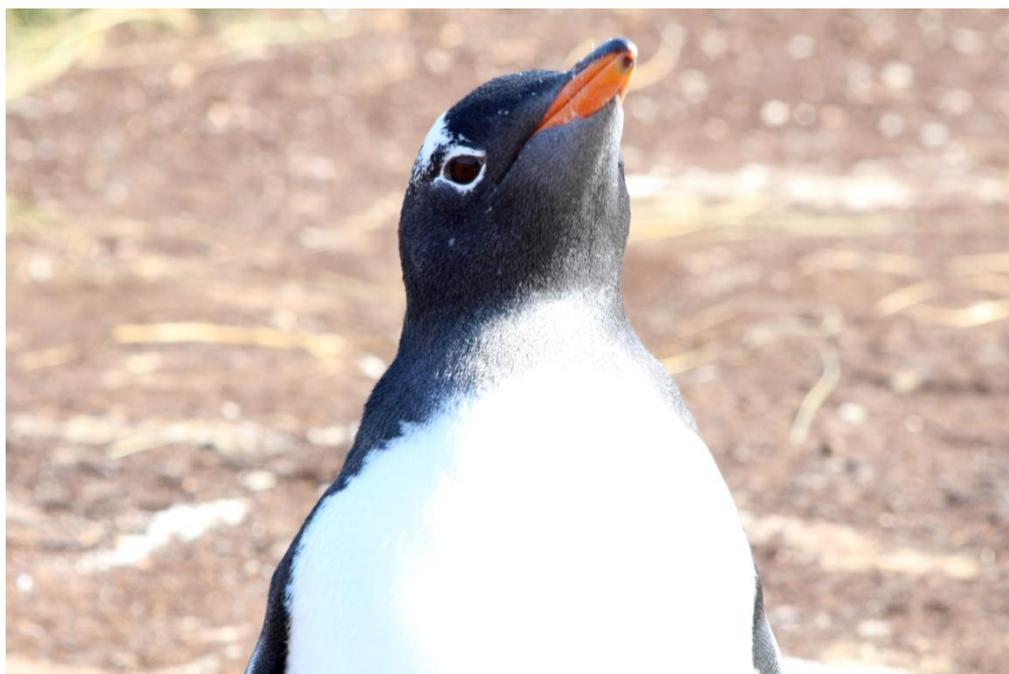


Dumfries and Galloway and Falkland Islands

Rural Fellowship Scheme 2018-19

This year we are offering a unique opportunity for two fellows to develop skills and competences in remote and rural practice by not only spending time with us in Galloway but extending experience by spending 1/3 of the year in the Falkland Islands.

We believe this challenging scheme will provide post holders with a valuable opportunity to experience a wide variety of rural practice, gaining insights and skills, which will facilitate further career development.



Why become a Rural GP or Rural Hospital doctor?

In parts on UK, and other parts of the developed world, communities live and work at considerable distance from secondary care facilities, but require the same standards of medical care as is available in more urban environments. GPs working in these areas may use a greater range of skills than urban counterparts, and use them in more challenging environments. In contrast to urban GPs the rural GP may have lower consulting rates, and also be seen as a valued and essential part of a tight community. Rural GPs often take on additional medical roles on voluntary or occasionally remunerated basis; examples include Mountain Rescue, RNLI support, event medical support, sports club medical officer, occupational health roles, and immediate medical care in support of Scottish Ambulance service.

GPs working in rural areas may also take on the role of rural hospital doctor, these positions vary in detail across the country, and the world but essentially involve providing accident and emergency and intermediate care in small general hospitals with variable levels of consultant input.

If developing your skills to become confident and competent in rural roles appeals to you read on, and consider joining the Dumfries and Galloway Rural fellowship scheme. For GPs who intend to work in any rural part of the world the skills you will gain in this programme will be a huge benefit, 20 minutes from a hospital can be just critical as 2 hours.

Although this programme is not intended to deliver all the skills required for expedition doctors it will provide an excellent grounding on which to build those additional skills.

Traditionally limited access to CPD opportunities has been regarded as a disadvantage of rural practice, however increasing availability and improving quality of distance learning opportunities in real time are addressing this. Additionally groups of GPs forming learning groups using materials such as those produced for the Practice Based Small Group learning (PBSGL) movement provide quality opportunities. PBSGL groups are active across Dumfries and Galloway.

Opportunities for experienced rural practitioners

Many experienced rural GPs make significant contributions to delivery of remote and rural care in management roles in addition to their clinical commitment, understanding of the challenges of delivering health care in diverse situations is essential to delivering the 20:20 vision.

It is intended that rural fellows completing this scheme will be offered the opportunity to apply for 2 year posts from August 2017, which will comprise of 12 months in Galloway and a 12-month secondment to the Falklands, providing the opportunity to continue to contribute to the NHS superannuation scheme whilst working in South Atlantic.

Why the Dumfries and Galloway Fellowship?

The Dumfries and Galloway Rural Fellowship offers an exciting and challenging opportunity to experience a spectrum of rural practice and rural hospital doctor work, by offering two practice types, and two rural hospital experiences.

The Kirkcudbright team is based in two sites, Kirkcudbright and Gatehouse of Fleet, an attached Cottage Hospital provides opportunity to use your skills in Minor Injuries, Care of the Elderly and Palliative Care. Staff members living locally ensures there is good continuity and awareness of issues in the local community.

The Stranraer practices offer a different type of rural experience. Although 75 miles from the district general hospital the primary care facility sits adjacent to the GCH, so the working day has similarities with more urban practices as the emergency department is next door. However the range of services is built to limit the need for patients to travel the 75 miles for secondary care, and opportunities exist for involvement in immediate pre-hospital care.



The programme also offers experience in two rural hospitals, one in Galloway 75 miles from a district general hospital, and one in the Falkland Islands 8,000 miles from secondary care facilities.

This fellowship provides the opportunity to gain overseas experience, which is very relevant to UK practice, whilst continuing to contribute to the NHS superannuation scheme.

Galloway

Dumfries and Galloway covers the large rural area of South West Scotland, with an area of approximately 6500 Sq Km and a population of around 150,000. The two centres of population in Dumfries and Galloway are Dumfries where the district general hospital is sited, and Stranraer, with a population of 10,600. The rural general hospital, Galloway community hospital (GCH) is situated adjacent to the GP practice in Stranraer, and therefore the practice experience here provides an unusual experience of 'rural urban' practice. Very nearly half of the population of Dumfries and Galloway is classified as rural, (although nine other small towns have a population bigger than that of Stanley, the Falklands capital) with large areas including Kirkcudbright, classified as remote.

The Galloway community hospital has 20 acute medical beds, 24 care of the elderly beds, 2 midwifery beds, consultant led nurse delivered chemotherapy provision, dialysis unit, 2 palliative care beds, and an emergency department, out-patient department and theatres. Visiting consultants perform routine surgery, and outpatient clinics are delivered by consultants in most specialties. Rural hospital doctors deliver in-patient and emergency department care, with telephone support as required. There is a 24/7 consultant anaesthetist support.

Primary care services to Wigtownshire and Stewartry are provided by practices in Stranraer, Sandhead, Drumore, Glenluce, Whithorn, Wigton, Newton Stewart, Kirkcudbright, Gatehouse of Fleet, Castle Douglas and Dalbeattie. Some of the GPs also provide immediate pre-hospital care, and medical support to voluntary organisations.

Primary care out of hours services are provided by hubs sited in the GCH, but separate from hospital services, and Dumfries.

Falklands

The Falkland Islands are a British Overseas Territory located in the South Atlantic, comprising over 700 islands and covering almost 12,000 Sq Km and has a population of around 3,000. More than 3/4 of the population lives in Stanley, classified as urban, a small number on the Mount Pleasant base, West Falkland and rural East Falkland, and less than 30 on other islands. Additionally there are somewhere in the region of 2,000 military personnel stationed at Mount Pleasant Airbase at any time.

Medical services are provided for the Falkland Island population, in-patient services to the military personnel at Mount Pleasant airbase, and emergency services to fishing vessels, and cruise ships seeking support.

Services are provided by four GPs, a surgeon and an anaesthetist, and 20 nurses, from King Edward Memorial Hospital. There are 29 hospital beds including acute, elderly care, intensive care, and isolation, obstetric. Some routine as well as emergency surgery is delivered in KEMH, emergency transfers for critically ill patients is to Chile, where time allows a medical team and equipped aeroplane being dispatched

from Chile; more urgent cases are transported by British Military flights. Routine referrals are to UK, patients attending UK hospitals of their choice.



Specialist from a number of UK hospitals visit the Falklands where they offer consultations, and limited surgical procedures. These specialists provide telephone advice throughout the year. Microbiological advice is available from UK. Laboratories in Falklands are able to process a wide range of samples, ultrasound and X-Ray is available with UK reporting if X-Ray films.

Obstetric services are provided for low risk pregnancies only, other women travel to UK for the later part of pregnancies and delivery, surgical support is available for emergency caesarian sections.

Other members of the health care team in the Falklands include two midwives, a district nurse, a physiotherapist, a pharmacist, CPNs, a school nurse, a health visitor, a speech and language therapist, a radiographer, and biomedical scientists. Visiting services are provided by optometrists and podiatrists.

Doctors work mainly from the KEMH in Stanley, visiting other islands by Falklands Island Government Air Services (FIGAS) aircraft (taxi style) on a rotational basis, settlements being visited on a 6 weekly basis, emergencies on outlying islands are dealt with by patients coming in on FIGAS flights, or in extremis by

helicopter evacuation (currently military but service to change to private company in 2016).



Structure of the Programme

The programme consists of an introductory 4-month block during which targeted training will be offered to ensure that the competences for rural GPs and rural hospital doctors are developed. In order to achieve sufficient exposure there will be a requirement to undertake some attachments in Dumfries. In the second 4-month block one post holder will work in two practices, and GCH; the other providing medical services in the Falkland Islands. In block three the two post holders reverse roles.

Fellows may be asked to make a small contribution to the primary care out-of-hours rota in Galloway, however majority of out-of-hours input will be to the Galloway community hospital. In Falklands fellows will take part in a 1:4 rota, where they are based at KEMH, and would only rarely attend outside the hospital.

A sample timetable is included below; details would be negotiated with each post holder to ensure appropriate training is offered in the light of prior experience.

Sample Timetable

Week	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Block 1							
1			Dumfries Induction	Practice Induction	Galloway CH Induction		
2	Practice 1	Practice 1	off	off	BASICS	BASICS	BASICS
3	Practice 1	Practice 1	MAU	MAU	MAU	MAU	
4	Practice 1	Practice 1	MAU	MAU	MAU	MAU	
5	Practice 1	Practice 1	off	off	off	off	off
6	Practice 1	Practice 1	off	ED	ED	ED	ED
7	Practice 1	Practice 1	ED	ED	ED		
8	Practice 1	Practice 1	Obstetrics	Obstetrics	Obstetrics		
9	Practice 1	Practice 1	Obstetrics	Obstetrics	Obstetrics		
10	Practice 1	Practice 1	ED/MAU/O	ED/MAU/O	ED/MAU/O		
11	Practice 1	Practice 1	off	off	PHPLS	PHPLS	PHPLS
12	Practice 1	Practice 1	off	off	NES (Including SCOTTIE)	NES (Including SCOTTIE)	NES (Including SCOTTIE)
13	Practice 1	Practice 1	ATLS	ATLS	ATLS		
14	Practice 1	Practice 1	GCH wards	GCH wards	GCH wards		
15	Practice 1	Practice 1	GCH wards	GCH wards	GCH wards		
16/17	AL	AL	AL	AL	AL	AL	AL

Week	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
BLOCK 2							
Falklands							
BLOCK 3							
1/2	AL	AL					
3	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
4	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
5	Practice 1	Practice 1	Practice 2	Practice 2	off		
6	Practice 1	Practice 1	Practice 2	Practice 2	off	GCH	GCH
7	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
8	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
9	Practice 1	Practice 1	Practice 2	off	NES Course	NES Course	NES Course
10	off	Practice 1	Practice 2	Practice 2	GCH		
11	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
12	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
13	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
14	Practice 1	Practice 1	Practice 2	Practice 2	GCH		
15	Practice 1	Practice 1	Practice 2	Practice 2	off	GCH	GCH
16	Practice 1	Practice 1	Practice 2	Practice 2	off		

Red- Courses Orange – Attachments Green - service

Developmental Training Offered

Both in Falklands and in rural practice in UK you will need to ensure that you are proficient in essential skills for that role. Most of these will have been covered to some degree during GPST training but as a rural GP or rural hospital doctor you will be using these skills in isolated situations without the support of a hospital or colleagues.

The following table has been developed, to help you identify the areas which you need to develop and consolidate your skills, and suggestions for options to achieve this. As the Falklands is very remote and there is no easy access to secondary care we ask you to carefully consider the items, prior to travel. If you travel in December you have only 4 months to cover these so you will need to be proactive and organised to make the arrangements.

Your mentor will review the list with you, but you are responsible for leading this review, and it would be very helpful in delivering your requirements if you could let us know what you would like to be arranged by June 2016. We ask fellows appointed to contact us (dg.educationcentre@nhs.net) as soon as possible to arrange an in depth discussion ideally in person, failing that by Skype or telephone. Some of the options for competency development require attachments to units in Dumfries for short periods, accommodation in Dumfries will be available during these attachments but early booking is recommended.

Rural Acute Care Competences

Competency Area	Sources of Education to develop initial competence	Fellows to cover by end of first block.	Consolidation of competences (please request as early as possible)
Life Support	ALS ATLS APLS PHPLS BASICS part 1 or refresher SCOTTIE	BASICS (arranged for full Scottish fellow cohort) Modified SCOTTIE (arranged for full fellow cohort) PHPLS (provisionally booked 11-13.11.16) ATLS (fellows to arrange)	Optional session of consolidation of neonatal resuscitation skills with local APLS instructor. Emergency Dept . and Medical admissions attachment
Acute Medicine	Attachment to MAU for up to 2 weeks	Experience on MAU – previous 18 months	Consultant support to Galloway via telephone and visiting site
Critical Care	Attachments to Emergency dept. and/or anaesthetics for up to 2 weeks ALS BASICS Part 1 or refresher	Review of competence in procedures:- Chest drains Ultrasound guided venous access Lumbar puncture Central lines Paediatric canulation.	Teaching sessions from consultants visiting Galloway.
ENT	Emergency dept. attachment	Review of competence of Nasal packing	Visit to ENT for specific teaching
O&G	Attachment to O&G maternity suite	See separate table *1	Simulator session could be delivered
Orthopaedics	Emergency department attachment if required ATLS	Review competence at wrist and ankle fracture reduction and shoulder relocation, Thomas splint application. Shoulder and knee joint injection.	Teaching sessions from consultants visiting Galloway

Competency Area	Sources of Education to develop initial competence	Fellows to cover by end of first block.	Consolidation of competences (please request as early as possible)
Paediatrics	APLS / PHPLS	PHPLS / SCOTTIE	Optional session of consolidation of neonatal skills with local APLS instructor.
Surgical			
Ophthalmology	Ophthalmology teaching session	Slit lamp use	Additional support from visiting ophthalmologist in Galloway
Major Incident managing in rural setting	Teaching session	Teaching session	
Forensics		*2	
Transportation options for remote critical care transfers	Locally at each site Packaging for retrieval - local session		
Specific Rural risks:- Hypothermia Cold injury*3 Drowning Decompression Zoonoses Organophosphates Inaccessible access – Mountain rescue/ Maritime rescue		Review management of / prevention of hypothermia and cold injury Review management of drowning and near drowning Review diagnosis / management of off, Lyme's disease, Weil's disease *4	Teaching session in Galloway
Psychological aspects of trauma or PTST in small communities	Experience in posts		Discussion with mentor
Dispensing	Galloway Practices		

*1 In the Falklands rural doctors manage obstetric patients doctors working on the rota are asked to provide evidence of the following competences; although acquisition of these prior to travel would be preferred it is recognized that this may be challenging, and in the event that it is not feasible a second on call arrangement will be utilized for obstetrics.

Competency	Evidence
Interpretation of CTG's	
Indications for Caesarean section	
Ability to perform vaginal examinations and assess Bishop's score and progress of labour	
Recognition and management of eclampsia	
Management and treatment of obstetric haemorrhage	
Ventouse delivery	
Perineal repair	
Management of retained placenta	
Ability to perform ERPC	
Resuscitation of the newborn	
Management of shoulder dystocia	
Management of preterm labour and premature rupture of membranes	
Induction and augmentation of labour	
Assisting at caesarean section	

*2 In Galloway police surgeons (not fellows) provide forensic examinations. In the Falklands Dr Rebecca Edwards provides gynaecological and child safeguarding examinations, in the unlikely event that she is unavailable and an examination is required another doctor could be asked to assist, as a non-forensically trained alternative.

*3 Despite the fact that the Falklands has an average winter temperature of 5 degrees cold injury including full blown frostbite can be seen in fishermen working in freezing compartments of vessels.

*4 Lyme's disease is a risk particularly in Scotland; Orf is occasionally seen in the Falklands.

Financial information

A relocation allowance of £1800.00 will be available to post holders to support travel to Falklands.

Basic salary will be paid by NHS Dumfries and Galloway during the Falklands block. Fellows therefore remain employees of NHS Dumfries and Galloway and subject to HR procedures.

Post holders will be required to provide out of hours cover during that block, remuneration for this will be paid by Falkland Islands Government at local rate.

Post holders receive the NHS Education for Scotland study leave allowance; costs of any additional courses are the responsibility of the fellow.

Although there is a reciprocal rights agreement in place it is necessary for fellows to take out appropriate medical insurance to cover evacuation costs.

Fellows will be responsible for any increased indemnity insurance.

Fellows will be responsible for accommodation costs.

Mentorship

Throughout the year fellows will be allocated a GP mentor in Galloway.

During the Falklands block the fellow should retain contact with the Dumfries and Galloway mentor via Skype meetings, an additional mentor will be allocated in Falklands. There is a requirement for fellows to undergo appraisal at the end of the year, for the fellow in Falklands in the last block, this can be achieved with Skype or on return to UK.

Additional Non-clinical Opportunities

Fellows will be encouraged to undertake a quality improvement project which will be relevant to Galloway and Falkland Island communities, work within the current Health Care Improvement Scotland priority work streams identified by Health Improvement Scotland would be particularly welcome, support will be offered. In view of the site changes early identification of topic, and shared projects would be ideal.

The CMO annual report in Scotland highlights harm as a result of over treatment and over-diagnosis. Support will be available for trainees wishing to undertake work related to developing understanding of the impacts of distance from a secondary care centre (Falklands / Stranraer / Dumfries) on management choices, and subsequent consequences.

Accommodation

Support in obtaining suitable accommodation will be offered. We are hoping to be able to offer reasonably priced accommodation for professionals in the region on short term contracts in conjunction with Dumfries and Galloway council however this opportunity may not be available for the start of the 2017 intake.

In Falklands there is no rental market, fellows will be accommodated in Falkland Island Government accommodation. Should applicants wish a partner to accompany them to Falklands we would endeavor to secure married accommodation.

Social Opportunities

Galloway

Galloway is a beautiful part of the country, with ample opportunities to become involved in a variety of social activities. Members of local clubs regularly compete at road, and fell running events (where all standards of runner are welcome!), triathlons, wild swimming, mountain and road cycling events. Newton Stewart is the home of one of the seven sites which make up the Seven Stanes famous mountain biking venues. Fell walkers will love the Glentool area of hills, far quieter than similar but better known areas! Water sports opportunities abound with sailing kayaking and canoeing options.



Photography, painting, wild life watching, and astronomy are common hobbies, with the dark sky's park in Galloway forest.



The Wigtown book festival is a popular annual event drawing large crowds, as are events at some of the botanical visitor attractions.

Falklands

The Falkland Islands are a paradise for wildlife enthusiasts, where many of the iconic species are remarkably tolerant of man. Many have commented when watching the comical Gentoo penguins that they feel unsure who is watching who!





In the rural areas (Camp) small communities will make their own entertainment, but all look forward to the annual Sports week, hosted by one settlement. Here sheep dog trials, races, and other entertainment follows a traditional pattern.

In Stanley there is an annual half marathon, and clubs for many hobbies including walking, cycling, spinning, swimming, football games between locals and military teams are played with characteristic gusto! There is a modern sports centre with gym and 25-meter pool, and library.

Roads are virtually all unmetalled, travel between settlements mostly by FIGAS aircraft, a visit to a local beauty spot often involves a long drive off road across open hillside. A car will be available for the on-call doctor, but fellows might find a bicycle (mountain or cyclocross) an advantage for getting around in Stanley and visiting nearby sights.



The common misconception that minefield limit access to the countryside is not valid, all minefields are clearly marked, and unmistakable.

Getting to the Falklands

For further information visit the Falkland Island Tourist Board web site.

Ministry of Defense flights are available from Brize Norton, those on Falklands Island Government business, including working as a doctor, are eligible for reduced rates. The 18-20 hour flight is broken at Ascension Island, and is remarkably painless!

The alternative is a commercial flight via South America.

Further Information

For further information contact Fiona Graham, Acting Director of Medical Education, NHS Dumfries and Galloway (fionagraham2@nhs.net)

Our current Rural Fellow Aoife Ni Mhaoileoin (animhaoileoin@nhs.net) is also happy to speak to potential fellows

To find more about this exciting opportunity visit our You Tube presentation at

<https://youtu.be/j73-nziEof4>

Visits would be welcomed from interested applicants.

Applications

Applications must be submitted through NHS Education for Scotland

<http://www.nes.scot.nhs.uk/education-and-training/by-discipline/medicine/general-practice/gp-fellowships.aspx>

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Mountain Biking

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All Others

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