

Working life (RM)

This page provides useful information about the roles and responsibilities of doctors in rehabilitation medicine, where they work, who they work with and what they feel about their role.

A rehabilitation medicine physician is an important part of the multidisciplinary team focused on assisting the patient and their family through times of adjustment. They are likely to be responsible for the team's activities in hospital settings. Using a coordinated approach the team uses their expertise managing physical, psychological and behavioural problems associated with both acute and chronic illnesses. I was attracted by the unique privilege in rehabilitation medicine to be part of an amazing team that guides the patient through their patient journey? from first meeting in the acute hospital to their stay on a rehabilitation ward and then the transition back to the community. Rarely in clinical medicine do doctors have this opportunity.

- **Specialty trainee**

Rehabilitation medicine specialists work in a variety of settings including neurological rehabilitation centres for the most complex cases, stroke [1] units, other wards (including pre-amputation) and multidisciplinary outpatient services. The rehabilitation of people with spinal cord injuries takes place in supra-regional centres. RM has a central role in the management of patients within the major trauma networks.

How your time is spent

The specialty involves variety and flexibility in daily and weekly work patterns. Individual consultant job plans often focus on one or two main areas of work, such as:

- spinal cord injuries and other neurological rehabilitation
- amputee rehabilitation and other musculo-skeletal disabilities

Depending on the individual's specific role, a working day might include:

- ward rounds, multidisciplinary team meetings
- case conferences, best interests meetings
- phone calls and meetings with patients, families and community professionals
- outpatient clinics, including specialist and multidisciplinary clinics
- out-reach assessments on the acute wards
- home visits
- review of people in nursing or other residential settings

Rehabilitation specialists also provide services for specific groups such as young disabled adults, adults with learning disabilities complicated by physical impairments and patients with muscular dystrophies, movement disorders or chronic fatigue syndrome.

On-call and working hours

Rehabilitation is provided in many settings. Although few consultants in rehabilitation medicine are involved in unselected 'emergency take' rotas, those working in acute or post-acute hospital-based settings are generally required to provide on-call and or seven-day working alongside the other medical teams. However, some consultants are based on non-acute or community settings where the consultant's job plan may be based around a more standard working week pattern.

- Who you will work with?

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Doctors in Rehabilitation Medicine work alongside:

- nurses [2] and specialist nurses
- a wide range of medical and surgical specialties, e.g. neurologists [3], neurosurgeons [4], acute medicine specialists, orthopods [5], reconstructive surgeons, palliative care medicine [6] specialists, (neuro)psychiatrists [7], critical care teams
- physiotherapists [8]
- occupational therapists [9]
- speech and language specialists [10]
- psychologists [11]
- prosthetists [12]
- orthotists [12]
- dietitians [13]
- bioengineers
- medical secretaries and administrative staff [14]

They also work closely with other sectors and agencies of which examples are:

- social services
- education, employment, housing and legal services
- voluntary agencies
- independent sector
- the legal profession
- Attractions and challenges of the role

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It is highly rewarding to restore individuals to full health or to improve the wellbeing of people with a learning difficulty or disability. Rehabilitation medicine is ideal for anyone who is committed to holistic patient care as everything is done together with the patient, the family, the multidisciplinary team, social services and other agencies. It also suits those who like the combination of clinical, biopsychosocial and technical work.

The specialty also provides a huge variety of the types of patients being treated and the different areas of interest from acute phase post trauma to community rehabilitation. Many of the patients live the rest of their lives with a disability and they are followed lifelong by rehabilitation physicians. The

continuity of care is one of the huge perks of this speciality.

The specialty can be intellectually and emotionally demanding. Communicating to medical colleagues the importance of specialist interventions in securing good outcomes for people with complex disabilities can be challenging.

There is opportunity for those interested to do research; there are research active rehabilitation services around the country and the UK Rehabilitation Outcomes Collaborative national clinical database offers a rich resource for those interested in health services and outcomes research.

Further training options are also available such as a stroke fellowship or spinal cord medicine fellowship.

Source URL: <https://www.healthcareers.nhs.uk/explore-roles/doctors/roles-doctors/medicine/rehabilitation-medicine/working-life>

Links

- [1] <https://www.healthcareers.nhs.uk/glossary#Stroke>
- [2] <https://www.healthcareers.nhs.uk/explore-roles/nursing>
- [3] <https://www.healthcareers.nhs.uk/explore-roles/medicine/neurology>
- [4] <https://www.healthcareers.nhs.uk/explore-roles/surgery/neurosurgery>
- [5] <https://www.healthcareers.nhs.uk/explore-roles/allied-health-professionals/orthoptist>
- [6] <https://www.healthcareers.nhs.uk/explore-roles/medicine/palliative-medicine>
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- [14] <https://www.healthcareers.nhs.uk/explore-roles/administration>