

**Attitudes of core medical trainees towards Rehabilitation Medicine as a specialty: results from a questionnaire survey**

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## **Abstract**

**Objective:** To investigate attitudes of core medical trainees towards Rehabilitation Medicine as a specialty and to evaluate their reasons for applying or not.

**Design:** Online questionnaire survey (SurveyMonkey®)

**Subjects:** Core medical trainees in 2015

**Setting:** UK

**Main measures:** 10 multiple choice questions as well as free text comments made by doctors

**Results:** The invitation went to no more than 2962 people, with 300 replies of which 294 (10%) were valid. 240 (85%) knew of Rehabilitation Medicine as a speciality; 100 (36%) had had some experience; but only 12 (4%) were thinking of applying. However 80 (24%) would have considered applying if they had more experience and 100 (37%) would have taken 'taster days' to gain more insight.

### **Conclusion:**

One major reason Rehabilitation Medicine has so few applicants is that most trainees have no exposure and, even if they know of it they do not apply.

### **Introduction**

Rehabilitation Medicine is a medical specialty that recruits from multiple core training programmes including core medical training, psychiatry, surgery and general practice. However, most trainees that fill Rehabilitation Medicine training posts come from the core medical route (64% in 2015). It sees patients who have a wide range of diagnoses, mainly neurological, but also from most other specialties including surgical and psychiatric. Rehabilitation Medicine provides both in and outpatient services, often seeing them over a long period of their lives. This requires doctors to take a holistic, patient centred approach (Devinuwara K 2013), some of the core ideals recommended by the core medical training (GMC 2009 (amended 2016)).

It is one of the least popular training programmes. In 2016 the application rate was 1.6 and the fill rate only 47% ([www.st3recruitment.org.uk](http://www.st3recruitment.org.uk) 2017). In April 2011 there were 134 WTE Rehabilitation Medicine Consultants in the UK (Devinuwara K 2013). Given the British Society of Rehabilitation Medicine recommendations of 1.5 whole time equivalent Consultants per 250,000 of population, this results in a shortfall of 246 consultants, based on a UK population in 2011 of 63.26 million (McCann et al). Given that Rehabilitation Medicine is a growing speciality as people live longer, often with more chronic conditions, increasing recruitment into this specialty is critically important to meet the growing demand.

Core medical training currently encompasses two years of general medical experience and is generally completed following foundation training. Dependent on the deanery this tends to be done over four or six-month placements with the trainee able to choose to a certain extent

the different specialities that they can work in. It is a popular programme as it feeds into a number of different medical specialties at ST3 level. Although it is difficult to know the exact number of core trainees in the UK, 1494 posts were accepted in 2015 and 1468 posts accepted in 2014, giving a total number of 2962 core medical trainees in the UK. The real number will obviously be slightly less than this due to those dropping out.

This project therefore sets out to look at what experience core medical trainees have a Rehabilitation Medicine and what their attitude is towards Rehabilitation Medicine.

### **Methods**

A survey was sent out to all medical trainees in the country. The survey consisted of 10 questions and was deliberately designed to be short, i.e. to be able to be completed in less than 2 minutes (see below). In order to check that we were only collecting data from CT1s and 2s, we put other options in for level of training, in order to filter out those responses if necessary. Options for specifying when doctors had had experience of Rehabilitation Medicine, as well as the question for why they might not be applying, were designed so that multiple answers could be selected, as well as having a free text box to elaborate further. No question was compulsory meaning respondents could miss out questions should they wish, the idea behind this being to get a better response rate. Once designed, it was uploaded to SurveyMonkey© and the link sent to each Local Education Training Board (LETB) in turn. This took place between February and April 2015. Although it was not possible from the results to tell which regions had been able to send out the survey, we had positive confirmation from most regions, as shown below.

**Box 1. Questionnaire as sent out to core medical trainees**

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*Attitudes of core medical trainees towards Rehabilitation Medicine*

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**1. Are you male or female?**

Male

Female

**2. What is your current level of training?**

F1

F2

CT1

CT2

ST3-7

Associate Specialist

Staff grade

SHO (non-training post)

Registrar (non-training post)

Consultant

Other, please specify

**3. Have you heard of Rehabilitation Medicine as a specialty?**

Yes

No

**4. Have you had experience of Rehabilitation Medicine?**

Yes

No

Don't know

**5. If yes, when?**

As a medical student

As part of another job (please specify)

As work experience / shadowing

As a job specifically in Rehabilitation Medicine

Other (please specify)

**6. Are you applying for ST3 training this year?**

Yes

No

Don't know

**7. If yes, are you considering applying for a job in Rehabilitation Medicine?**

Yes

No

Don't know

Not heard of specialty

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**8. If no, why not?**

- I want to do another specialty
- Not sure I know what the job involves
- No previous experience
- Doesn't sound interesting
- Other (please specify)

**9. If you're not considering rehabilitation as a specialty, would you consider it if you had more experience?**

- Yes
- No
- Don't know

**10. If you were to be offered shadowing / taster days or a point of contact with a rehab SpR / Consultant would you take it up?**

- Yes
  - No
  - Maybe
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**Table 1.** LETBs approached and whether they sent the survey out to their trainees

<i>LETBs who confirmed they sent out the survey</i>	<i>LETBs who did not say whether it had been sent out</i>	<i>LETBs we did not manage to contact</i>
Health Education East Midlands	Health Education North West (North Western Deanery)	Scotland Deanery (South East)
Health Education East of England	Northern Ireland Medical & Dental Training Agency	
Health Education Kent, Surrey and Sussex		
Health Education North East		
Health Education North West (Mersey Deanery)		
Health Education South West (Severn Deanery)		
Health Education South West (South West Peninsula)		
Health Education Thames Valley		
Health Education Wessex		
Health Education West Midlands		
Health Education Yorkshire and Humber		
health education north west London		
health education south London		
health education north central and east London		
Scotland Deanery (East)		
Scotland Deanery (North)		
Scotland Deanery (West)		
Wales Deanery		

## Results

We had 300 responses in total. We excluded all those who were not CT1 or 2, leaving 294 results in total, which is approximately 10% of total medical CT1s and 2s. There were 152 CT1 responses and 142 CT2 responses, meaning they were roughly equal. 179 (61%) were female.

85% had heard of Rehabilitation Medicine, but only 36% had had direct experience of it. Table two shows where trainees had gained some experience of rehabilitation. The free text comments suggested most had encountered Rehabilitation Medicine as part of another job (43%), which tended to be either part of the foundation training programme, as part of cross covering the rehab wards on call or as part of stroke medicine / elderly care.

**Table 2.** Experience of Rehabilitation Medicine in 131 with experience

	Count	Percentage	Percentage of total respondents (294)
As a medical student	28	21%	10%
As part of another job	54	41%	18%
As work experience / shadowing	5	4%	2%
As a job in Rehabilitation Medicine	31	24%	11%
Other (please specify)	13	10%	4%
<b>Total</b>	<b>131</b>	<b>100%</b>	

33% said they were applying for higher specialty training this academic year, with 3% unsure. However, only 4% said they were thinking of applying for Rehabilitation Medicine (at any point). Most wanted to do another specialty (66%), but after this, answers were equally split between being unsure what the job involved, not having experience of it and their opinion of it being uninteresting. Of the free text answers, some said they'd be interested in it but if it was combined with another specialty e.g. elderly care. One said they did not want to be a medical registrar.

**Table 3.** If you're not applying for Rehabilitation Medicine, why not?

	Count	Percentage	Percentage of total respondents
<b>I want to do another specialty</b>	145	43%	49%
<b>Not sure I know what the job involves</b>	70	21%	24%
<b>No previous experience</b>	46	14%	16%
<b>Doesn't sound interesting</b>	61	18%	21%
<b>Other (please specify)</b>	12	4%	4%
<b>Total</b>	<b>334</b>	<b>100%</b>	

Of those who were not considering it however, 26% said they would if they had more experience of it, with 37% saying they would take up taster days if offered.

## **Conclusions**

This is a sizeable study of core medical trainees nationwide. However, the fact that only 10% responded may mean that only those who already had opinions on Rehabilitation Medicine were moved to do so and thus the sample may not be truly representative. Furthermore, the nature of a quick online multiple-choice survey does mean that results are limited to these areas and more detailed work is needed, possibly in the form of focus groups and thematic analysis to explore attitudes more deeply and establish themes. It would also be beneficial to carry out similar surveys amongst the other specialty trainees Rehabilitation Medicine recruits from, in order to see if these attitudes are prevalent throughout those who are potentially eligible to apply.

There is a reasonable awareness of Rehabilitation Medicine as a specialty. Nevertheless, only about a third had had direct experience of it, with only 32 actually having had a job in it. The fact that only 4% of trainees (9 in the survey) are thinking of applying for Rehabilitation Medicine as a specialty is deeply concerning. The reasons for this were mixed. Most wanted to do another specialty but aside from this, answers were fairly evenly spread between not being sure what it involved, thinking it uninteresting and not having previous experience. One doctor stated they did not want to be a medical registrar which is an erroneous viewpoint since there are currently no general medical commitments as part of Rehabilitation Medicine, and this highlights the misunderstandings often seen around the nature of Rehabilitation Medicine.

Both not having any previous experience and not being sure what it involved could be addressed quite easily. Methods could include: taster sessions, more foundation training places were available within rehab medicine or including it as part of a more general ward cover during out of hours. Having a greater presence at careers fairs and including it as part of the medical training could be useful also. 26% (75 people in this survey) said they would consider it if they had more experience and 38% would take up shadowing or taster days, suggesting that in theory trainees are not prejudiced towards rehab medicine and these attitudes could be changed. More work now needs to be done on what exactly would be reasonable to offer and how this could be implemented.

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## **Conflict of interest statement**

The authors declare that there is no conflict of interest.

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