

Pediatric Residency Survey Summary of Results

A short survey was developed and electronically distributed to third year DPT students, new graduate therapists and pediatric therapists pursuing advanced specialty certification. The goal of the survey was to elicit feedback to be used in curriculum planning and developing specific educational experiences. Additionally, therapists were surveyed regarding perceived barriers to residency education. The survey was distributed to approximately 30 therapists and 10 responses were received, a response rate of 30%. 50% of respondents who either students or had less than 2 years of experience.

The following themes emerged from the survey. Potential residents desire:

- To achieve a state of competence and independent practice by program completion that would allow for functioning as the only pediatric specialist in a small clinic or to start their own private practice.
- To participate in hands-on care in highly specialized clinical areas (NICU, Pediatric ICU, “not just outpatient”) and the entire spectrum of care (including home health and schools)
- To work with pediatric sports medicine patients and to gain experience with wellness and injury prevention programs
- To participate in collaborative interdisciplinary teams
- To receive targeted preparation for the Pediatric Clinical Specialist Certification Examination
- To receive specialty intervention training (example NDT)
- To participate in care of children from 0-21
- To gain competence in orthotic, bracing, and durable medical equipment management

Barriers to residency training: financial (reduction in salary, resident salary is typically 75% full-time staff therapist salary), availability of residency programs (requiring relocation), program start time not lining up with graduation dates.

The curriculum and business plan address all these themes. Survey feedback was used to modify early drafts of the curriculum (to increase time in inpatient specialty areas) and the business assumptions (increased allocation of funds to support continuing education experiences). Of note however home health and school setting training will be offered as additional observational experiences, but will not be included as main clinical training sites due to time constraints in the one-year curriculum.