have robust evidence, evidence from you, our membership.

I urge policymakers, healthcare leaders, and all stakeholders in women's health to act on the findings of this report. No single leader can overcome this challenge; we must do it together. Together, we can build a sustainable future for O&G services, empowering our members to thrive in their roles and provide the exceptional care that women and girls expect and deserve.

**Ramee Thakar MD PRCOG**  
**President, RCOG**





As Vice President for Membership and Workforce, I very much welcome this 2025 Workforce Census. I am hugely grateful to everyone who took the time to share their thoughts and experiences with us, enabling us to produce such a comprehensive report, full of rich detail about the O&G workforce.

This detail will underpin the College's ongoing work to support the O&G workforce and will strengthen our calls for additional resource in women's healthcare. We believe by creating an environment that empowers and supports clinicians, we enable them to deliver the safest, most compassionate care possible.

The Census builds on the work done in the College in recent years to better support our members. We have known for some time that our doctors are experiencing challenges in delivering increasingly complex care in high-pressure environments, with inadequate resources. In response, we have developed resources to support Educational Supervisors, created a hub to support International Medical Graduates joining the NHS, refreshed our return-to-work toolkit to support retention, and updated our job plan approval guidance to support fairness in recruitment. But we know there is always more we can do, and more governments and health leaders must do.

This report gives us a much greater understanding of who our doctors are and how they are working, which is invaluable for future workforce planning. It gives us more detailed information on how the ever-growing pressure of service delivery is manifesting, the impact it is having on doctors' wellbeing and how it is influencing their decisions about the future.

The findings in this report will be familiar to many of you, with reported rota gaps, doctors working over contracted hours and over a third of the workforce unable to take the annual leave they need to rest and restore a work-life balance. It is also evident if we want doctors to continue to deliver the highest standards of care, they need protected time in their roles for education, training and leadership responsibilities. Good leadership is essential for good patient care, and this aspect of training should not be neglected, even in the face of extreme service pressures. Indeed, there is a compelling case to be made that it is even more important in the context of current challenges and those that undoubtedly lie ahead.

As we look forward to the 10 Year Workforce Plan for England, we hope this report will be used to inform thinking around the current and future needs of O&G services, to ensure we have a resilient, well-supported, fully staffed workforce to provide women and girls with the care and support they need.

**Laura Hipple, FRCOG**

**Vice President for Membership and  
Workforce, RCOG**





## Executive summary

The RCOG 2025 workforce census captures a snapshot of the current O&G workforce across all career stages and all four nations of the UK. The data we have collected provides insights into the current demographics of the O&G workforce, how O&G doctors feel about opportunities and support for career development, their workplace conditions, their job satisfaction and wellbeing, and their future career intentions.

These important findings will underpin the College's ongoing work to support the O&G workforce and will strengthen our calls for additional resource in women's healthcare.

The census included five key domains:

- Demographics
- Career development
- Workplace conditions
- Job satisfaction and wellbeing
- Job planning and leadership roles

The census was conducted online between 24 March and 2 May 2025 and was open to all O&G doctors working in the UK. It included a mixture of closed and open-ended questions. Enventure Research supported the development of the census questionnaire, led the analysis and supported the production of the report on behalf of the RCOG.

## Demographics

A total of 1,589 valid responses were received: 59% consultants, 7% Specialty, Associate Specialist and Specialist (SAS) doctors, 27% trainees, 5% Locally Employed Doctors (LEDs) and 3% doctors working in other roles within O&G.



**70%** of respondents were female



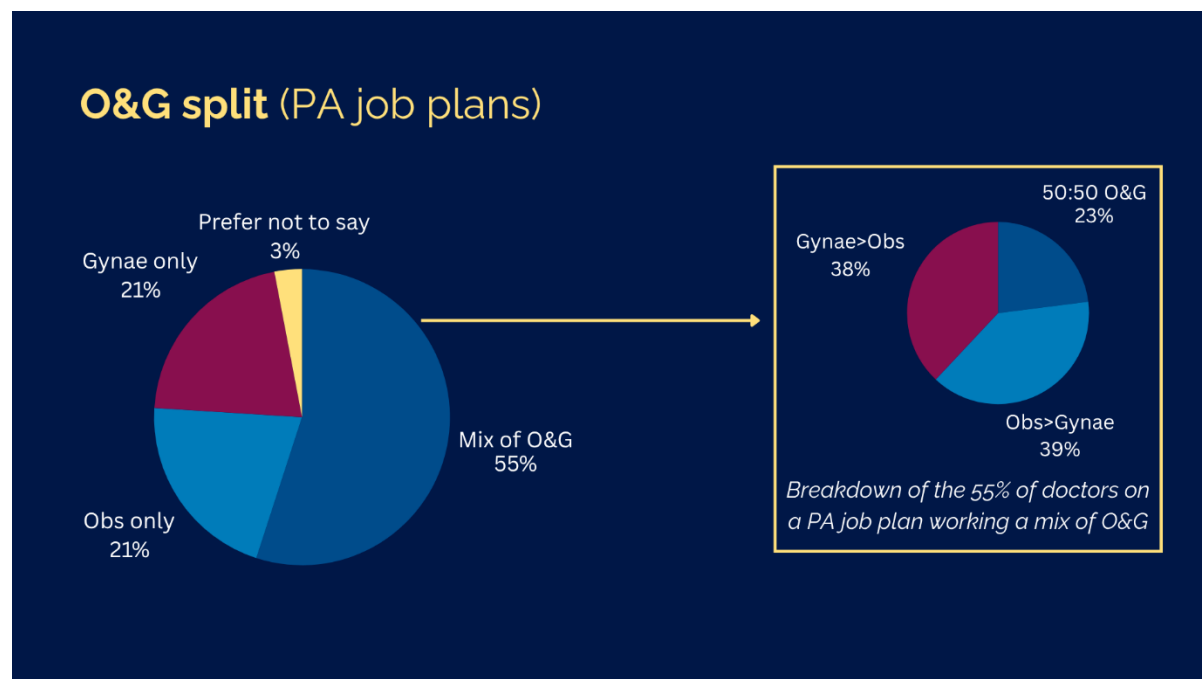
**four in ten** respondents identified as Black, Asian and minority ethnic



**20%** of respondents were over 55

Almost four in ten (37%) respondents received their primary medical qualification (PMQ) outside the UK. This was highest for LEDs (84%) and SAS doctors (77%).

Across O&G specialty training, all doctors work across both obstetrics and gynaecology. Figure 2 below shows the split between obstetrics and gynaecology for consultants and SAS doctors working on programmed activity (PA) job plans.



## Career development

The census data clearly shows that many O&G doctors are struggling to find time for development and progression due to the demands of service provision. Across all career grades, **over half of respondents said they do not have enough time for career development within their contracted hours**. This was particularly acute for trainees, with seven in ten saying they did not have sufficient time. **The main reason given for not having enough time was service provision pressures, followed by patient-related administration and lack of administrative support.**

These findings suggest that systemic pressures are limiting doctors' ability to access development, regardless of their personal career aspirations. There is a clear need for protected time for development opportunities, support with administration and an increased workforce, to ensure our specialty can continue to deliver high-quality patient care.

## Career development needs



Nearly half of consultants (46%) and 43% of SAS doctors cited a need for **protected SPA time** in order to develop



SAS doctors said they need **greater recognition** of contributions and experience (43%) in order to progress



Developing **surgical skills** was the most common development priority for trainees (70%) and LEDs (52%). In order to meet this priority, they need **access to theatre** (trainees, 75%, LEDs, 67%)

## Key recommendations:

- Doctors with educator and leadership responsibilities need protected time in their job plans to fulfil these roles alongside service provision commitments, and this can only be achieved by retention and expansion of the senior O&G workforce. Education and leadership are essential for future-proofing the O&G workforce.
- Trainees and LEDs should have access to time in theatre and opportunities to develop surgical skills. This is crucial to ensure the workforce of the future is capable of managing increased surgical complexity.
- Employers should recognise the time clinicians are required to spend on administrative tasks in job plans, and ensure appropriate support is available.

## Workplace conditions

The census highlights a need to improve working conditions. This is closely linked to overall job satisfaction, staff wellbeing, patient care and service improvement.

One in five respondents are working **less than full time** (LTFT) to support a **work–life balance**. This is more common among trainees (43%). Two-thirds said they **always or often work beyond their contracted hours**, and the frequently cited reasons for this were an **increase in the amount of administrative work**, **staff shortages**, and an increase in the number of cases with **complex comorbidities**. Two-thirds reported that there were **gaps in the rota** at their level, and a third reported not being able to take their full **annual leave entitlement**, further highlighting the impact of staffing issues on the O&G workforce.

## Working conditions



**68%** said they **always or often** worked beyond their contracted hours



**35%** reported **not** being able to take their full annual leave entitlement



**67%** reported that there were **gaps** in their rota at their level

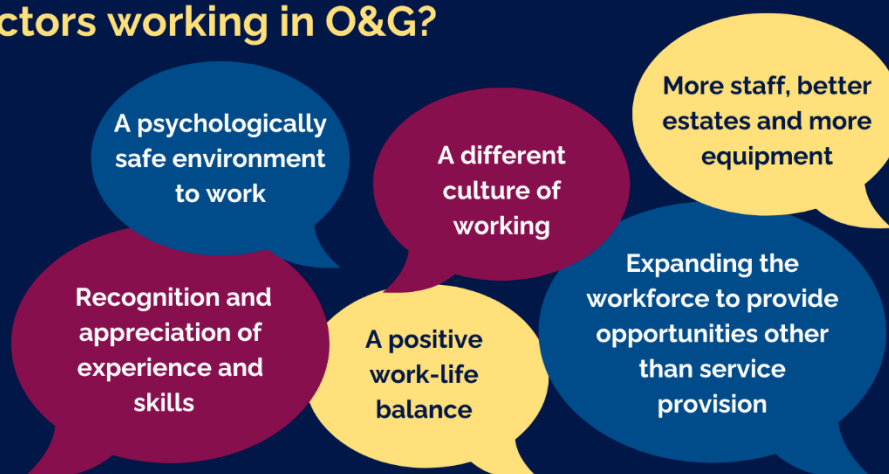
## Key recommendations:

- Doctors need protected time for education, training and leadership responsibilities. It is vital that clinicians are enabled to fulfil their responsibilities within contracted time to support the development of the whole workforce.
- Staffing levels should be sufficient for all staff to be able to take their annual leave entitlements without compromising service delivery. Being able to take leave helps doctors to attain a work–life balance, feel valued in their role and improve job satisfaction and staff retention.

## Job satisfaction and wellbeing

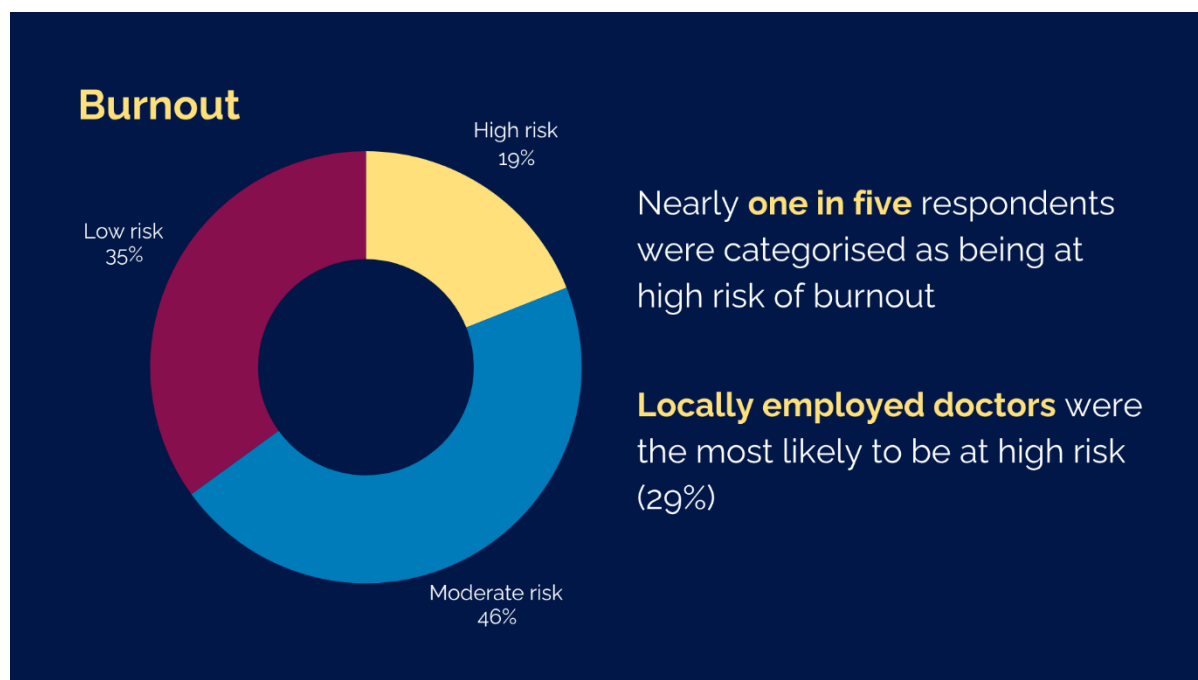
On the question of what doctors enjoy most about their roles, the vast majority answered **delivering care**. Two-thirds stated they are satisfied in their day-to-day work, which confirms their commitment and passion for the specialty. The census also provided valuable insights into the drivers doctors feel would **improve job satisfaction**.

## What would improve the health and wellbeing of doctors working in O&G?



LEDs and trainees are most likely to be at **high risk of burnout** (29% and 23%, respectively). The most commonly suggested interventions to improve the wellbeing of those working in the specialty were to **improve staffing levels, enhance staff recognition and appreciation, and improve work–life balance**. Many also highlighted the need for **improved IT systems, buildings and staff facilities**.

It is crucial that **staff feel valued**. This is a key driver to both **increased job satisfaction** and **positive wellbeing**. Many doctors did not feel their contributions were adequately recognised, and there is a strong **link between workplace culture and job satisfaction**. LEDs were particularly vulnerable, being the **least likely to feel valued in the workplace and the most at risk of burnout**.



### Key recommendations:

- The wellbeing of O&G professionals should be prioritised through improved working conditions, flexible working options, support after adverse events and role-modelling of positive workplace behaviours.
- All doctors, including those working outside of formal training pathways, should be recognised and valued, with access to career progression opportunities.

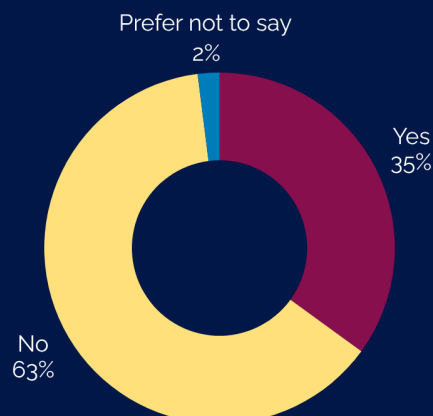
## Job planning and leadership roles

Providing O&G doctors with **structured, supportive job plans** is essential in maintaining **high standards of patient care, clinical continuity, and work-life balance**.

The census asked consultants and SAS doctors detailed questions about their programmed activities (PAs). 63% of doctors holding **clinical leadership roles** and 40% of **educators** felt that the **allocated PAs were not sufficient** for them to carry out the responsibilities of their role.

## Clinical leadership roles

Over **six in ten** (63%) of those holding a clinical leadership role (e.g., Clinical Director, Labour Ward Lead) felt that the allocated PAs were **not sufficient** for them to carry out the responsibilities of their role.



*Are the PAs allocated sufficient for your clinical leadership role(s)?*

Overall, 13% of respondents **plan to retire in the next five years**. This included a fifth of all consultants, many of whom hold a clinical or educational leadership role. These figures underline the need to **prioritise succession planning**. Those approaching retirement should be supported to **work flexibly** and provide **mentorship and training to colleagues**.

## Key recommendations

- Time allocated in job plans to educational and leadership roles should be reviewed regularly to ensure this reflects the changing demands of these roles. The time allocated will depend on the services provided, size of the team and specifics of each role.
- The medical workforce approaching retirement should be supported to work flexibly if they choose to, this is fundamental to their wellbeing and the retention of valued skills and expertise in the workforce.
- Succession planning should be prioritised to ensure that teams are adequately resourced with the necessary clinical and leadership expertise. This includes enabling senior doctors to provide mentoring and training for their colleagues who will be taking on leadership responsibilities in the future.



## Conclusion

The O&G workforce is highly motivated and the passion for the specialty is evident, but the workforce is under resourced with many working beyond contracted hours and feeling undervalued. Obstetric care is becoming increasingly complex and gynaecology waiting lists are growing, the current workforce is under resourced to meet the evolving population demands and greater patient expectations.

Having a motivated, well-trained, and adequately staffed and resourced workforce underpins all our members do in O&G to provide the best-quality care they can for women, patients and families.

It is important that obstetricians and gynaecologists are supported to meet the population and service needs now, and in the future, but we must also put an emphasis on protecting the wellbeing and development of dedicated clinicians. Providing a work environment that is adequately resourced and supportive of the whole workforce, at every career stage, is crucial to reducing the risk of burnout, increasing job satisfaction, and helping doctors to deliver the highest levels of care to women and girls.



## A note on language

Within this document the terms 'woman' and 'women's health' are used. However, it is important to acknowledge that it is not only people who identify as women for whom it is necessary to access women's health and reproductive services in order to maintain their gynaecological health and reproductive wellbeing.

Gynaecological and obstetric services and delivery of care must therefore be appropriate, inclusive and sensitive to the needs of those individuals whose gender identity does not align with the sex they were assigned at birth.

## Find out more

The Royal College of Obstetricians and Gynaecologists works to improve women's healthcare across the world. We're committed to developing the accessibility and quality of education, training and assessments for doctors wishing to specialise in O&G.

## Contact us

Visit: [rcog.org.uk](https://rcog.org.uk)

Call: 020 772 6200

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