

**JUNIOR CLINICAL FELLOWS IN**

**EMERGENCY MEDICINE**

**8 month Post**

**Till 6th of August 2024**

**NHS FIFE**

**ACUTE SERVICES DIVISION**

**Information for Candidates**

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### SUMMARY OF POST

# POST: Junior Clinical Fellow in Emergency Medicine

**BASE:** Emergency Department, Victoria Hospital, Kirkcaldy

**TERM:** Fixed term for 8 months, commencing December 2023

### EMERGENCY MEDICINE IN FIFE

**Emergency Department, Victoria Hospital Kirkcaldy**

Acute Care in Fife was centralised in January 2012, with the opening of the new phase of the Victoria Hospital, Kirkcaldy. We are a trauma unit involved in the South-East of Scotland major trauma network seeing about 72,000 patients annually with a mix of patients of all ages.

The ED includes an 8-bay resuscitation area, a 9-bay majors area, a 6-bay minors area and two paediatric rooms. There is a dedicated Procedures room and a 6-bedded Emergency Medicine Observation Unit. There is access to electronic pathology and radiology ordering. Departmental guidelines, protocols and rotas are available on the StaffLink app on PC desktops and downloadable to all smart phones.

The ED has 24-hour senior doctor presence, with shop floor Consultant presence daily from 0800 to 2300. We have 8 GPwSI EM who deliver regular sessions through the week and we are also supported by a team of emergency nurse practitioners.

There is an EM departmental redirection policy which operates 24/7 compliant with recent government guidance. There is a co-located GP OOH service in the evenings and weekends, allowing redirection of appropriate patients to primary care at these times. In line with the development of NHS 24’s ‘Right Place, Right Time’ initiative, the ED runs a virtual flow and navigation hub for assessment of potential ED patients via 111 pathways. Currently this involves a brief triage by telephone and scheduled departmental appointments for face-to-face review.

We have 3 ultrasound machines exclusively for use in the ED, and one of our consultant colleagues is a certified trainer for level 1 USS.

**Facilities**

**Resuscitation Area**

8 resuscitation bays, including a dedicated paediatric bay, with capability to accommodate 5 ventilated patients

All bays have full invasive monitoring capability, 3 are enclosed negative pressure rooms to allow performance of aerosol generating procedures

Facilities for CPAP/BiPAP

Mobile x-ray and processing

Dedicated Blood gas analyser

Phillips Sparq ultrasound machine

**Majors/Immediate Care Area**

9 monitored cubicles

Central staff base island with computer access to Trakcare (includes electronic pathology and radiology ordering), Clinical portal, StaffLink (departmental guidelines, protocols and rotas) and PACS radiology. Ultrasound machine

**Procedures Room**

1 one-bedded fully equipped procedures room used for procedural sedation, joint manipulation and plastering, regional anaesthesia and weekly in-situ simulation.

**Paediatrics**

Paediatric waiting area separate from the main waiting area, with direct access into 2 dedicated paediatric consulting rooms

**Minors**

6 consulting bays, staff bases with PACS access, and 3 specialty rooms currently used for ENT, ophthalmology and obstetric & gynaecology assessments. Ultrasound machine.

**Psychiatry Interview Room**

A secure, private interview room with dual access and egress to main reception in the ED.

**Emergency Medicine Observation Unit (EMOU)**

6 bed observation unit solely for admission of short-stay patients under the care of the on-call emergency physician. This includes head injury observation, low-risk chest pain, toxicology, post sedation observation and other conditions at the discretion of the on-call consultant. This clinical area is not used for the accommodation of patients awaiting admission under other specialties and there are strict admission criteria.

There is a multi-use office co-located with the ward with access to computers, which is also used for teaching sessions. In addition, there is consultant office space, senior nursing and doctors’ offices, secretarial accommodation, and a relatives’ room.

**In-patient specialty support on – site**

On-site support includes Stroke, Anaesthetics, Critical Care (who manage ITU), General Medicine (including Medical HDU), Cardiology and CCU, General Surgery (including Surgical HDU), Trauma and Orthopaedics, Maxillofacial Surgery & Dentistry, Psychiatry, Paediatrics, Obstetrics & Gynaecology and ENT. Other specialties are available for advice and patient review during the day, or on-call from home – these include neurology, respiratory, GI and urology. Primary PCI, cardiothoracic and neurosurgery are accepted by the Royal Infirmary of Edinburgh. Patients requiring vascular surgery are transferred to Ninewells Hospital. Local arrangements are in place for other surgical specialties (breast, burns, plastics etc.)

There is a stroke thrombolysis service which operates 24/7 either through on-site stroke or emergency physicians or telemedicine support from the regional hub. A stroke thrombectomy service is in the earlier stages of implementation, with suitable patients being transferred to Ninewells Hospital.

Emergency radiology is provided in a dedicated emergency diagnostic suite directly adjacent to the department. There is 24-hour access to CT scanning with direct to scan protocols for trauma and head injury patients. MRI is available on site within office hours. Emergency laboratory investigations are available 24 hours per day.

**MINOR INJURIES UNIT, QUEEN MARGARET HOSPITAL, DUNFERMLINE**

A 24/7 Minor Injuries Unit runs in the former ED at the Queen Margaret Hospital, Dunfermline. It is staffed by ENPs, and telephone support is provided by the consultant and middle grade staff at VHK.

**VIRTUAL HUB & REMOTE CONSULTATIONS**

In line with the Scottish governments rescheduling urgent care programme, the ED runs a virtual flow and navigation ‘hub’ for assessment of potential ED patients via 111 pathways. Currently this involves a brief triage by telephone and scheduled departmental appointments for face-to-face review.

**EMERGENCY DEPARTMENT STAFFING**

**Consultants**

|  |  |
| --- | --- |
| Dr Bappa Roy | Clinical governance lead; FRCEM examiner; NES Appraiser |
| Dr Maggie Currer | Deputy Clinical Lead; Major Incident Lead; Child Protection Lead; NES Appraiser |
| Dr Julie Thomson | STAG / Trauma lead; Audit / QI lead; Paediatric EM; FRCEM examiner; NES appraiser |
| Dr Surinder Panpher | Associate Postgraduate Dean (NE) for Careers, Foundation Programme Director; Undergraduate teaching lead. |
| Dr Nilesh Champaneria | Clinical lead for Digital & Information Acute Care; Unscheduled Care Lead |
| Dr Kate Searle | Deputy clinical lead, Patient Safety lead, ED recruitment lead |
| Dr Melvin Carew | Clinical Lead; Foundation Programme Director; Paediatric EM; FRCEM, MRCEM examiner and MRCEM SBAQ question writing. |
| Dr Fiona Duncan (Maternity leave) | Rota co-ordinator, ED teaching co-ordinator, Scot GEM Lead |
| Dr Jonathan Hanson | Consultant in Sports & Exercise Medicine with interest in EM, Scottish Rugby Union & Scottish Institute of Sport doctor |
| Dr Keith Jacques | ENP / ACP lead, Stroke lead, FRCEM examiner |
| Dr Claire Stewart | Orthopaedics & Obstetrics lead |
| Dr Elspeth Pitt | Wellbeing & peer support lead; FRCEM Examiner |
| Dr Roger Alcock | Paediatric EM; Expedition Medicine; International Committee of the Red Cross EM specialist. |
| Dr Dan Day | Ultrasound Lead |
| Dr Rajendra Raman | Critical Care lead; Pharmacy lead; Research Lead. |
| Dr Kian Dastoori | Paediatric EM, Paediatric lead consultant |
| Dr Catriona Fullarton | Prehospital EM, Junior doctor rota co-ordinator |
| Dr Cristina Sifringa | Interest in IMG education |
| Dr Jane Grassie | New consultant |
| Dr Michael Adamson | New consultant |
| Dr Claire Moggach | New consultant |

**Middle Grades Doctors**  **WTE**

ST3 – ST6 6-month rotation from SE Scotland deanery 5.0

Specialty Doctors Permanent Posts 8.0

Senior Clinical Fellows 12-month appointments 2.0

Junior Clinical Fellows 12-month appointments 18.0

GP with special interest 8 GPs cover a variety of sessions across the week, including evenings and weekends.

**Junior Doctors**

Foundation Year 2 Doctors 7 WTE per four-month block

GP Specialty Trainees 6 WTE per six-month block

**ENPs**

The Emergency Nurse Practitioner (ENP) service is provided by up to 4 x 12-hour shifts every day.

**POST DESCRIPTION**

The post of Junior Clinical Fellow in Emergency Medicine is now well-established in Fife. JCFs support the provision of high-quality patient care within the ED. The post is held in high regard by NHS Fife, and has proved an excellent springboard for a career in Emergency Medicine in Scotland for many trainees or associated specialties and ACCS programmes. The post is primarily aimed at junior doctors who have completed Foundation Year 2 and who wish to broaden their clinical experience on the front line of assessment and management of acutely unwell and injured patients.

Each post is advertised for a fixed term of up to 8 months. We are flexible for those wishing to work less than full time who require a particular work pattern, but there will be a requirement for out-of hours and weekend working.

During this 8 month period, you will work with senior supervision as an additional member of the junior tier (maximum 48 hours per week), with shop floor teaching focusing on prioritisation of workload, formulation of investigation and management plans.

There is a departmental teaching programme which includes microteaching, weekly simulation and regular M&M, departmental meetings and journal club. You will have access to CPD time of 4 hours per 48 hours clinical work.

Successful applicants will be encouraged to take part in departmental audit, quality improvement, journal club and help deliver teaching sessions to junior colleagues, medical students and nursing staff with consultant support. Previous post-holders have presented their CPD/audits at national conferences and have been successful in obtaining posts in ACCS EM training. You will be expected to maintain an e-portfolio and undertake an annual appraisal. Each clinical development fellow will be allocated a consultant educational supervisor to support their clinical and professional development.

**Junior Clinical Fellow in Emergency Medicine**

**PERSON SPECIFICATION**

|  |  |  |
| --- | --- | --- |
| **REQUIREMENTS** | **ESSENTIAL** | **DESIRABLE** |
| **Qualifications and Training** | * MBChB or equivalent * Full registration with GMC and a Licence to Practice * Provider status in 1 of ATLS, APLS/EPLS or ALS | * Provider status in more than 1 of ALS, ATLS, APLS/EPLS. |
| **Clinical Skills and Experience** | * 2 years of experience post qualification within NHS * Satisfactory completion of Foundation training or equivalent * Ability to prioritise workload * Ability to seek advice appropriately | * Previous experience in Emergency Medicine * Experience in paediatrics, orthopaedics, General Practice * Understanding of principles of risk management |
| **Audit & Quality Improvement** | * Proven understanding of audit and how it relates to clinical practice. | * Evidence of completion of appropriate audit. |
| **Research** | * Some knowledge of research principles * Commitment to evidence based medicine | * Critical appraisal skills * Publication in peer reviewed journals |
| **Teaching** | * Enthusiasm and commitment to teaching junior medical staff and nursing staff, medical students | * Previous clinical teaching experience |
| **Communication Skills and Personal Attributes** | * Able to work as part of a team with colleagues in own and other disciplines * Good skills in written and spoken English to allow effective communication with patients and colleagues * Able to organise time efficiently and effectively. * Good communication skills * Adaptable and open to new ideas. * Commitment to learning and developing new skills | * Able to motivate colleagues * Sense of humour |

### NON-CLINICAL ASPECTS OF THE POST

**Teaching**

There is an excellent programme of departmental teaching sessions for the junior doctors (FY2 & GPST) which the successful applicant will be expected to attend during the six months. The department runs regular training days for nursing staff and there will be opportunities to contribute if interested.

Medical students from St Andrews University attend afternoon sessions on a Thursday for 2 semesters per year. The department also takes students from other medical schools for elective placements. We also participate in the ScotGEM programme and instruct students throughout the programme.

NHS Fife has dedicated simulation centre based at the Queen Margaret Hospital which we have access to and run regular themed days which you will participate in. We run a weekly multidisciplinary in-situ simulation scenario teaching sessions utilising adult and Paed’s SimMan in which JCFs have the opportunity to participate. There will be scope to improve your teaching skills by developing scenarios to be used in the training program. There are Clinical Educator Programme sessions in Fife and you will be encouraged to participate in these via the TUBs system. Teaching is delivered via a mixture of in-person and online methods for flexible access.

**Continuing Medical Education**

NHS Fife supports and will require the successful candidate to participate in continuing medical education (CME).

**Research**

Interest in research is welcomed and would be supported by consultant colleagues. The department has been involved in recent multi-centre trials, including HALT-IT and RAMPP.

Currently we are involved with multiple trials including CORE Kids; ASPIRED; EVIS; EPOCHS and Novel-2 diagnostic study.

**Clinical Governance**

NHS Fife is committed to maintaining a high quality of services to patients, with particular regard to patient safety, by continual development of practice in the light of research evidence and by audit and quality improvement based against the relevant standards. There is a designated QI and audit lead, and the programme includes the opportunity to participate in national audits. We hold a regular M&M meeting which you will be expected to contribute to.

### TERMS AND CONDITIONS OF SERVICE

The post is covered by the specialty registrar conditions of service.

### ENQUIRIES

Informal enquiries and visits are welcome and should initially be made to:-

Dr Kate Searle, Consultant & Deputy Clinical Lead for Emergency Medicine

Email: [kate.searle@nhs.scot](#)

Or

Dr Melvin Carew, Consultant & Clinical lead for Emergency Medicine

Email: [melvin.carew@nhs.scot](#)

**Appendix 1:** **PROVISION OF HEALTH CARE IN FIFE**

### NHS Fife

At present NHS Fife provides approximately 95% of all health care in Fife.

#### **NHS Fife Headquarters**

NHS Fife Headquarters is situated at Hayfield House, Victoria Hospital. Strategic planning is an area function performed by the Board’s headquarters staff.

#### **Public Health**

The primary task of the Department of Public Health is the analysis of problems of health and health care in Fife and the planning of measures to promote health, prevent ill-health and provide health care. The aim of the department is the maintenance and improvement of the health of the community. Public Health Specialists advise the Director of Public Health on specified clinical areas including Acute Services, Mental Health, Care of the Elderly, Physical Handicap, Child Health, Well-Woman & Family Planning, Communicable Disease Control, and Environmental Health.

#### **Health Education**

The Department of Health Education supports all health educators in the community, including medical staff, and runs the Board’s Resource Centre and Library.

#### **Primary Care**

The Department of Primary Care is responsible for administration of all Primary Care Services.

Health care in Fife is provided by an Operating Division and three Community Health Partnerships:

Acute Services Division Acute services for Fife

Three Community Health Partnerships Community, Learning Disability and Mental Health Services for Fife

**Appendix 2:** **THE FIFE REGION**

The Kingdom of Fife occupies the peninsula formed by the Firth of Forth to the south and the Firth of Tay to the north. The region’s landscape is as beautiful as it is diverse, with rolling hills, lochs and spectacular coastline.

This is a place steeped in history. Dunfermline was the first capital of Scotland, home to royal inhabitants, as well as birthplace of Andrew Carnegie, steel magnate and philanthropist whose legacy lives on across the world to this day. The more recent past saw the establishment of the pits and coal mines, heavy industry whose rich heritage is still evident today in the close-knit communities of Cowdenbeath, Lochgelly and Kelty.

The town of St Andrews, named after Scotland’s patron saint, sits on its own on a wide bay on our north east shores, boasting not only Scotland’s first university, but also its oldest golf club, the Royal and Ancient Golf Club, which helped to establish the sport as one of Scotland’s greatest exports.

Nowadays it’s Kirkcaldy and new town Glenrothes that offer the modern bases favoured by major manufacturing and services industries. Both towns are well connected to Scotland’s capital, Edinburgh and the North via the M90 motorway and are easily accessible in under half an hour by car.