



## **THE RURAL SURGICAL FELLOWSHIP**

This is a peri or post CCT Fellowship in Rural General Surgery for 4 months to maximum two years, funded by NHS Education for Scotland. It is designed to allow surgeons who have completed or are near completion of their Specialty Registration in General Surgery, to gain appropriate knowledge and skills to practice in a Rural General Hospital in the North of Scotland (Orkney, Shetland, Caithness, Elgin, Western Isles, Fort William or Oban). It would also be suitable for general surgeons considering practising in a rural hospital or in humanitarian relief work in other parts of the world.

During the fellowship there would be opportunity to acquire the necessary skills to deal with common emergencies and more minor procedures in Urology, Trauma and Orthopaedics, Gynaecology and Obstetrics, ENT, Ophthalmology and Neurosurgery.

The fellowship would be based this time in Inverness (there will be 1 or 2 Aberdeen-based fellowships advertised soon). It would normally include 6 to 12 weeks in one or more rural general hospital, the rest of the time being spent in modular training in other specialties, as determined by a mutually agreed schedule tailored to the individual fellow's training needs. Being supernumerary in host departments means the content of the fellowship can be bespoke. Where a trainee has already been appointed on a proleptic basis to a consultant post in a Rural Unit, with the fellowship beforehand, training will be tailored to the expected activity within that unit.

Where longer modules (more than 2 months) are undertaken, in Urology or Orthopaedics for example, the trainee may optionally be included in the middle grade on call rota for that unit. General Surgery on call, if desired or appropriate for the trainee, could be considered where it did not interfere with training opportunities within the module(s) undertaken at the time, (eg by limiting to weekends) and could be on middle grade or consultant rota by mutual agreement.

It may be efficient to undertake various subspecialty components in parallel, for example attending T&O trauma meetings or obstetric theatre lists while remaining based in a General Surgery unit.

Administration of the programme and trainee assessment would be under the auspices of the North of Scotland Specialty Training Programme in General Surgery, and there will be requirements for workplace-based assessments. An educational Supervisor will be assigned, and there will be multiple Clinical Supervisors.

Amongst the essential criteria on the person specification (see separate document) are that applicants must be

- Existing NTN holders in General Surgery from anywhere in the UK who are within 2 years of their CCT date and hold the Intercollegiate Examination in General Surgery by the time of taking up post
- Existing CCT holders in General Surgery who have been in regular practice in General Surgery within the last 18 months and are on the Specialist Register (UK) for General Surgery
- Trained Specialists in General Surgery who have had their application processed and are completing final requirements for entry to the GMC Specialist Register by virtue of European certification or Article 14.
- Trained specialists in General Surgery from outside the UK who have evidence of eligibility for sitting the FRCS examination and consequent entry to the GMC Specialist Register within 18 months of appointment.

It is estimated that the next adverts for posts will be in April 2021 (to be confirmed).

Informal enquiries may be directed to:

- Prof Kenneth Walker, Consultant Colorectal Surgeon and Associate Postgraduate Dean, Inverness. [kenneth.walker@nhs.scot](mailto:kenneth.walker@nhs.scot)

## **POSSIBLE PARTICIPATING HOSPITALS**

1. NHS HIGHLAND
  - a. RAIGMORE HOSPITAL
  - b. CAITHNESS GENERAL HOSPITAL, WICK
  - c. BELFORD HOSPITAL, FORT WILLIAM
  - d. LORNE & ISLES HOSPITAL, OBAN
2. NHS WESTERN ISLES
  - a. WESTERN ISLES HOSPITAL, STORNOWAY
3. NHS SHETLAND\*
  - a. GILBERT BAIN HOSPITAL, LERWICK
4. NHS ORKNEY\*
  - a. BALFOUR HOSPITAL, KIRKWALL
5. OTHER CENTRES IN SCOTLAND MAY PARTICIPATE IF NECESSARY FOR CERTAIN SPECIALTIES, eg ABERDEEN, GLASGOW.

\*Orkney and Shetland will more commonly host the Aberdeen-based fellows, but could be approached for a placement if necessary.

## NHS HIGHLAND

The Highlands are an area of outstanding natural beauty and recreational outdoor activities. NHS Highland aims to make world-class medical care available to its population of almost 350,000, who live across an area the size of Wales, ie the largest geographical health board area in the UK. Some services are also provided to other health boards, namely NHS Western Isles (population 34,000) and western parts of NHS Grampian.

**Raigmore Hospital** is the main secondary (and for some specialties tertiary) General Hospital for the NHS Highland area. The City of Inverness is the cultural and administrative capital of the Highlands, and is well connected by road, air and rail.

Due to its geography, the hospital sustains a greater range of services than many district hospitals of comparable size. For example, it is one of Scotland's 5 cancer centres. The range of surgical services provided includes upper gastro-intestinal & HPB, vascular, endocrine, colorectal, urology, breast, trauma and orthopaedics, gynaecology, and the general surgery of childhood. Supporting departments include Clinical Oncology, Interventional Radiology, etc. There are links with neurosurgical and cardiothoracic departments in Aberdeen, and plastics in Livingston.

Clinical networking with the Rural General Hospitals is strong. Available methods of networking include videoconferenced MDT meetings, visiting consultants (in both directions), combined operating, and phone discussion, at a level to be agreed between the RGH and Raigmore consultants.

The Raigmore campus hosts the Centre for Health Science, a state-of-the-art home to our clinical skills centre, research and education facilities and University departments. It is the second campus for University of Aberdeen medical school and also hosts medical students from Dundee and SCOTGEM. It is the main campus for University of Highlands and Islands School of Nursing and midwifery. The surgical departments are actively involved in research and have strong interests in surgical education, including hosting courses such as the Scottish Surgical Boot Camps. There is a new boot camp for RGH junior doctors. Faculty from the RGHs teach on many of these courses.

**Belford Hospital, Fort William** has a 150-year history and provides services to Lochaber, Skye and Lochalsh. The current 1960s building is now being replaced by a new hospital on a green field site. Comprehensive inpatient and outpatient services are provided including acute medical and surgical emergency services, with 24/7 surgical cover and theatre availability.

There is a combined medical and surgical ward, including 3 HDU beds, an isolation bed and 2 paediatric beds. In addition there are midwife-led maternity beds, and a separate rehabilitation ward. The Accident and Emergency department receives over 9,000 new patients per year, with a higher-than-usual proportion of trauma from outdoor sports, road traffic collisions and agriculture. There is a main theatre with a separate room for endoscopy and minor procedures, X-ray and CT scan facilities on site (with radiologist support from Inverness). Transfers to Inverness or Glasgow can be undertaken by road or air, and involving the SCOTSTAR retrieval service as required.

There are four substantive consultant general surgeon posts, which allows time for trips to Inverness or other centres to maintain or build skills. There are 3 consultant anaesthetists and 4 physicians. Among the junior doctors there is one Core Surgical trainee. The range of surgery offered includes elective general surgery including laparoscopic, and emergency surgery eg laparotomy. There is networking with Raigmore for MDT and M&M support.

Fort William is now regarded as the 'Outdoor Capital of the UK' and is set in spectacular scenery, so the population swells in the summer. It hosts the world series mountain bike championships. There is skiing and world famous rock climbing, canoeing and hill walking and sailing. There is also a very active live music scene, from classical, choral, wind band to live folk and rock, and a thriving art society.

**Caithness General Hospital** is a 1986 building in the old herring fishing town of Wick on the far north east coast situated on the Route 500 not far from John O'Groats. The catchment area extends along the north coast to around Tongue (about 80 miles) and south beyond Golspie (50 miles) giving a population of about 40,000.

The hospital has 41 beds and additional beds in the Day Case Unit and Ambulatory Care Unit. It offers a range of elective General Surgery together with emergency care and visiting specialist services. Emergency surgical cover is available either 24h or 8am-8pm with night covered by Rural Emergency Physician (REP). Staffing consists of 3 anaesthetists, 3 surgeons, a geriatrician and 7 REP's, supported by a range of junior medical and allied staff. The Accident and Emergency department receives over 9,000 patients per year.

The hospital has two operating theatres together with Day Case facilities, endoscopy suite and 3 bedded HDU which caters for both medical and surgical patients. There are on site maternity, laboratory and radiology facilities including new CT scanner. Facilities for video conferencing and telemedicine are in place which allows regular participation in Highland wide MDTs and teaching sessions.

Daycase surgery is also provided at the Community hospital in Golspie.

Caithness is an interesting social and geographical area. There is impressive coastal scenery, but inland has wide open spaces and the ecologically important 'flow country'. There is good scope for golf, sailing, shooting, surfing and fishing plus the usual sports, but also art and music.

Travel to and from Wick is excellent with and. It is 2 hours to travel from Inverness to Wick by road and 4 hours by train. Flights to Aberdeen and Edinburgh were put on hold only temporarily due to current COVID travel restrictions.

**Lorn and Islands District General Hospital, Oban** is a small District General Hospital, which opened in 1996 and serves a large part of the west coast of Scotland from the tip of the Mull of Kintyre in the south to Duror in the north, Cowal in the east and many of the islands of the Inner Hebrides to the west. Recent developments have included the opening of commercial air services from Oban Airport to the outlying Islands.

The resident population covered is approximately 45,000 to 50,000. The area is extremely popular for tourism and the population swells during the summer.

There are 3 consultant general surgeons, 3 consultant physicians and an associate specialist, and 3 anaesthetists, supported by a range of junior medical and allied staff.

The Accident and Emergency Department is busy and has a progressive educational programme. It is equipped to cater for the immediate reception of major trauma of which there is considerable experience. The X-ray Department includes CT scanner. The Laboratory is similarly equipped to a very high standard. The Post Graduate Centre is thriving and there is a regular programme of education.

There is a range of local and visiting services, and the clinical networking is almost all with Glasgow. Eg a visiting Oncologist from The Beatson West of Scotland Cancer Centre and regular multi-disciplinary meetings covering all oncological cases. There are three Clinical Nurse Specialists in Oncology and a full range of Clinical Nurse Specialists in all disciplines including Cardiac, Stoma therapy, Cardio-respiratory, Urology and a nurse run Prostate Assessment Clinic.)

A range of elective surgical services are provided as well as 24/7 emergency cover. There is a dedicated six-bedded HDU. Transfers to Inverness or Glasgow can be undertaken by road or air, and involving the SCOTSTAR retrieval service as required.

Surgical clinics are held on a regular basis at the network of community hospitals throughout Argyll and include a new hospital at Mid Argyll, a modern hospital in Campbelltown, which opened in 1991, Islay and on the Island of Mull.

NHS WESTERN ISLES

Details to follow.

**NHS EDUCATION FOR SCOTLAND: NORTH OF SCOTLAND DEANERY  
PERSON SPECIFICATION  
APPLICATION FOR RURAL GENERAL SURGERY TRAINING FELLOWSHIP**

**NOTES:**

1. Essential criteria are the minimum requirements for appointment. They may also be scored depending on the level at which the applicant satisfies each criterion.
2. Candidates who do not satisfy all essential eligibility requirements will not be shortlisted.
3. Shortlisted applicants will be required to bring a signed hard copy of a structured reference completed by one of the following:
  - a. For NTN applicants - their **CURRENT** or **MOST RECENT** Educational Supervisor (ES)
  - b. For existing consultants/specialists – their Clinical or Medical Director
4. Successful applicants will be expected to apply for suitable RGH consultant vacancies as soon as appropriate. Proleptic appointment arrangements may be possible before completion of the Fellowship.

	<b>ESSENTIAL</b>	<b>DESIRABLE</b>
<b>ELIGIBILITY</b>	<ul style="list-style-type: none"> <li>• MBBS or equivalent medical qualification</li> <li>• Eligible for full registration with the GMC at time of appointment</li>   <li>• Holder of an NTN in General Surgery in the UK, within 2 years of CCT date, and holding FRCS(Gen) by time of taking up post.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Holder of CCT or CESR in General Surgery, in regular practice in General Surgery within the last 18 months and on the Specialist Register (UK) for General Surgery.</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Trained Specialists in General Surgery who have had their application processed and are completing final requirements for entry to the GMC Specialist Register by virtue of European certification or Article 14</li> </ul> <p><b>OR</b></p> <ul style="list-style-type: none"> <li>• Trained specialists in General Surgery from outside the UK who have <u>evidence of eligibility</u> for sitting the FRCS examination and consequent entry to the GMC Specialist Register within 18 months of appointment.</li> </ul>	

<b>LANGUAGE SKILLS</b>	<ul style="list-style-type: none"> <li>English language proficiency, as evidenced by graduation from an English medium university OR IELTS 7.0 or equivalent qualification/evidence</li> </ul>	
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<b>II: CRITERIA WHICH WILL BE ASSESSED FROM APPLICATION FORM AND SCORED FOR SHORTLISTING (WILL ALSO BE EXPLORED AT INTERVIEW)</b>		
	<b>ESSENTIAL</b>	<b>DESIRABLE</b>
<b>QUALIFICATIONS</b>	<ul style="list-style-type: none"> <li>MBBS or equivalent medical qualification</li> <li>FRCS and Intercollegiate Examination in General Surgery or equivalent by start date of Fellowship</li> </ul>	<ul style="list-style-type: none"> <li>Evidence of additional relevant academic degrees, postgraduate examinations or other relevant academic qualifications</li> </ul>
<b>CLINICAL KNOWLEDGE AND TECHNICAL EXPERTISE</b>	<ul style="list-style-type: none"> <li>Evidence of capacity to apply sound clinical knowledge &amp; judgement &amp; prioritise clinical need.</li> <li>Appropriate technical competence for experience with evidence of strong and complex clinical/diagnostic skills</li> <li>Evidence of satisfactory completion of training in General Surgery OR anticipated satisfactory completion (CCT) within 2 years.</li> </ul>	<ul style="list-style-type: none"> <li>Successful completion of relevant specialty skills courses eg ALS, ATLS, Critical care</li> </ul>
<b>ACADEMIC SKILLS</b>	<ul style="list-style-type: none"> <li><b>Audit:</b> Evidence of personal initiation and organisation of audit projects</li> <li>Evidence of active participation in audit and risk management</li> <li><b>Teaching:</b> Evidence of ability to communicate knowledge and understanding to others</li> <li><b>Research Skills:</b> Understanding of the basic principles of research and evidence-based practice, with potential to contribute to research</li> <li><b>Organisational management.</b> Able to use basic IT packages.</li> </ul>	<ul style="list-style-type: none"> <li>Evidence of training in teaching/training</li> <li>Evidence of relevant research achievements (prizes, awards, distinctions, publications, presentations, other achievements)</li> <li>Experience of management including rota organisation etc</li> </ul>
<b>CAREER PROGRESSION</b>	<ul style="list-style-type: none"> <li>No unexplained career gaps</li> <li>Appropriate career progression for stage</li> </ul>	
<b>COMMITMENT TO RURAL SURGERY</b>	<ul style="list-style-type: none"> <li>Knowledge of the training programme and curriculum competencies required</li> <li>Understanding of the particular demands of a rural surgical lifestyle</li> <li>Motivation and commitment to self-directed learning</li> <li>Commitment to maintain and expand a wide range of procedures and operations across different specialties in the Rural General Hospital setting</li> </ul>	<ul style="list-style-type: none"> <li>Participation/leadership in extracurricular activity/achievements relevant to Rural General Surgery</li> <li>Attendance at national/international meetings or conferences relevant to Rural General Surgery</li> </ul>

<b>COMMITMENT TO WORKING IN A RURAL GENERAL HOSPITAL IN SCOTLAND</b>	<ul style="list-style-type: none"> <li>• Knowledge and acceptance of the requirements of this Fellowship including rotation to different geographical locations in the North of Scotland</li> <li>• Evidence of commitment to becoming a Rural General Surgeon in Scotland</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence of knowledge and understanding of the NHS in Scotland</li> </ul>
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<b>III: CRITERIA TO BE ASSESSED AT INTERVIEW</b>	<b>ESSENTIAL</b>	<b>DESIRABLE</b>
<b>PERSONAL SKILLS</b> <ul style="list-style-type: none"> <li>• Judgement under Pressure</li> <li>• Communication Skills:</li> <li>• Problem Solving</li> <li>• Situation Awareness</li> <li>• Decision Making</li> <li>• Leadership &amp; Team Involvement</li> <li>• Organisation &amp; Planning</li> </ul>	<ul style="list-style-type: none"> <li>• Logbook/summary documentation of surgical exposure to date</li> <li>• Capacity to operate effectively under pressure</li> <li>• Awareness of own limitations &amp; when to ask for help</li> <li>• Capacity to communicate effectively &amp; sensitively with others, able to discuss treatment options with patients in a way they can understand</li> <li>• Capacity to think beyond the obvious, with analytical and flexible mind.</li> <li>• Capacity to bring a range of approaches to problem solving</li> <li>• Capacity to monitor and anticipate situations that may change rapidly</li> <li>• Demonstrates effective judgement and decision-making skills</li> <li>• Capacity to work effectively in a multi-disciplinary team &amp; demonstrate leadership when appropriate. Capacity to establish good working relations with others</li> <li>• Capacity to manage time and prioritise workload, balance urgent &amp; important demands</li> </ul>	<ul style="list-style-type: none"> <li>• Evidence of high level of ability in all essential personal skills and attributes</li> </ul>
<b>PROBITY</b>	<ul style="list-style-type: none"> <li>• Evidence of total commitment to professional integrity in all actions and behaviour</li> <li>• Takes responsibility for own actions, demonstrates respect for the rights of all.</li> <li>• Demonstrates awareness of ethical principles, safety, confidentiality &amp; consent.</li> <li>• Awareness of importance of being the patients' advocate, clinical governance &amp; responsibilities of an NHS employee</li> </ul>	
<b>FITNESS TO PRACTISE</b>	<ul style="list-style-type: none"> <li>• Up to date and fit to practise safely</li> </ul>	
<b>HEALTH</b>	<ul style="list-style-type: none"> <li>• Meets professional health requirements (in line with GMC standards/Good Medical Practice)</li> </ul>	

# Leadership Behaviours

NHS Education for Scotland (NES) assesses and selects employees based on our leadership behaviours which are expected at all levels in the organisations. These leadership behaviours support the NES ways of working and NHS Scotland values.

These leadership behaviours describe how we work, and what is expected of everyone who works in NES. A number of methods may be used to assess these behaviours as part of our recruitment and selection processes. Our leadership behaviours are:

