

Clinical Fellow - Older People and Stroke Inverclyde Royal Hospital Fixed term contract: 4 months



We are delighted to advertise a Clinical Fellow post based at the Older People and Stroke Unit, Inverclyde Royal Hospital (IRH). This is an opportunity for a motivated candidate to work across our Older Adult and Stroke departments.

This post is available at FY2 completion level from April 2024.

Inverclyde Royal Hospital

Inverclyde Royal Hospital is situated in Greenock and provides acute health care services to Inverclyde, North Ayrshire and the Cowal peninsula. The Hospital is a 220 bedded, modern District General Hospital which opened in 1979 and is one of the busiest teaching DGHs in Scotland. In addition, the hospital is currently the base for provision of Emergency Medicine, Surgery, Endoscopy, Orthopaedics, Critical Care, Dialysis satellite unit, Gynaecology and Maternity Services. A stabilise and transfer model for level 3 care and other acute presentations is well established in a hub and spoke model. There is resident anaesthetic support 24 hours a day.

The hospital provides a wide range of District General Hospital specialties with excellent support facilities. The hospital has a first-class modern radiology department and services. All departments participate in undergraduate teaching and there is an active postgraduate educational program. IRH benefits from links with the larger central hospitals in Glasgow and is well supported by the Department for Medical education along with a good medical library service.

The Older People and Stroke Service

The Older People and Stroke Service (OPSS) is situated within the Larkfield Unit which is a modern facility attached to the main IRH building by a link corridor. The Larkfield Unit has five wards, three of which belong to the OPSS. The other two house the Neurological Rehabilitation Unit and inpatient Psychiatry service. The Larkfield Unit also hosts our Assessment and Rehabilitation Centre (previously known as the Day Hospital), outpatient clinics and allied health professions services.

There is an educational programme both within our unit and the wider medical unit and we have bimonthly morbidity and mortality meetings. We are a teaching hospital and the Larkfield Unit hosts medical students at various points during the academic year.

Assessment and Rehabilitation

Ward 2 provides 30 beds for the assessment of frail, elderly inpatients. It receives most of its patients from the acute medical unit, with a smaller number from the downstream medical and surgical wards. Flow into the unit is controlled by our Elderly Care Assessment Nurse and Frailty Practitioner. The aim is to provide comprehensive geriatric assessment by the multidisciplinary team with early

discharge, with or without follow-up, where appropriate. Medically unwell patients remain within ward 2 and those requiring a longer period of rehabilitation are transferred to Ward 3.

Ward 3 is our combined rehabilitation ward, with 10 general rehabilitation/complex care beds and 10 orthogeriatric rehabilitation beds. The orthogeriatric rehabilitation is supported by our Allied Health Professional (AHP) Consultant.

We are supported by an Advanced Nurse Practitioner, who is also an Independent Prescriber. All our wards have dedicated physiotherapy and occupational therapy teams with support where required from the wider AHP services including speech and language therapy, podiatry, tissue viability, dietetics and orthotics.

Acute Stroke Unit (patients of all ages)

Ward 1 is the 17 bedded Acute Stroke Unit which accepts direct admissions from the ED and Acute Medical Unit. Thrombolysis for patients from the IRH catchment area is delivered by the South Glasgow Stroke Service at the Queen Elizabeth University Hospital and patients are repatriated thereafter. There is a neurology liaison service to IRH both for inpatients and outpatients.

Rapid access TIA clinics are undertaken, with the number of clinics required to achieve national performance targets recently being agreed following review. The Stroke service is represented on the Greater Glasgow & Clyde Stroke Managed Clinical Network.

Movement Disorders

The IRH service is provided by one consultant, supported by a Parkinson's Disease Nurse Specialist (shared with the Vale of Leven). There are 2 outpatient clinics per week and inpatients are cared for in wards 2 and 3 wherever possible/appropriate. The team provides liaison support to other specialties within the hospital and our PDNS provides domiciliary visits, where possible, to our local nursing homes.

Orthogeriatric Liaison

One consultant, supported by an Elderly Care Orthopaedic Nurse (ECON), provides a liaison visit to the orthopaedic wards once weekly.

The Assessment and Rehabilitation Centre – ARC - (previously Day Hospital)
The ARC is starting to come back on-stream after the pandemic period. It is an integral part of the Frailty service, hosting the clinics and MDT meetings and also hosting AHP services. There is an experienced nursing team who support the ARC and outpatient clinics.

Outpatient Clinics

Specialist clinics are available for Stroke, Movement Disorders, Frailty and Falls. There is also a general outpatient clinic.

The Rainbow Garden

The unit is enhanced by the 'Rainbow Garden', an award-winning initiative on



site that allows our patients the chance to be outside, relax with visitors and enjoy the peaceful surroundings.

Departmental Staffing Structure

Clyde Sector

Director	Ms Melanie McColgan
Chief of Medicine	Dr Claire Harrow
General Manager Older People / Stroke	Ms Victoria Cox
Clinical Director Older People / Stroke	Dr Lucy McCracken
Lead Clinician Older People, IRH	Dr Janice Murtagh
Lead Clinician, Stroke	Dr Julie McManus

IRH

Consultant	Special Interest
Dr Janice Murtagh	Movement Disorder
Dr Jackie Martin	Frailty/Stroke
Dr Lucy McCracken	Orthogeriatrics/Frailty
Dr Abby Gunn	Stroke/Acute Medicine
Dr Craig Harrow	Stroke/Acute Medicine
Dr Scott Muir	Stroke/Acute Medicine

Trainees

FY1 x 3
FY2 x 6
GPST x1

Job Description

Main Duties

The successful candidate will be based within the Older People and Stroke wards for their daytime clinical duties. They will be expected to participate in consultant-led wards rounds as well and conducting their own ward round when required between consultant visits. Other daytime activities will include review of sick/unstable patients as needed, speaking with relatives/carers, liaison with other specialities as needed and progression of patient management plans between ward rounds. They will be working alongside FY1, FY2 and GPST colleagues in the wards and will be expected to support the development of their FY1 colleagues and any medical students attached to the Unit.

The postholder will participate in the FY2 Older People and Stroke and Medical rotas for their out-of-hours work. This will include evenings, weekends and nightshift working.

This role will include development time to allow the post-holder to undertake an activity of their choice such as teaching, quality improvement, a clinical attachment or obtaining a qualification – the details will be agreed in conjunction with their clinical supervisor.

The post-holder will be expected to work with local managers and professional colleagues in the efficient running of the service. Subject to the provisions of the terms and conditions of Service, the post-holder is expected to observe NHS Greater Glasgow and Clyde's agreed policies and procedures, drawn up in consultation with the profession on clinical matters, and to follow the standing orders and financial instructions of the Health Board.

The post-holder will be expected to ensure that there are adequate arrangements for hospital staff involved in the care of patients to be able to make contact with the post-holder when necessary.

The post-holder is required to comply with GG&C Health and Safety & Policies.

The post-holder will be expected to undertake appraisal.

Job Description

Qualifications	
Essential	<ul style="list-style-type: none"> • Full GMC Registration and a licence to Practice. • Up-to-date Advanced Life Support training
Desirable	<ul style="list-style-type: none"> • Part 1 of MRCP
Experience	
Essential	<ul style="list-style-type: none"> • Completion of Foundation Year 1 training (or equivalent if from an non-UK background).
Desirable	<ul style="list-style-type: none"> • Previous experience of working in a Geriatric Medicine hospital setting. • Experience in quality improvement projects
Knowledge and Skills	
Essential	<ul style="list-style-type: none"> • Ability to undertake comprehensive medical assessment of older people. • Experience of working in an acute medical setting and ability to work in medical receiving for an unselected take. • Knowledge of clinical governance and quality improvement issues.
Desirable	<ul style="list-style-type: none"> • Familiarity with the IT systems/clinical software used in NHS GGC. • Record of contribution to service change and redesign. • Evidence of continuing professional development relevant to management of frailty.
Disposition e.g. Personal (transferable) skills	
Essential	<ul style="list-style-type: none"> • Excellent communication skills and empathy. • Ability to work in multi-disciplinary team. • Flexibility to respond to changing patterns of work in line with service change.
Desirable	<ul style="list-style-type: none"> • Evidence of time management.

Management Arrangements

The post will be hosted within the Clyde Sector, Older People and Stroke Service. The candidate appointed will be expected to participate fully in the work and aims of the Sector.

The Chief of Medicine is Claire Harrow, Clinical Director for Older People across Clyde is Dr Lucy McCracken and the Lead Consultant for Larkfield Unit is Dr Janice Murtagh.

The General Manager for Medicine in Clyde is Victoria Cox, supported by Heather Lapsley, Clinical Service Manager.

IRH feeds into the Clyde acute governance framework with monthly M&M meetings and a commitment to duty of candour and transparency in clinical working.

We would be delighted to hear from any candidates that wish further information either virtually or in person. The following would be happy to discuss the post in more detail:

Additional Arrangements for Applicants: Informal enquiries and details of arrangements to visit the department regarding this post will be welcome by:			
Name	Job Title	Email	Telephone
Dr Janice Murtagh	Consultant and Lead Clinician	Janice.Murtagh@ggc.scot.nhs.uk	01475 505078
Heather Lapsley	Clinical Service Manager	heather.lapsley@ggc.scot.nhs.uk	01475 50329

Relationships: Older People and Stroke Directorate

Director	Melanie McColgan
Chief of Medicine	Dr Claire Harrow
General Manager	Victoria Cox
Clinical Director	Dr L McCracken
Lead Clinicians (Clyde)	Dr J. McManus, Dr O Lucie, Dr J. Murtagh

Discover Inverclyde

Inverclyde is located on the beautiful west coast of Scotland

It is one of the most attractive places in Scotland to live, work and visit, with breathtaking scenery, excellent transport links to Glasgow and Edinburgh, a wide range of sporting and leisure opportunities and some of the best schools in Scotland.

The area includes the main towns of Greenock, Port Glasgow, Gourock, Inverkip and Wemyss Bay, and the rural villages of Kilmacolm and Quarrier's Village. Offering spectacular views and scenery, unique waterfront sporting and leisure opportunities all accessible easily by car, rail, ferry, and air links from the city of Glasgow and beyond. Many of the staff live locally in Inverclyde, Renfrewshire, and Glasgow.



The area has a history and heritage rich in shipbuilding and seafaring dating back to the 1500's which has left its mark throughout the region.

These days, it offers a broad range of sports and leisure facilities, both indoors and outdoors, a great variety of arts and culture activities and wide-open spaces to enjoy and explore.

There are many recreational activities; for lovers of the outdoors, with excellent local golf courses, sailing in the Clyde, outdoor swimming at Gourock, hill walking and mountain biking in Argyll & Bute. There are 6 golf courses alone in the area with outstanding views of the Firth of Clyde. Wild swimming, sailing and rowing are all popular activities. This makes the area is an attractive one to live in. It offers good access to the Highlands and to Glasgow with its many cultural and recreational attractions.

Inverclyde's estimated population in 2017 was 78,760, which is 1.5% of the total population of Scotland.

87% of the population live in the towns of Greenock, Port Glasgow and Gourock with the remainder of the population living in the villages of Inverkip, Wemyss Bay, Kilmacolm and Quarriers Village.

- 16.2% of Inverclyde's population is aged 16 years or younger,
- 20.46% is aged 65 years or older.
- 63.3% of Inverclyde's population is aged between 16 and 64 years old.

Despite the attractiveness of many parts of Inverclyde there are several communities, like other parts of the West of Scotland, in Inverclyde that continue to suffer from high levels of poverty and disadvantage. This has manifested itself in poorer health, lower levels of employment, higher levels of child poverty, lower levels of attainment and higher levels of drug and alcohol misuse in these areas. The differences in social and economic circumstances in communities across Inverclyde mean that tackling inequalities is key priority for NHS Greater Glasgow and Clyde, and the Team at Inverclyde Royal Hospital are committed to driving forward change and advocating for our patients.

Education

In Inverclyde there are currently 6 Secondary State Schools, 20 Primary Schools and 2 Independent Schools along with Early Years Establishments and Additional Support needs units.

Find out more about schools in Inverclyde via:

www.inverclyde.gov.uk/education-and-learning/schools