

How to demonstrate “commitment to specialty”

Whether you are applying for ST1 or ST3 level specialty training, one of the hurdles you will encounter during the application and interview process is demonstrating “commitment to specialty”.

While prior experience in a specialty you are applying for is *desirable*, demonstrating your consistent commitment to the specialty is *essential*. This guide will give you some ideas of what may count as evidence of this, as well as tips on how to create opportunities for acquiring a wide range of experiences.

What may count as “commitment to specialty”?

Many activities can boost your skills, show your commitment to specialty and make your portfolio stand out. This list below is not exhaustive - use your own creativity to come up with more options.

I. Relevant clinical exposure

1) Medical School

- An elective in a chosen (or related) specialty;
- Special Study Module in a chosen (or related) specialty.

2) Postgraduate experience

- a) Clinical rotation in a chosen specialty (desirable but not essential);
- b) Non-training post(s) in a chosen specialty, e.g. Clinical Fellow, LAS, ad-hoc locum work (check the eligibility criteria for entry to specialty training in your preferred specialty, because this may be a requirement that you have <18 months of specialty-specific experience by the time of appointment);
- c) Non-training post(s) in a related specialty (e.g. for O&G, consider general surgery, urology, sexual health);
- d) “Taster week” (see below);
- e) Shadowing an oncall specialty registrar while s/he reviews acute ward or GP referrals or sees patients in a “rapid access” clinic (this may not be possible or practical in some specialties, e.g. Public Health);
- f) Acquiring, practising and getting signed off for specific *specialty level* practical skills that may not be expected at your current level of training (e.g. skin biopsies, cardiac ultrasound, joint aspiration, colposcopy);
- g) Attending relevant clinical sessions outside your normal working requirements (e.g. MDTs where clinicians from your chosen specialty discuss difficult cases);
- h) Asking hospital teams to bleep you (*with patient’s consent*) when they have a patient with an interesting presentation related to your specialty of interest. If you arrive after a specialist review has taken place, you can think of a differential diagnosis and treatment plan and compare it with the specialist’s notes.

II. Taster week

Tasters can give you an insight into specialities you might not get a chance to rotate through in your F1, F2 or ST1/2.

How to organise a taster week?

- a) Plan a few weeks/months in advance, which will enable you to take appropriate study leave and organise highly relevant experiences.
- b) Think back to your medical school – was there a senior clinician who inspired you? Reach out to them and explain how your encounter with them have made you curious about their specialty.
- c) Think of renowned centres for your specialty. Approach Heads of Departments to organise a visit. You can either write a letter or arrange a phone call to discuss this.
- d) Think laterally. For a wannabe Acute Medicine Physician, it can be worthwhile to contact the local ambulance service to see if you can shadow their crews, rather than spending all “taster” days in A&E.

What to consider?

1) Remember that you do not have to have one continuous week of activities. In fact, it may not be possible to fit all the activities that would be useful to you in one period of 5 consecutive days. If you have a set number of days that can be used for a “taster week”, you can use them more strategically than a solid week in one Department shadowing one clinician. Visiting different sites will require more planning but is likely to provide a more meaningful and varied experience.

For example:

- *Monday 1st November*: general Dermatology clinic (AM); joint Dermatology/Pathology MDT meeting (PM) - at Hospital A;
- *Tuesday 2nd November*: Paediatric Dermatology clinic (AM); minor surgery (PM) - at Hospital A;
- *Thursday 4th November*: Specialist Psychodermatology Clinic (AM) - at Hospital B; Royal Society of Medicine Dermatology Section’s Clinical Cases meeting (PM);
- *Monday 8th November*: Special visit to a renowned tertiary referral centre (e.g. St John’s Institute of Dermatology) where you may shadow clinicians in 2-3 different Departments according to prior arrangement;
- *Tuesday 9th November*: Shadowing a Dermatology SpR oncall in an “emergency clinic” (AM); general Dermatology clinic (PM) - at Hospital A.

2) You will need a letter for your Evidence Portfolio confirming activities undertaken during your taster days/week. This should be signed either by someone who supervised your taster placement(s) or by your Educational Supervisor.

3) Write up your experiences with a view to publish this “report” in a specialty magazine/Newsletter or a publication for junior doctors (e.g. <http://www.juniordr.com/> or <http://www.hospitaldr.co.uk/>), or sBMJ.

III. Research

1) Medical School

- Specialty-specific summer research project;
- Intercalated BSc with a lab-based research component

2) Postgraduate experience

- a) Attending and taking active part in non-mandatory specialty-specific Journal Clubs (or setting one up);
- b) Co-authoring a paper (if lab-based projects are not practical due to full-time work, consider getting involved in a clinical pilot/feasibility study, e.g. <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1797057/>);
- c) Helping a specialty Trials Nurse/Co-ordinator to recruit patients into a trial;
- d) Taking active part in patient focus groups for specific research initiatives;
- e) Submitting ideas for Clinical Trials to a specialty-specific Clinical Trials Group (e.g. UK Dermatology Clinical Trials Network: <http://www.ukdctn.org/ukdctn/index.aspx>);
- f) Demonstrating involvement with grant applications for specialty-specific research;
- g) A postgraduate research degree (MD/PhD) focusing on a topic relevant to your chosen specialty.

Alternatives to “original paper” publication

- a) Letter to the Editor
- b) Opinion piece
- c) Review Article
- d) Blog (start your own blog on the topics relevant to your specialty, for example, this Radiology trainee created <https://radiologycafe.com/about>; alternatively, you can contribute to existing educational websites for students and junior doctors: BMJ Careers, <http://doc2doc.bmj.com/>, https://meducation.net/blog_posts, <http://medicaleducator.co.uk/write-for-us>)

IV. Awards, Prizes and Essay competitions

You should regularly search for “trainee prizes”, “awards”, “competitions”, “bursaries”, “scholarships” and “essay competitions”. Some people find it helpful to keep a database of these, so that you can plan several months in advance and keep track of your applications.

Bursaries count as “prizes”. Medical students and Foundation doctors can win bursaries just for attending conferences. The first hurdle to win a prize is to identify one. There are many places to look!

Competitions, bursaries, awards and prizes for junior doctors can be found on specialty society or Royal College webpages (e.g. for O&G: <https://www.rcog.org.uk/en/careers-training/awards-grants-prizes/>), or through national organisations, such as the Royal Society of Medicine or Medical Women’s Federation:

<https://www.rsm.ac.uk/prizes-awards/trainees.aspx>
<https://www.rsm.ac.uk/prizes-awards/other-prizes-and-awards.aspx>
<http://www.medicalwomensfederation.org.uk/advice-support/grants-prizes>

In addition to your specialty, look at related specialties too, for example, a wannabe Dermatologist should regularly look out for events, prizes and essay competitions for Renal Medicine, Geriatric Medicine, Paediatrics, Allergy, Haematology, Pathology, Immunology, Oncology.

V. Attendance of specialty-specific conferences and events

To identify relevant events, use the same principles and tips as described under “Awards, Prizes and Essay Competitions” above. In addition, ask an approachable Consultant about *niche* (subspecialty) events for your chosen specialty that you would not have heard about (e.g. Melanoma Focus Group: <http://melanomafocus.com/>)

You can attend as a delegate or as a presenter, and you can present at a local meeting, regional, national or international event (in increasing order of importance for scoring points during specialty application process).

1) As a delegate

Attending as a delegate enables you to collect CPD events while demonstrating enthusiasm for your specialty.

2) As a presenter

Attending with a poster or oral presentation offers extra benefits:

- a) Boost your CV and portfolio;
- b) Practice presentation skills;
- c) If this is a major conference, abstracts are usually published in the relevant society’s journal (usually peer-reviewed);
- d) Opportunity to get noticed by more senior clinicians in your specialty of interest (opportunities for networking and collaboration);
- e) Opportunity to win a prize.

Local presentations (e.g. at a local Trust/ hospital where you have been working, or at an educational institution where you studied)

- Most hospitals and departments organise Grand Rounds and half-day training and educational days.
- Ask your Consultant when your team is due to present next time.

Regional presentations (refers to presentations confined to, for example, the county, LETB/Deanery, Strategic Health Authority, or a recognised cluster of hospitals, extending beyond one city)

- These carry more weight than local setting.

National presentations (e.g. relevant Royal College or specialty society, RSM, Medical Women’s Federation)

- Look out for call for abstracts of oral or poster presentations (usually several months in advance), and don’t forget presenting opportunities through related specialties or organisations (e.g. national charities).

International presentations (i.e. in a country other than your country of residence/education at time of delivery or a recognised international meeting that rotates to different countries, e.g. AMEE)



Tip: When attending events and presenting your work, note the number of selected presenters and find out from the organisers about the competition ratio at the short-listing stage. Including this information is beneficial to quantify (“state what percentage of the medical school class obtained that award”).

VI. Self-directed learning

- a) Specialty-specific webinars and e-Learning modules (e.g. doctors.net.uk, BMA)
- b) Certificate or Diploma related to chosen specialty
- c) Attending non-compulsory courses (these could be courses run by the specialty society, or a Royal College, or a reputable independent provider). Consider long-distance courses that you can do in the evenings or on weekends (e.g. Epidemiology and Statistics for Public Health)
- d) Part 1 of a specialty-specific exam isn’t required for specialty applications and won’t provide direct advantage in the recruitment process. However, this can demonstrate your enthusiasm for and commitment to the specialty. Some doctors find it beneficial to undertake this study early in their careers. However, you must ensure this doesn’t detract from completion of foundation training and developing an excellent foundation portfolio.
- e) Speak to higher trainees in the specialty about courses that would give a head-start as ST3 (e.g. “Biology of the Skin course” and a surgical skills course for a future Dermatology registrar, or Advanced Life Support in Obstetrics and the Basic Practical Skills course for a future O&G registrar).

VII. Teaching and training others

- a) Arrange a training session for medical students, your own peers, other trainees (e.g. GP trainees) or other healthcare professionals (e.g. nurses) on a practical “hot topic” from your specialty, for example, a budding Dermatologist could run a session on emollients and steroid creams for common skin presentations.
- b) Attend a *Train the Trainer* or another teaching skills course.
- c) Approach local schools with a suggestion to do short talks to inspire pupils into pursuing a career in medicine.
- d) Think laterally about what the general public may find useful. For example, a wannabe Dermatologist could offer a talk at a local school on “Sun and the skin” awareness for young people, a wannabe Psychiatrist could do a talk raising awareness of depression, anxiety and eating disorders amongst young people. A budding Paediatrician who has a neonatal resuscitation certificate could contact local

providers of courses for new parents, and can discuss a possibility of co-delivering a 'baby resus' session. For example:

<http://www.redcrossfirstaidtraining.co.uk/Courses/First-aid-public-courses/First-aid-for-baby-and-child.aspx>

<http://www.sja.org.uk/sja/first-aid-advice/first-aid-for-parents.aspx>

<https://www.nct.org.uk/courses/postnatal/baby-first-aid>

- e) Approach a relevant medical society at your local medical school and suggest a session on practical skills. For example, a budding Plastic Surgeon could arrange a surgical skills practice for medical students.
- f) If you perform well during a mandatory course, such as ALS, you could train as an ALS course provider, which would be highly desirable for Emergency Medicine, Intensive Care and Acute Medicine.

VIII. Getting associated with a relevant Royal College

- a) If you haven't got a full membership, you can get an associate membership;
- b) Involvement with a College trainee committee.

IX. Involvement with a specialty society or association

- a) Apply to join a trainee committee for your specialty society/association (e.g. British Association of Dermatologists), which can be at a national level, or as a local representative;
- b) Get a Junior or Associate Membership (e.g. British Undergraduate Society of Obstetrics and Gynaecology (BUSOG) - <http://busog.org.uk/>), a national organisation for medical students and junior doctors considering a career in O&G)
- c) Look for research-active networks for the specialty (UK, Europe, global), and subscribe to their mailing list (e.g. <http://www.ukdctn.org/ukdctn/index.aspx> for Dermatology). You can then look out for opportunities to contribute to their trials, as well as to get involved with patient focus groups.

X. Getting involved with a specialty-related charity

- a) Offering practical support to the specialty-related charities (e.g. designing or updating leaflets for patients);
- b) Suggesting a community project raising awareness about something important in your specialty (e.g. a wannabe Respiratory physician could approach a local Charity, which works with young people from disadvantaged backgrounds to discuss an opportunity to run some workshops on the benefits of stopping smoking);
- c) A budding Neurologist may wish to visit a local MS Support group, interview patients about their unique experiences of the health care services, and then write it up as a piece in a specialty Newsletter/magazine.

Leadership and Management

- a) Join and participate (or set up) a specialty-related society at your local medical school (e.g. offer to give regular talks and/or to bring in useful speakers, or offer to contribute to a Student Careers Fair, for example, by reviewing and updating specialty information in the delegate packs or by volunteering to design leaflets with careers info for your specialty);
- b) Offer to review and update (or create from scratch) a local guideline or a specialty-specific section in the Induction Pack;
- c) Quality Improvement Project (e.g. design and test a new admission clerking proforma);
- d) Help a specialty Trials Co-ordinator to recruit patients into a trial;
- e) Volunteer to be a specialty rota organiser;
- f) Contribute to Departmental induction programme;
- g) Volunteer as a Trainee representative on specialty-related committees;
- h) Get involved with Clinical Commissioning Groups or Strategic Health Authorities (especially relevant for wannabe GPs);
- i) Do a leadership course (e.g. Leadership Academy);
- j) Write up top tips for oncall junior doctors who have to deal with typical problems that patients present to your specialty (e.g. a budding Respiratory physician could give tips to fellow colleagues on how to troubleshoot problems with tracheostomies on the weekend). This guide could then be made available through the Intranet or an induction pack.

Audit

Think laterally about audit projects. They can be in a related specialty. For example, for Dermatology, you could consider:

- a) Contacting a Consultant Immunologist expressing interest in auditing requests for RAST/IgE testing, which may reveal whether or not the requests are appropriate.
- b) Contacting a Consultant Paediatrician who has a special interest in childhood allergies, and suggesting to audit the NICE guidelines on childhood eczema vs. food allergy.
- c) Contacting a Renal Physician to discuss an audit of
- c) Contacting Tissue Viability Nurse to discuss a possibility of doing an audit on wound/pressure ulcer care.

General Tips

1. Familiarise yourself with the person specification for specialty training early (<http://specialtytraining.hee.nhs.uk/specialty-recruitment/>). Regularly review your progress against person specification and self-scoring criteria for your specialty. You must ensure that you identify and bridge the gaps instead of focusing on one area you particularly enjoy or find easier to arrange (for example, going to lots of courses and events whilst lacking publications).
2. Compile a timetable of specialty-related events for the whole year, so you can keep track of the deadlines. Set a day every month when you can check for any new events/conferences and calls for abstracts.
2. “Recycle” your knowledge! If you attend an event or conference, think about what others who couldn’t make it would find interesting. Noting down your top learning points could result in a publication (e.g. sBMJ or a specialty-specific magazine/Newsletter) or a local presentation to your colleagues!
3. Reaching out to people who are not a part of your own Department/Hospital could offer fresh opportunities. Think of a subspecialty you would be interested in and contact an expert in that field to arrange a visit to their specialist tertiary referral clinic (don’t have to wait for a “taster week” to do this). Be proactive! Most senior clinicians will be happy to hear you are interested in their area of expertise, but they cannot offer help if you do not approach them (but avoid pestering them if they decline).
4. You can demonstrate commitment by reflecting on the transferrable skills you developed over the course of your career to date (for example, write a reflective piece for your portfolio about what you learnt from a situation when there was a breakdown of communication).
5. Instead of looking for opportunities for projects, audits or presentations only for the specialty you are interested in, think broadly – what specialties have an overlap? Often, events will have a theme that will allow you to exploit this overlap while “scoring” points for commitment to your own specialty (for example, if you have an interest in O&G, search for events and essay prizes with a general theme of “women’s health”. There is a good chance of finding something relevant through the RCGP, British Geriatrics Society, or Medical Women’s Federation).
6. If you need ideas and data for a poster presentation quickly, why not design *an anonymous survey* on <https://www.surveymonkey.co.uk/> (it’s free)? You can investigate perceptions of something important in your chosen specialty (e.g. a wannabe O&G trainee may design a short survey asking how confident junior doctors are in assessing and reporting FGM; a wannabe Psychiatrist could run a survey investigating medical students’ perceptions of mental illness disclosure vs. impact on their career progression +/- what their knowledge is of the support available).
7. Whatever you choose to do as a demonstration of commitment to specialty, it is important to regularly record your activities and reflect on how this has helped your professional development. Make sure you have all the supporting evidence of your activities signed and ready in one place. You will not have much time to request confirmation letters or certificates once the specialty application process is under way.

8. Attend local careers fairs, RSM- and Royal Colleges' careers events to speak to a wide range of clinicians in your chosen specialty. This way you will remind yourself why this particular specialty is the right choice for you, while demonstrating to the future specialty selection panel that you have taken every step to find out about the ins and outs, the ups and downs of what you are about to devote 30-40 years of your professional life to.

With most UK specialty training programmes becoming more and more competitive each year (for competition ratios see <http://specialtytraining.hee.nhs.uk/specialty-recruitment/>), you need to be proactive when seeking opportunities to boost your portfolio and stand out from the crowd. *Your career is your responsibility*, and your success will be directly proportional to the time you invest in building a solid track record of evidence of commitment to specialty.