

Working as a rehabilitation medicine specialist

New Zealand rehabilitation medicine specialists talk about the reality of working within this field

Why did you choose rehabilitation medicine and what do you like most?

Rehabilitation medicine provides an opportunity to work in a multidisciplinary environment and is not only concerned with physical impairments and disabilities but also with psychological and social factors. Rehabilitation medicine emerged in response to the needs of those injured in wartime (particularly following the Second World War) and is now one of the fastest growing medical specialties in Europe, North America and Australia.

What strengths and abilities make a good rehabilitation medicine specialist?

Rehabilitation specialists collaborate with rehabilitation nurses, allied health therapists and other specialists, so you need to work well as part of a team. Excellent interpersonal and communication skills are required. You need scientific, evidence-based knowledge as well as the ability to think creatively and laterally to overcome the challenges associated with disability and handicap.

As a specialist, can you describe a typical day?

A typical day might include conducting ward rounds and outpatient clinics, reviewing and assessing new referrals, planning and evaluating rehabilitation programmes for new admissions, holding discussions with therapists, attending multidisciplinary and family meetings, preparing reports, liaising with other specialists and rehabilitation providers and with referrers such as ACC and attending to administrative and managerial responsibilities.

What do you think are the future challenges of rehabilitation medicine?

New Zealand still lacks a solid rehabilitation medicine infrastructure. Ideally there should be three or four comprehensive rehabilitation services within the Auckland region that are headed by rehabilitation specialists and subscribe to the Australasian Faculty of Rehabilitation Medicine standards. Given the shortage of specialists and the heavy workloads of those who are active in the discipline, it will be a challenge to ensure that all people who would benefit from rehabilitation services are able to access them. The volume of patients is ever increasing and many patients are being transferred from acute settings to rehabilitation units at an early stage with an emphasis on re-integration back in the community, vocational activities and return to work.

What advice would you give someone thinking about a career in rehabilitation medicine?

You should give serious consideration to pursuing the specialty if you enjoy clinical medicine and desire to work in a multidisciplinary environment with long-term follow-up of patients. It is very rewarding to work with and assist people with disabilities. There are also excellent employment opportunities and the job does not entail the stresses associated with more acute medical

subspecialties. Private work opportunities (mostly ACC clients and work at private rehab providers) are also available.

What are future opportunities in rehabilitation medicine?

There are currently seven rehabilitation centres in New Zealand with AFRM-approved registrar training programmes. Nationwide there is a need for more consultants in this discipline so job prospects should continue. There is also enormous potential to focus on a particular area such as spinal rehabilitation, amputee and prosthetic management or pain management.

What is the work/life balance like?

One specialist said that it would probably be preferable to complete vocational training before taking time out, though there is a part time training option. On call commitment is much less demanding and could be easily covered from home on the phone

Rehabilitation medicine is not an acute specialty so the work in this field is not too stressful. During training a significant amount of time needs to be devoted to study - the training programme is demanding and requires support and understanding from families.

What are the disadvantages of rehabilitation medicine?

Administrative and managerial skills are usually required (and can take a significant proportion of your working time), although it will help that training in this area is now included as part of the AFRM registrar training programme.

Any comments on the current training?

The training programme is quite structured. Each trainee is closely supervised and progress is monitored by the AFRM Board of Censors. Weekly tutorials, rotating between Rehab Plus and the Spinal Injury Unit, take place throughout the year. Three national two day training seminars take place every year at various rehab centres in New Zealand. These are exam oriented and registrars find them quite useful.