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Research activity of specialist registrars

AIMS AND METHOD

There has been much discussion about the productivity and training value of protected research sessions at specialist registrar (SpR) level. We used questionnaire survey to investigate the research experience of senior psychiatric SpRs and first-year psychiatric consultants in Scotland.

RESULTS

The survey had an 80% response rate. Two-thirds of respondents were able to take protected research sessions, and a similar proportion had published research work during their higher training. Specific difficulties in conducting research are identified and discussed.

CLINICAL IMPLICATIONS

Scottish SpRs in psychiatry are usually able to protect research sessions, but experience difficulties with lack of experience, resources and supervision. Almost a third of those near the end of their training have published nothing. It is important to explore options other than research projects to gain relevant research experience.

The Higher Specialist Training Committee of the Royal College of Psychiatrists currently requires that one-fifth of the working week (two out of ten sessions) is protected time for research training. The aim is to allow trainees to develop the skills required to conduct and critically appraise research. The current prominence of evidence-based medicine and clinical effectiveness makes it essential that specialist registrars (SpRs) incorporate these skills into their routine clinical practice as new consultants.

There have been ongoing concerns regarding the productivity and training value of these protected research sessions. Williams & Curran (1998) conducted a postal survey that highlighted the difficulties encountered by senior registrars in psychiatry when conducting research. These were most acute for part-time trainees and included work intruding on research time, insufficient supervision and support and a general lack of resources.

The specialist registrar training grade was introduced in 1996 as recommended by the Calman Report (Calman, 1993). One of the principal aims of this step was to improve higher training by making it shorter but more structured (Kendell, 1995). Williams & Curran (1998) highlighted this change as an opportunity to improve trainees' experience of conducting research. However, more recent surveys suggest that problems with research training remain common. Cavanagh & Haut (1999) examined the transition from senior registrar to specialist registrar grade in Scotland, and found that 22% of SpRs in psychiatry were unable to take two research sessions per week as compared with 12% of senior registrars.

Vassilas *et al* (2002) found that only 30% of SpRs felt that allocated research time was used satisfactorily.

Other studies show that only half of SpRs in psychiatry had ever managed to secure a publication (Smart & Cottrell, 2000; Allsopp *et al*, 2002). These surveys also highlighted difficulties such as lack of protected time, inadequate supervision and poor resources (such as access to computers and software).

The Southeast Scotland SpRs in psychiatry formed a research group in 2001 with the aim of improving the use of research sessions and providing peer support. Discussions within the group highlighted dissatisfaction with the use of research time, and we became interested in exploring the research training experience of SpRs in psychiatry throughout Scotland.

Method

A questionnaire was sent in December 2001 to all SpRs in the final year of their psychiatric training and to all new consultant psychiatrists in Scotland in the year following appointment (all sub-specialties). The questionnaire was completed anonymously and one reminder was sent (January 2002). The questionnaire asked about:

- (a) Type of post held: location of post; full-time or part-time; academic or clinical; continuous blocks of research time.
- (b) Protected research time (yes/no):
 - (i) did the trainee consistently have protected research time?
 - (ii) did work undertaken during protected sessions contribute substantially to the number of publications achieved?
 - (iii) did work undertaken within protected sessions contribute substantially to the number of publications achieved?



- (iv) would the trainee rather have used research sessions for other training purposes?
- (c) Research produced: number of publications achieved prior to SpR appointment; number of publications achieved or expected at SpR level; was any work presented at scientific and College meetings? (yes/no)
- (d) Difficulties in conducting research: a checklist was provided (Table 1) and space left for description of any other difficulties.

The questionnaire was piloted locally, and pre-addressed, freepost envelopes were provided for responses.

Results

Forty questionnaires were sent to SpRs in psychiatry (all sub-specialties) in Scotland: 32 completed questionnaires were returned (80% response rate). Respondents were located in Glasgow (31%), Grampian (25%), south east Scotland (22%) and Tayside (9%), and one trained in both Grampian and Tayside. Three of those who replied had trained outside Scotland. Three-quarters of the respondents (24) trained full-time, five trained part-time and two had a mix of full-time and part-time training. Three respondents had had an academic post, and five had undertaken a continuous block of research while at SpR level. More than half of the respondents (17) had no publication prior to their SpR appointment. The number responding to the survey was too small to analyse whether the type of post held had any effect on research productivity.

Two-thirds (21) of the sample consistently had two sessions per week (or part-time equivalent) of protected time for research. Respondents thought that research work undertaken both during (21; 66%) and outside (18; 53%) protected sessions contributed substantially to the number of publications achieved. More than half of the SpRs (18) would rather have used the research session time for other training purposes.

A third (11) of the participants reported achieving no publications from research work conducted at SpR level; however, 11 had achieved one publication, nine had

achieved between two and five, one had between six and ten, and two had more than ten. Twenty-five respondents reported research work conducted as a SpR which remained unpublished. Of these 25 respondents, 11 hoped to achieve one publication from their work, seven hoped for two publications, and the remaining seven estimated three or more publications. Just over half of all trainees in the survey (17) had presented research work during SpR level at scientific or College meetings. Table 1 details the number of responses to each option on the checklist of possible research difficulties.

Discussion

Although the response rate to this survey was high, the number of SpRs participating was small and this limits the conclusions that can be drawn. It is encouraging that the majority of Scottish trainees in psychiatry (66%) were able to protect the allocated time for research, although this figure is lower than that found previously (78%) in Scotland by Cavanagh & Haut (1999).

It was disappointing that 34% of respondents (11) had published nothing by the time they neared the end of their training. This appears to confirm recent concerns that trainees' protected research time is not used effectively. On the other hand, most of these trainees expected to have research conducted as a SpR published in the near future, and a substantial proportion of all trainees had presented research at either scientific or College meetings. The most frequently reported difficulties suggest that better resources and more consistent quality supervision might enable trainees to publish more of their research work.

The survey did not attempt to measure the quality of the research produced, and the publications recorded ranged from high-quality peer-reviewed original research to letters in minor journals. Greater detail relating to the type of publications might have given some indication of the quality of research experience gained. Moreover, the number of publications is not the only measure of the quality of the training experience. A recent paper representing the views of the Collegiate Trainees' Committee (CTC) of the Royal College of Psychiatrists (Ramchandani et al, 2001) proposed that there should be a shift of emphasis away from the number of publications achieved towards the development of core and optional learning objectives relating to research training. The Committee suggested that trainees should be allowed greater flexibility in the means by which these research training objectives are met. With this in mind, it is interesting that more than half of the trainees responding to this survey wanted to use research sessions for other purposes. It is possible that this might be due to a genuine lack of interest in conducting research, but our survey suggests that it is more likely to reflect the trainees' sense of lack of achievement when attempting to conduct research in an environment perceived as lacking support and resources.

This survey indicates that SpRs continue to experience difficulties when conducting research projects and

Table 1. Difficulties in conducting research reported by specialist registrars in psychiatry

Difficulty	n (%)
Lack of previous research experience/skills	21 (66)
Generating ideas for project	14 (44)
Access to computing hardware/software	13 (41)
Supervision	12 (37)
Statistical advice	12 (37)
Designing studies	11 (34)
Protecting time for research	10 (31)
Recruiting subjects	10 (31)
Writing the paper	10 (31)
Rejection by journal	9 (28)
Computing skills	8 (25)
Funding	4 (12)
Ethical approval	2 (6)
Other problems	1 (3)



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perceive research environments as deficient in resources. Specialist registrars have tried to improve their experience by pooling research sessions into an extended, uninterrupted research block and by joint projects with other trainees. In some training schemes other research-based activities are being encouraged, such as evidence-based journal clubs, literature search workshops, higher trainees research days supported by an experienced researcher, peer support development, and involvement in the process of the development of evidence-based guidelines. The development of formal research training objectives (Ramchandani *et al*, 2001) and an increase in the flexibility of how SpRs use their protected research sessions in order to meet these objectives might improve the quality of research training for SpRs.

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Declaration of interest

None.

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