# 2017 NATIONAL TRAINEE SURVEY RESULTS

**GERIATRIC MEDICINE** 

SPECIALTY SPECIFIC QUESTIONS

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# Introduction

The Specialty Specific Questions have been developed to test trainee's access to, participation in or confidence in the attainment of specific aspects of the specialty training curriculum.

The questions have been included Programme Specific Questions in the annual GMC National Trainee Survey. The details of these questions and the trainee responses (nationally, by Deanery/LETB and by grade can be found within this report.

649 Geriatric Medicine trainees (142 ST3, 139 ST4, 155 ST5, 128 ST6 84 ST7 and 1 ST8 trainee) an overall decrease of 2% compared to 2016, completed the 2017 survey. The numbers of trainees in each Deanery / LETB completing the survey were as follows:

Deanery / LETB	ST3 -7	ST3 -7	%
	2016	2017	Difference
Health Education East Midlands	40	37	-7%
Health Education East of England	31	44	+30%
Health Education Kent, Surrey and Sussex	45	39	-13%
Health Education N, C & E London	45	35	-22%
Health Education North East	35	32	-9%
Health Education North West	75	76	+1%
Health Education NW London	34	30	-12%
Health Education South London	37	41	+10%
Health Education South West	42	42	+0%
Health Education Thames Valley	24	24	+0%
Health Education Wessex	29	27	-7%
Health Education West Midlands	56	47	-16%
Health Education Yorkshire and the Humber	54	53	-2%
NHS Education for Scotland	60	65	+8%
Northern Ireland Medical & Dental Training Agency	15	15	+0%
Wales Deanery	38	42	+10%
Total	660	649	-2%

Reduction of >10% trainees completing the NTS in 2017 compared to 2016



# **Specialty Specific Questions**

Specialty Specific Questions	% trainees agreeing	2015/2016	Agreement Hig	hest	Agreement Low	rest
(Geriatric Medicine)	overall	Difference			_	
1) Please indicate any training areas that						
you do not feel confident you will attain						
during your training programme (select all						
that apply) (ST3 – ST7)						
None, I am confident of attaining all areas	58% (375/649)	+ 1%	THA, WAL	(71%)	London (NW)	(37%)
Old age psychiatry	19% (126/649)	No change	London (NW)	(40%)	Scotland	(11%)
Continence	18% (117/649)	- 3%	London (NW)	(33%)	North East	(6%)
Community Geriatrics	17% (110/649)	- 1%	London (NW)	(37%)	NIR, WAL	(7%)
Tissue viability	16% (101/649)	No change	Northern Ireland	(27%)	Wessex	(7%)
Movement disorder	10% (68/649)	- 3%	LDN (NC&E, NW)	(23%)	South Western	(2%)
Rehabilitation	8% (52/649)	- 1%	South Western	(19%)	NIR, WAL	(0%)
Orthogeriatrics	6% (37/649)	- 7%	West Midlands	(13%)	NE, NIR	(0%)
Palliative care	6% (41/649)	No change	Northern Ireland	(20%)	East of England	(0%)
Stroke	5% (34/649)	- 1%	London (NC&E)	(14%)	KSS	(0%)
Planning transfers of care	4% (28/649)	No change	East Midlands	(11%)	WAL, YAH	(0%)
Comprehensive Geriatric Assessment	3% (20/649)	- 1%	LDN (NW,S), NIR	(7%)	EMD, WAL, WES	(0%)
Poor mobility	2% (13/649)	- 2%	LDN (NW), NIR	(7%)	EMD, EOE, SCO, WAL	(0%)
Falls	2% (12/649)	- 4%	LDN (NW), NIR	(7%)	EMD, LDN (S), SW, WAL, V	VES, YAH (0%)
2) How frequently are you able to attend						
dedicated subspecialty sessions (e.g.						
palliative care, community)? (ST3 – ST7)						
Always	7% (45/649)	New for	London (S)	(15%)	LDN (NC&E), NIR	(0%)
Most of the time	55% (360/649)	2017	North East	(72%)	London (NW)	(50%)
Rarely	31% (203/649)		Northern Ireland	(47%)	East Midlands	(16%)
Never	6% (41/649)		KSS	(13%)	NE, NIR, THA	(0%)



Specialty Specific Questions	ific Questions % trainees agreeing 2015/2016 Agreement Highe		ghest	Agreement Lowest		
	overall	Difference			_	
3) How would you describe the ratio of						
G(I)M to Geriatric Medicine in your						
current rotation? (ST3 – ST7)		New for				
Too much G(I)M	27% (177/649)	2017	Wessex	(26%)	NE, NW, NIR, WMD	(0%)
About right	68% (443/649)		Northern Ireland	(93%)	East Midlands	(46%)
Too little G(I)M	4% (29/649)		East Midlands	(51%)	NIR, WES	(7%)
4) Do you think that the amount of G(I)M						
in your current rotation adversely affects						
your Geriatric Medicine training?		New for				
(ST3 – ST7)		2017				
Yes	25% (159/649)		East Midlands	(41%)	Wessex	(0%)
No	67% (435/649)		Wales	(85%)	East Midlands	(41%)
Don't know	8% (55/649)		East Midlands	(19%)	SW, WMD	(0%)
5) If you have applied for Out Of						
Programme (OOP) time from your						
Geriatric Medicine training, what was the						
outcome of your application? (ST3 – ST7)						
N/A (I have not applied for OOP time)	84% (544/649)		NW, NIR	(93%)	Wessex	(67%)
Granted	15% (100/649)	New for	Wessex	(30%)	NW, NIR	(7%)
Declined	<0.5% (2/649)	2017	LDN (NC&E)	(3%)	14/16 regions	(0%)
Deferred	<0.5% (3/649)		WES	(4%)	13/16 regions	(0%)



Quality Criteria	% trainees agreeing	2015/2016	Agreement Highest		Agreement Lowest	
	overall	Difference				
6) If you have taken OOP time to						
undertake research or intend to in the						
future, which of the following best						
describes the main focus of this?						
(ST3 – ST7)		New for				
N/A (have not taken nor intend to take	82% (535/649)	2017	East of England	(98%)	East Midlands	(62%)
time out for research)						
Laboratory or patient based research	5% (34/649)		North East	(16%)	LDN (NW), NW, NIR	(0%)
Medical management training/experience	6% (39/649)		YAH	(17%)	EOE, NW, NIR	(0%)
Medical education training/diploma	3% (21/649)		Wales	(10%)	EOE, LDN (NW), NIR, SW, WES, YAH	(0%)
Other	3% (20/649)		Wessex	(11%)	EOE, LDN (NC&E), NE, SWN, THA	(0%)
7) In your ordinary working week are you						
able to find sufficient time for supporting						
professional activities such as audit or		New for				
Quality Improvement? (ST3 – ST7)		2017				
Yes	60% (390/649)		London (NC&E)	(63%)	North East	(25%)
No	40% (259/649)		North East	(75%)	London (NC&E)	(37%)



Quality Criteria	% trainees agreeing	2015/2016	Agreement Highest		Agreement Lowest	
•	overall	Difference			_	
8) Within the last year, how many non-						
clinical management or organisational						
meetings (e.g. about service development						
with commissioners, trust managers or						
boards etc) have you attended?		New for				
(ST3 – ST7)		2017				
0	31% (198/649)		London (NC&E)	(51%)	Wessex	(22%)
1	20% (132/649)		North East	(38%)	London (NW)	(10%)
2	18% (114/649)		North West	(30%)	London (NC&E)	(3%)
3	10% ( 64/649)		Northern Ireland	(20%)	London (NC&E)	(3%)
4	5% (33/649)		YAH	(13%)	EOE, THA, WAL	(0%)
More than 4	17% (108/649)		South Western	(31%)	Northern Ireland	(0%)
9) Overall, how satisfied or dissatisfied are						
you with your training in Geriatric						
Medicine? (ST3 – ST7)						
		New for				
Very satisfied	28% (179/649)	2017	Thames Valley	(46%)	London (NC&E)	(14%)
Satisfied	57% (369/649)	2017	Wessex	(74%)	South Western	(41%)
Neither satisfied nor dissatisfied	11% (71/649)		London (NC&E)	(23%)	NE, THA	(0%)
Dissatisfied	4% (24/649)		London (NC&E)	(12%)	THA, WAL, WES, WMID	(0%)
Very dissatisfied	1% (6/649)		London (NC&E)	(6%)	13/16 regions	(0%)

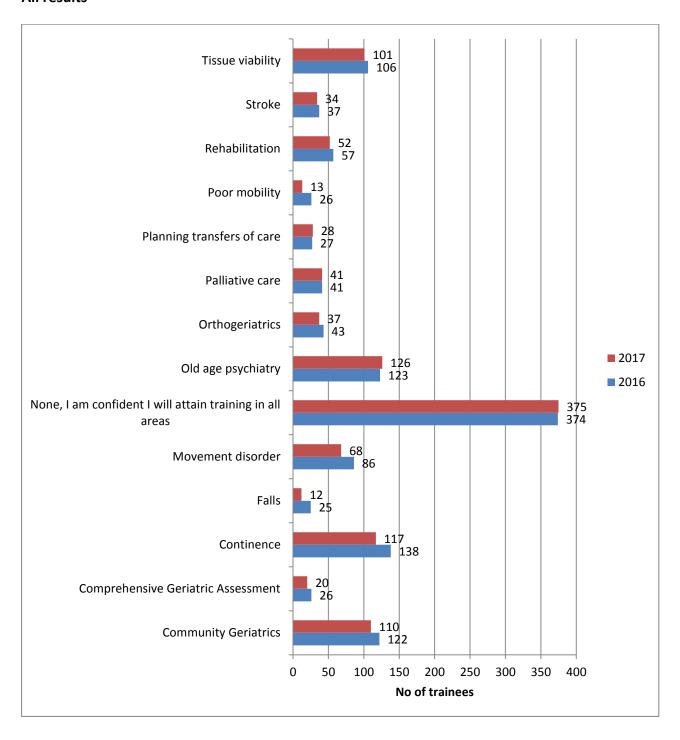


The Geriatric Medicine curriculum is broad and challenging. Some areas are easier to gain training in than others.

Q1. Please indicate any training areas that you do not feel confident you will attain during your training programme (select all that apply) 2015: n=619, 2016: n=660

All questions were asked of the following grades: ST3, ST4, ST5, ST6, ST7. There were no ST8s in 2016.

#### All results



	Sī	Г3	Sī	ST4 ST5		S	Г6	ST7		
Number of	162	142	160	139	147	155	108	128	83	84
trainees =										
Year	2016	2017	2016	2017	2016	2017	2016	2017	2016	2017
Community	41	26	32	24	31	32	13	23	5	5
Geriatrics	(25%)	(18%)	(20%)	(17%)	(21%)	(21%)	(12%)	(18%)	(6%)	(6%)
Comprehensive										
Geriatric	10	10	8	6	5	3	2	0	1	1
Assessment	(6%)	(7%)	(5%)	(4%)	(3%)	(2%)	(15%)	(0%)	(1%)	(1%)
Continence	28	28	43	26	41	36	17	22	9	5
	(17%)	(20%)	(27%)	(19%)	(28%)	(23%)	(16%)	(17%)	(11%)	(6%)
Falls	8	4	6	4	8	2	17	1	9	1
	(5%)	(3%)	(4%)	(3%)	(5%)	(1%)	(16%)	(1%)	(11%)	(1%)
Movement	26	21	27	15	23	21	8	8	2	3
disorder	(16%)	(15%)	(17%)	(11%)	(16%)	(14%)	(7%)	(6%)	(2%)	(4%)
None, I am										
confident I will										
attain training	95	79	66	73	69	73	75	73	69	67
in all areas	(59%)	(56%)	(41%)	(53%)	(47%)	(47%)	(70%)	(57%)	(83%)	(80%)
Old age	36	37	44	28	29	33	12	23	2	5
psychiatry	(22%)	(26%)	(28%)	(20%)	(20%)	(21%)	(11%)	(18%)	(2%)	(6%)
Orthogeriatrics	16	14	15	11	9	8	2	2	1	2
	(10%)	(10%)	(9%)	(8%)	(6%)	(5%)	(2%)	(2%)	(1%)	(2%)
Palliative care	9	15	16	8	11	10	3	7	2	1
	(6%)	(11%)	(9%)	(6%)	(7%)	(6%)	(3%)	(5%)	(2%)	(1%)
Planning										
transfers of	10	11	9	9	4	4	3	3	1	1
care	(6%)	(8%)	(6%)	(6%)	(3%)	(3%)	(3%)	(2%)	(1%)	(1%)
Poor mobility	9	6	9	4	6	2	2	0	0	1
	(6%)	(4%)	(6%)	(3%)	(4%)	(1%)	(2%)	(0%)	(0%)	(1%)
Rehabilitation	19	19	20	13	13	13	4	6	1	1
	(12%)	(13%)	(12%)	(9%)	(9%)	(8%)	(4%)	(5%)	(1%)	(1%)
Stroke	16	14	13	8	6	10	2	1	0	1
	(10%)	(9%)	(8%)	(6%)	(4%)	(6%)	(2%)	(1%)	(0%)	(1%)
Tissue viability	26	29	40	24	23	27	13	18	4	3
	(16%)	(20%)	(25%)	(17%)	(16%)	(17%)	(12%)	(14%)	(5%)	(4%)
Grand total	349	313	348	262	278	274	158	187	98	97

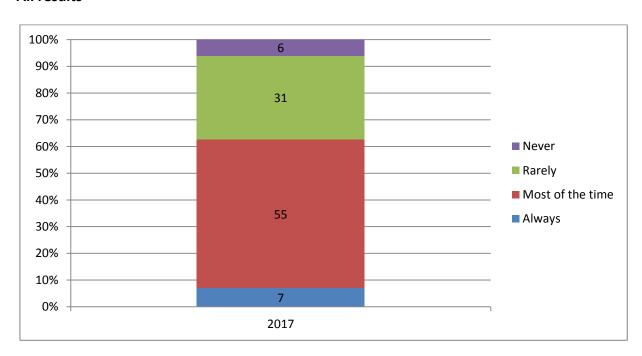
Higher % of trainees not confident they will attain area during their training programme
Lower % of trainees not confident they will attain area during their training programme
No change to % of trainees not confident they will attain area during their training programme
Increase in confidence of attaining training in all areas of the curriculum
Decrease in confidence of attaining training in all areas of the curriculum

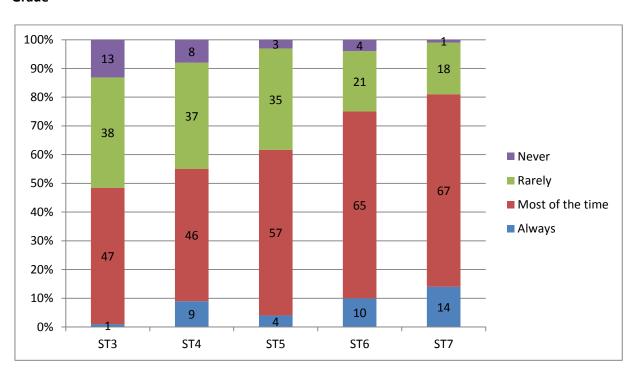


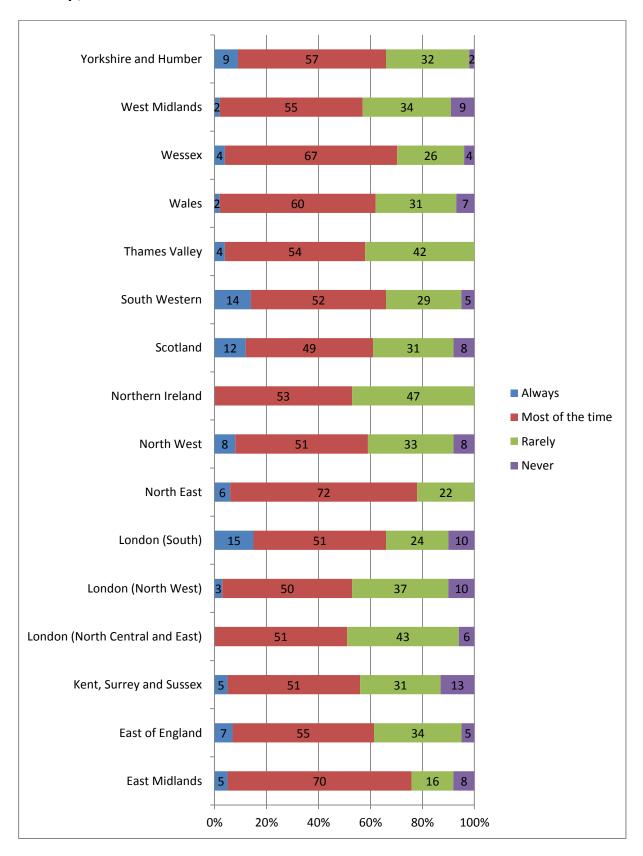
# Q2. How frequently are you able to attend dedicated subspecialty sessions (e.g. palliative care, community)?

(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

## All results





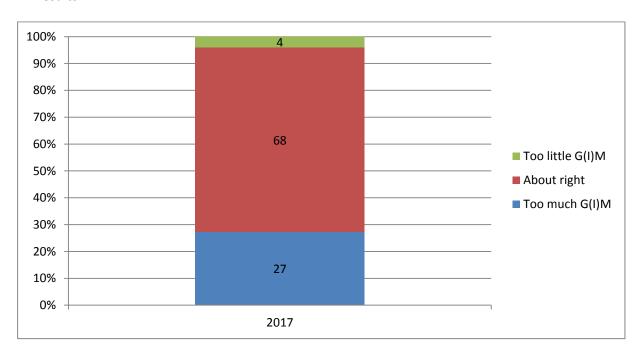


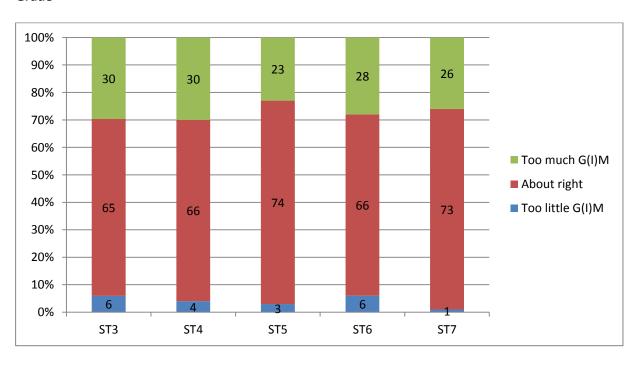


# Q3. How would you describe the ratio of G(I)M to Geriatric Medicine in your current rotation?

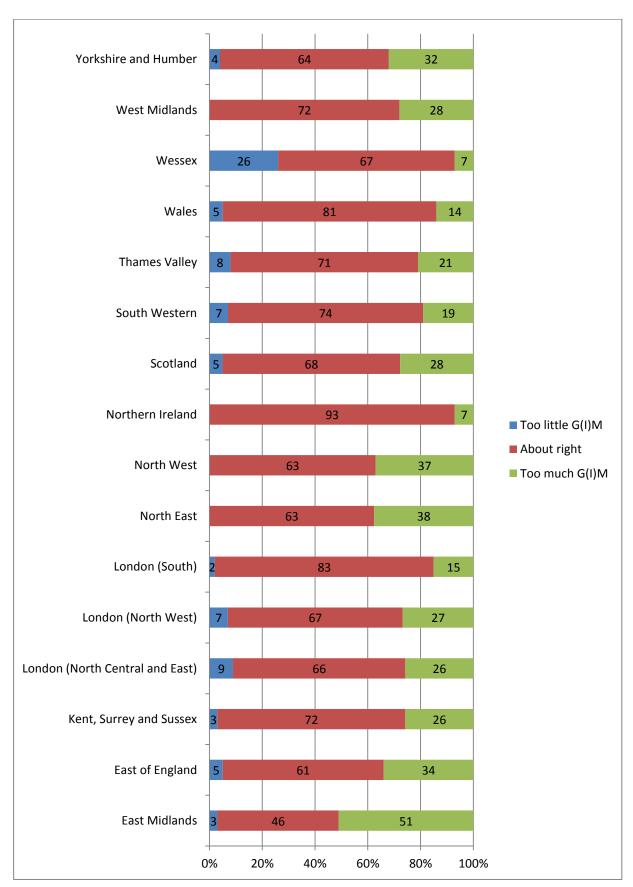
(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results







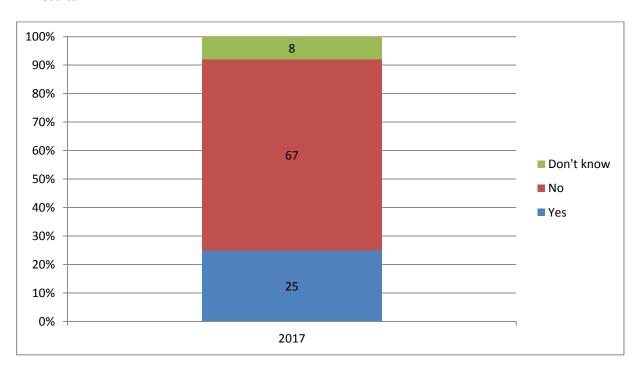


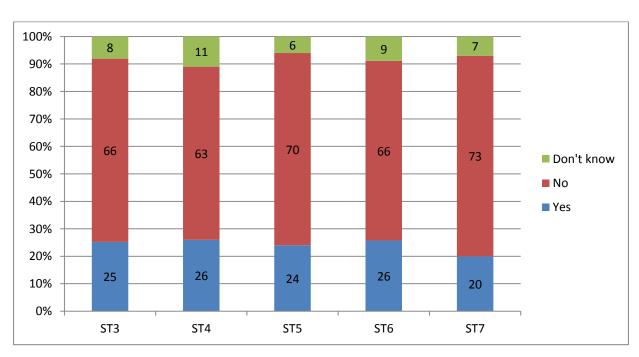


# Q4. How would you describe the ratio of G(I)M to Geriatric Medicine in your current rotation?

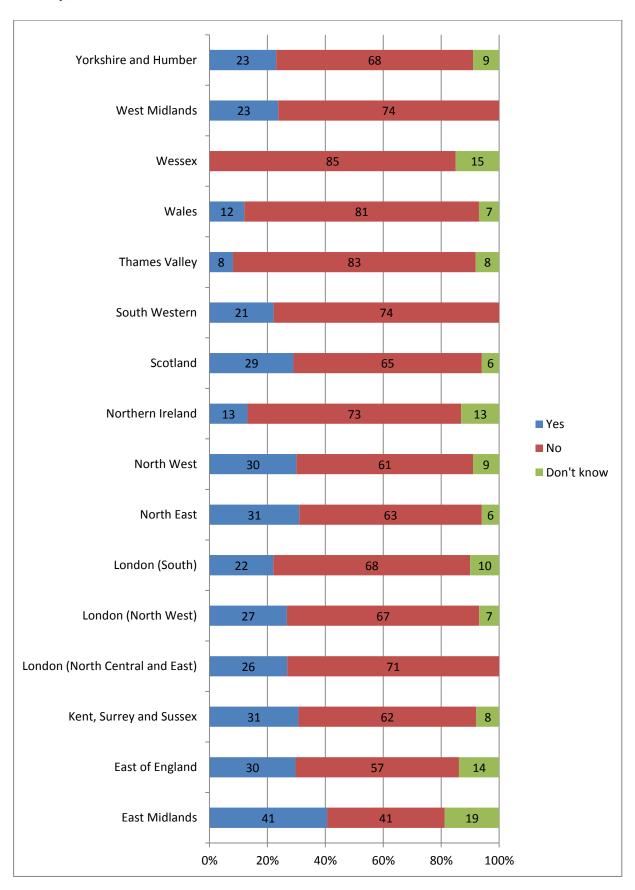
(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results







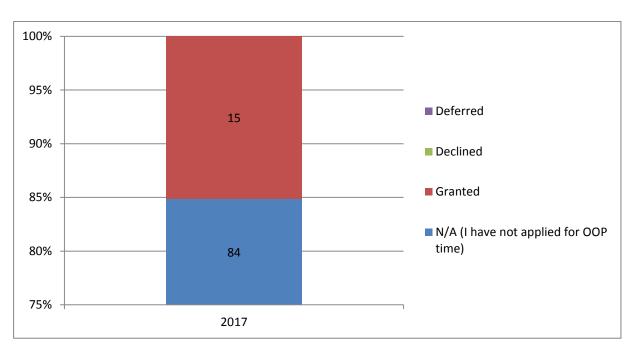


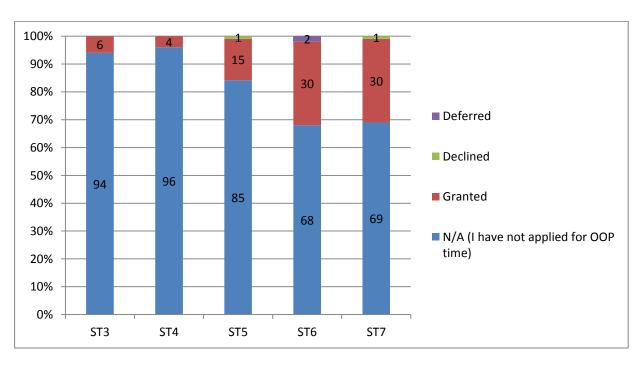


# Q5. If you have applied for Out Of Programme (OOP) time from your Geriatric Medicine training, what was the outcome of your application?

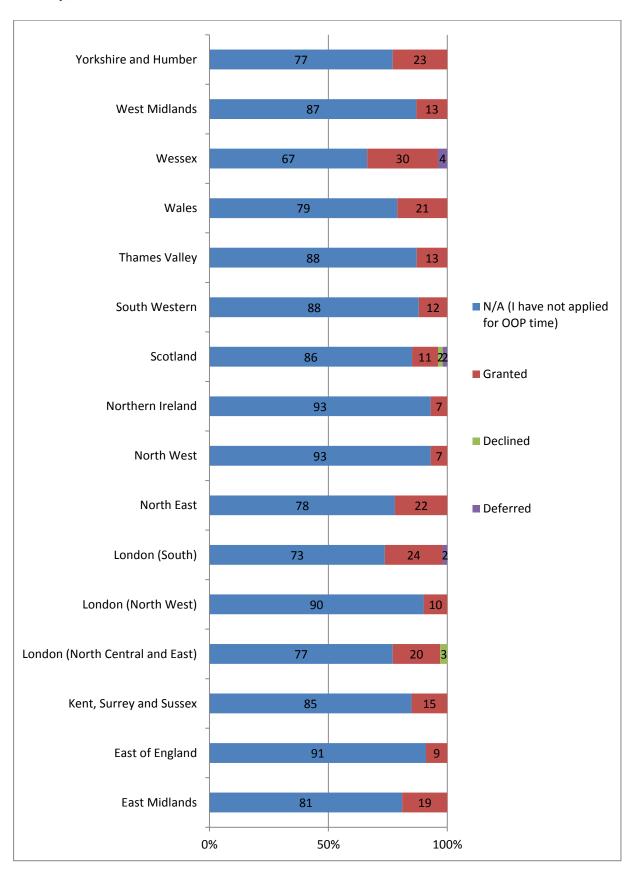
(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results







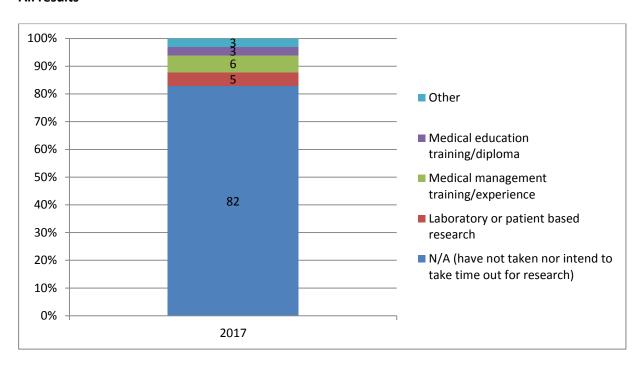


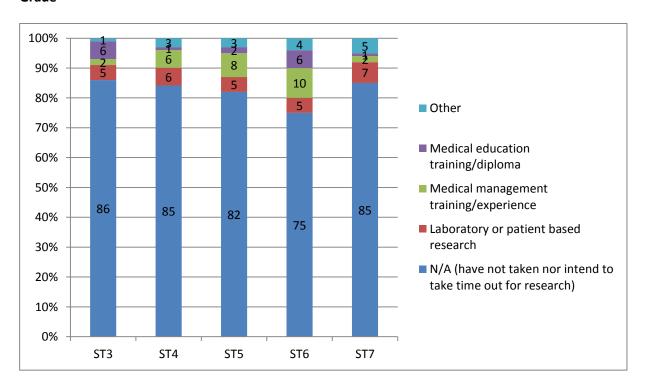


Q.6 If you have taken OOP time to undertake research or intend to in the future, which of the following best describes the main focus of this?

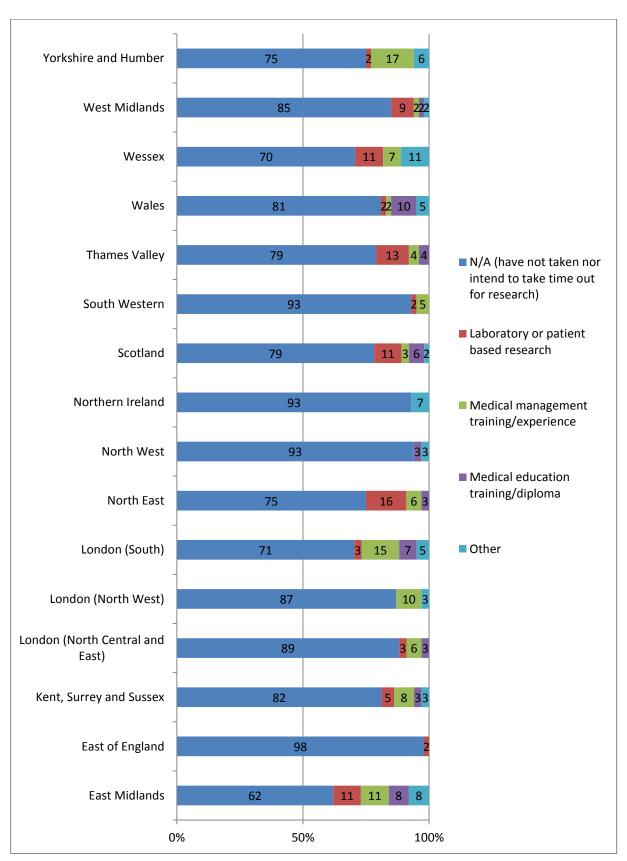
(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results







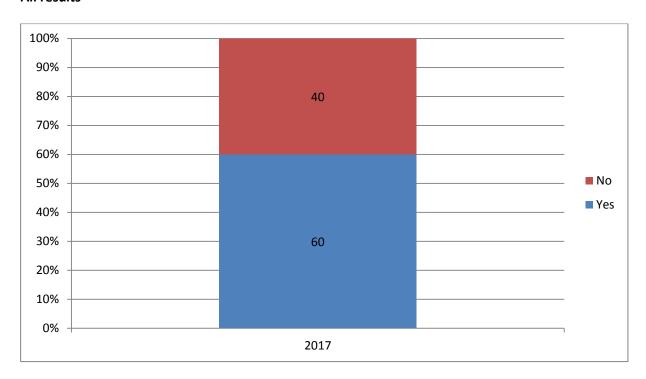


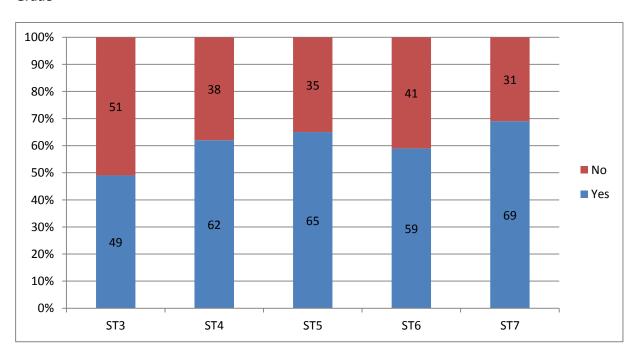


# Q.7 In your ordinary working week are you able to find sufficient time for supporting professional activities such as audit or Quality Improvement?

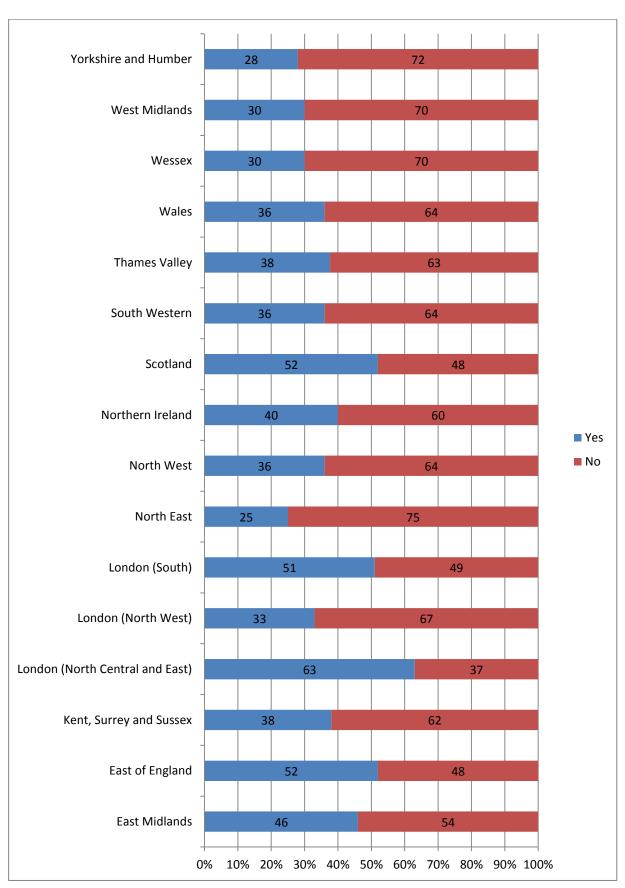
(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results







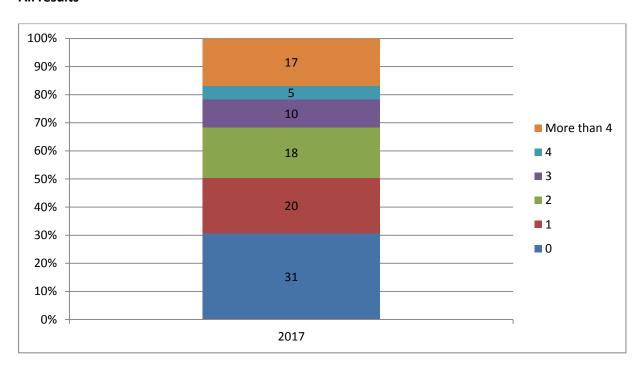


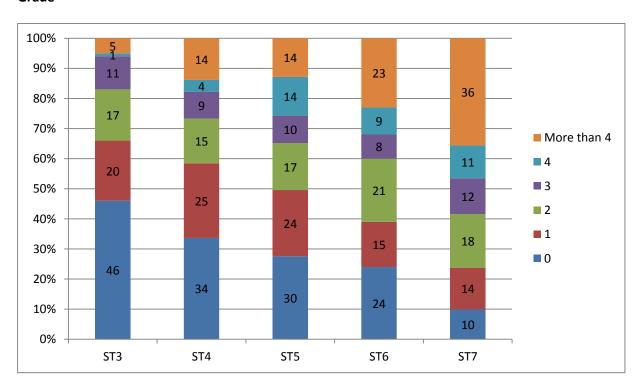


Q.8 Within the last year, how many non-clinical management or organisational meetings (e.g. about service development with commissioners, trust managers or boards etc) have you attended?

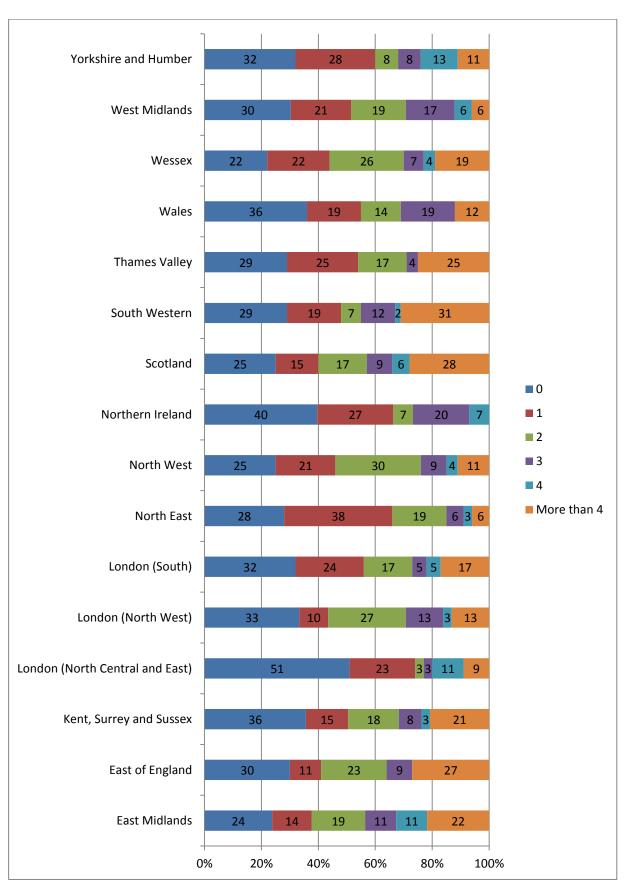
(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results











## Q.9 Overall, how satisfied or dissatisfied are you with your training in Geriatric Medicine?

(This question was presented to trainees of the following grades: ST3, ST4, ST5, ST6, ST7) 2017: n=649

#### All results

