

FEBRUARY 2021



RURAL FELLOWSHIPS

Fellowships available for:

Skye and Lochalsh
Lochaber
Caithness and Sutherland

Three Unique Experiences

These innovative one-year fellowships will link both with GP practices and established teams of Advanced Nurse Practitioners for a multi-disciplinary educational experience in a rural setting.

Rural Fellows are usually allocated one base practice, plus two or three practices, where they will provide the majority of their service commitment. These practices will be agreed as the beginning of the rural fellow year, with a view to providing the opportunity to experience all aspects of rural General Practice.



The Rural Support Team

A unique feature of these fellowships is the connection with our Rural Support Teams. The teams in all three areas consist of a mix of healthcare professionals; GPs, Advanced Nurse Practitioners, Unscheduled Nurse Practitioners and Paramedic Practitioners, all these disciplines either work or will work together providing healthcare to the populations within the North & West Division.

The fellow would be supported to engage with the teams, providing a completely new perspective on the provision of services in rural areas – for the benefit of both the fellow and the teams! More at bit.ly/2UuUYzq



Torrisdale Bay



13 Weeks Education

Educational opportunities are flexible and too many to list. The fellow's educational plan will be organised in conjunction with the service elements of the posts and with support from with the Rural Fellowship Co-ordinator. Fellows will have the opportunity to negotiate additional experience in secondary care, remote practices and to undertake specific course activity as available. Fellows will also be able to attend the regular meetings of the Scottish Rural Fellows.

Smiddery Point, Lochaber

Service Commitment

We'll work with the fellows to balance both service needs and their own aspirations. The service commitment practices can be in more than one area. If the fellow is required to travel to an area away from their normal base practice, accommodation will be arranged, and travel expenses reimbursed.



Loch Hope, Sutherland

Lochaber

A mecca for outdoor sports, this is one of Highland's most spectacular areas. It's also a fantastic healthcare environment with rural general practice alongside acute care at the Belford Hospital.

visitfortwilliam.co.uk

The host practice for the Rural Fellowship in Lochaber will be the Fort Augustus Medical Practice, with service commitments at a number of our GP practices including Ballachulish Medical Practice, and Acharacle Medical Practice.



Am Stac, Lochaber



Wick Harbour

Caithness and Sutherland

One of the UK's last great wildernesses, Caithness and Sutherland covers the great landmass in the North of Scotland. Small rural practices and larger urban practices face unique challenges miles from urban centres.

venturenorth.co.uk

The host practice for the Rural Fellowship in the North will be in Assynt/North West Sutherland with service commitments at any of the Practices in the area.



Skye & Lochalsh

No introduction required for this incredible location. Less well known is the unique model of healthcare which is now acknowledged as a centre for excellence.

ritchiereport.net/post/centre-of-excellence-meeting-and-progres

The hostpractice for the Rural Fellowship in Skye will likely be Dunvegan Medical Practice, with service commitments at any of the Practices on Skye, Lochalsh & Wester Ross.

The Red Cuillin, Skye

Speak to us

The fellowships will be developed and managed in collaboration with the Primary Care Managers. We'll be flexible and work to meet your needs and aspirations. Call us for an informal chat:

Evan Beswick, Primary Care Manager (North)
evan.beswick@nhs.net or
07825 104260

Fiona MacKenzie, Primary Care Manager (West)
fiona.mackenzie10@nhs.net or
077952388920



The Rural Support Team boat to the Small Isles

A BIT OF DETAIL



Duties

Duties will include the full range of general practice duties during the Rural Fellows time in any General Practice, including working in the local Community Hospital if appropriate. They will be expected to play a full part in all aspects of the practice and work alongside the members of the extended primary care team.

OOHs Element

While based in practices that have opted-out of OOHs there will be no requirement to do any OOHs sessions, however the rural fellows may wish to work in the local OOHs service in addition to their rural fellow role. This would be paid in addition to their rural fellow salary. Attendance at the BASICs course would be expected before covering OOHs in rural areas. Fellows are expected as part of their educational programme to gain experience in Out of Hours and Emergency Care.

Supervision in Practice

A principle will be identified as a mentor/supervisor in the practices where the service commitment has been agreed, and will be available to the Fellow when working in other rural practices.

Education in Practice

Fellows will be expected to join in with the educational activities available within the practices that they are working. NHS Highland has 4 Protected Learning Time afternoon.s during 2021/2022.

Local Educational Opportunities

A variety of regional educational activities are available including courses such as Advanced Life Support and attachment potential in various part of Highland. The Rural Fellow will also be able to attend local PLT events, along with various local meeting meetings/webinars

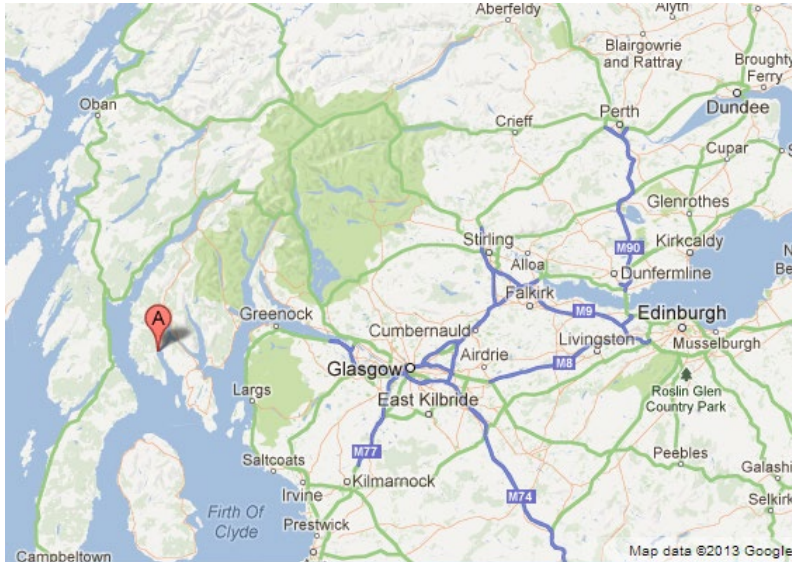
NHS Education for Scotland

Rural Fellowships in General Practice – Local Job Information

Supplementary Information for NHS Highland, Argyll and Bute HSCP Cowal Rural Fellowship

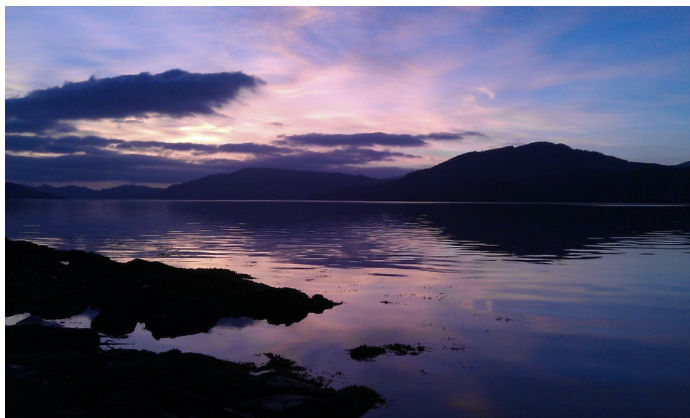
Location

The Cowal peninsula is situated in the west of Scotland, around an hour and a half drive from Glasgow.



Cowal is part of NHS Highland Argyll and Bute Health and Social Care Partnership, covering a population of around 22,000. The main referral centres are Inverclyde Royal in Greenock for general secondary care, Argyll and Bute Hospital in Lochgilphead for psychiatry, Royal Alexandra Hospital in Paisley for maternity and Queen Elizabeth University Hospital in Glasgow for paediatrics.

Cowal's exceptional natural environment is a paradise for outdoor enthusiasts, inspiration for artists, a joy for food lovers and a haven for wildlife. Bordered on three sides by spectacular sea lochs and in the north by mountain, forest and glen, Cowal is a peninsula of outstanding scenic beauty and cultural heritage.



For such a small part of Scotland, there is an amazing contrast in the landscape throughout the Peninsula. North Cowal is distinctively rugged and remote, with Loch Eck surely one of the most breathtakingly picturesque stretches of water in Europe. South East Cowal is the home of Cowal's only major town, Dunoon, the location of amazing historic botanical gardens with a coastline indented with sea lochs



and peppered with many lively small communities.

South West Cowal is "Argyll's Secret Coast", a remote and beautiful stretch of Cowal Coastline taking in the spectacular Kyles of Bute and the picturesque town of Tighnabruaich. It is a great area for outdoor activities, especially sailing, as well as excellent hospitality, yet is less than two hours from the central belt of Scotland.

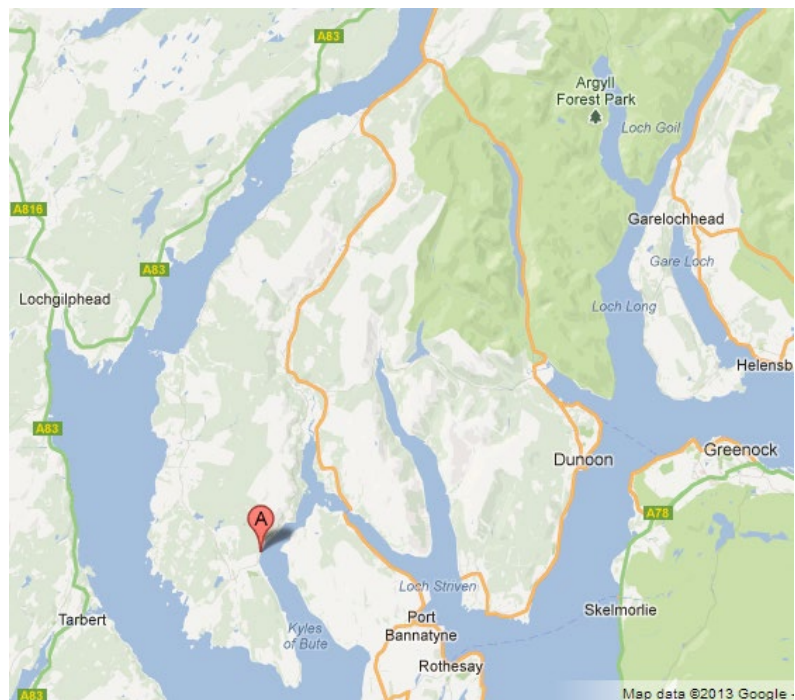


The base practice for the fellowship will be at **Kyles Medical Centre, Tighnabruaich** (practice population 1100) which is a rural 1.5 GP FTE, Vision paper light practice which has opted out of OOH provision. Tighnabruaich is just an hour and a half west of Glasgow and is nestled along the east coast of Loch Fyne, stretching into the beautiful Kyles of Bute. The area is one of natural beauty with recreational activities including sailing, angling and hill walking. There is also a nine hole golf course. It is a quiet settled community with little population movement and a large number of retired people.



Portavadie Marina is only 10 minutes away and is a beautiful location for sailing enthusiasts and boasts a beautiful on-site restaurant, shop, 5* accommodation and 5* leisure centre and spa.

The practice covers the area from Glendaruel in the North, bound by Loch Fyne to the West and Loch Striven and the Kyles of Bute to the East and South to the Ardlemont Peninsula. The main centre of population is in Tighnabruaich where the purpose built, health board owned premises are. KMC also has facilities for many community led services, including NHS dentist, physiotherapy, podiatry and community nursing. The practice is fully dispensing with a list size of 1,100 and provides General Medical Services along with a selection of enhanced services including minor surgery.



Service Commitment

The Cowal fellowship offers an exciting mix of rural general practice along with gaining experience of working in a GP Rural Practitioner led community hospital with emergency department. Many rural areas in Scotland continue to run hospitals staffed entirely by GPs/Rural Practitioners, Cowal Community Hospital is one of these. CCH is a 14 bed hospital, of which 6 are palliative and supported care beds, with a GP run 999 receiving emergency department. It has a radiology unit but no on site lab facilities.(I-STAT device is on-site) It accepts patients 24/7 more serious acute cases are generally triaged, stabilised and transferred to definitive care by ferry or airlift.

It is anticipated that the Cowal Rural Fellow would spend the equivalent of 22 weeks working regular hours as part of the rota as a fully integrated clinician in the community hospital alongside the rural practitioners applying their breadth of skills in this extended role and gaining invaluable experience encountering medical emergencies and providing medical cover without specialists on site.

The service commitment will be agreed close to the beginning of the year to allow integration of study and annual leave. The Fellow is given the flexibility to maintain their own diary, giving maximum ability to achieve all personal aspirations for the Fellowship year.

Duties

Covid 19 has obviously had a huge impact on how general practice operates, at KMC we have moved to telephone triage, utilising NearMe or face to face appointments were required. Duties will include the full range of general practice duties during the Rural Fellows time in the base educational practice and will be expected to play a full part in all aspects of the practice routine. Time at Kyles Medical Centre will include working alongside the principal GP as well as single handed working. Issues such as dispensing, practice and staff management can all be looked at whilst here to ensure a rounded experience and view of rural general practice. Both partners are BASICS responders and will respond to calls from SAS, the practice is a fixed resource during working hours. During service commitments, the fellow will work in the emergency department and provide medical cover for the inpatient ward and hospice. A significant part of the inpatient role involves liaising with other community services and families and taking a lead in planning discharge and care packages in case conferences.

OOHs Element

There will be no requirement to do any OOHs sessions, however the rural fellows may wish to work in the local OOHs scheme in addition to their rural fellow role. Fellows are expected as part of their educational programme to gain experience in Out of Hours and Emergency Care. Occasional daytime OOH working in casualty will be available.

Supervision in Practice

The Rural Fellow mentor will be Dr Alida MacGregor (alida.macgregor@nhs.net) GP Partner at Kyles Medical Centre and previous Rural Fellow. Alida will be available to the Fellow when working in other rural practices and the community hospital. A clinical supervisor at CCH will be identified at the start of the fellowship.

Education in Practice

The Rural Fellow will have equal access to educational opportunities that are varied and extensive within the Cowal area.

Local Educational Opportunities

Cowal Community Hospital has extensive educational opportunities including Acute Medicine (GP led), Rehabilitation Medicine (GP/Nurse led), Community Integrated Care (Nurse/GP), Obstetrics (Midwife/GP), and Palliative Medicine (MacMillan Palliative Care Nurse/GP). There are numerous visiting Consultant Clinics within the hospital; including, psychiatry, paediatrics, general surgery, ophthalmology, orthopaedics, gynaecology and ENT allowing close working and specialist interest development. Argyll and Bute has a very varied range of general practices, including rural mainland and island practices. The fellow would be supported to utilise opportunities available, to maximise their experience and achieve their personal education goals.

Practical issues

There is no specific accommodation linked to the fellowship and although not a guarantee, we have successfully been able to help find local accommodation for successful candidates in the past. Please get in touch early so we can assist in finding something appropriate for your needs. We can also help with information about local schools/childcare and other questions you may have.

This Job Description is not definitive and may be subject to change in discussion with the Fellow, Argyll and Bute Community Health Partnership and NES.

Testimonial from Jenny Leigh, Cowal Rural Fellow 2015/16

I applied for the 2015 Rural Fellowship as we'd been talking about moving to Scotland for a few years but I was reluctant to dive into the unknown, commit to a permanent job and then find that living and working as a rural and remote GP wasn't for me. My husband wanted to get away from long, busy commute and we were looking for a better quality of life for our young family. The fellowship provides the perfect opportunity to dip your toe into living and working as a Rural GP, with support from a mentor and training to help you gain (or regain) the skills and confidence that I personally found that I had lost working as a GP in a more urban setting.

The Cowal fellowship was perfect for us – the practice helped to arrange accommodation, and were incredibly supportive considering that I had just moved house, country and job with an eight-week old baby. The hospital component of the job was also very manageable, and having been out of acute medicine for several years, I was able to gain experience in a supernumerary role until I felt confident enough to work solo in the A&E department. The Fellowship provided a good balance of working on an acute admissions/rehab ward, in the hospice and in A&E, which in turn helps provide skills for working in a rural practice. I enjoyed being able to see “our” patients in A&E or on the ward and then following them up in the community.

The study leave allowance / budget is very generous and in addition to numerous formal training courses, the three fellowship meetings were a good opportunity to meet with the other rural fellows, tailor learning to individual needs and to see parts of Scotland you might not have had the chance to see. I managed to do the DFRSH, plus LoC coils and implants in just over 4 months, which is something that hadn't been feasible in my previous role due to long waiting lists and the costs/time involved when working as a conventional GP.

Cowal is incredibly beautiful. I like being able to pull onto the main road and not see any cars, as well as navigating the scenic single roads through the hills to work. I always stop to marvel at the views, yet for all that it seems so remote, (and it can be if the Rest and Be Thankful is closed and the ferries aren't running) Cowal is but a short ferry hop to Glasgow, with all the transport links and shopping/bustle that you need in short bursts. The best of both worlds, but with wonderful scenery, outdoor activities and fabulous local food. Within a few miles we have salt marsh lamb, outdoor reared pork, beef and venison, and the famous seafood of Loch Fyne. Inver restaurant is one of a handful of Scottish restaurants in the Sunday Times top 100 restaurants, and it is on our doorstep.

The Cowal fellowship is ideal if like me, you come with a family in tow. There is no OOH commitment unless you want to do so, and I found both the hospital and practice to be welcoming, supportive and flexible to our needs. Furthermore, as a family, we have been warmly welcomed into the community. We enjoyed our year in Cowal so much that we decided to remain in the area, and there can't be a better endorsement than that!

Testimonial from Laura Cameron, Cowal Rural Fellow 2014/15

This is an excellent job with a wide variety of roles and based in one of the most beautiful parts of the country. The combination of working in primary care and community hospital in casualty and the wards gives an opportunity that the other rural fellowships don't offer in the same way.

The practice is friendly, super organised and a fantastic place for anyone to learn and grow as a GP. Both of the partners are interested in teaching and will support the rural fellow however they can in helping them make the most out of the year.

The community in Tighnabruaich are open and welcoming and we certainly feel at home here after only a few short months. Amongst the other activities mentioned my family have become involved in the local RNLI and this has been a great way to make connections outside of work.

Working in casualty in the community hospital adds a different challenge to the job but again you are extremely well supported from the start. This year I have completed training in medical emergencies and spent time with the EMRS team (emergency medical retrieval service). The hospice and wards have a close knit team which work in a holistic, multidisciplinary way with usually the most frail elderly patients.

Don't pass this opportunity up, for me it's been invaluable and it will certainly shape your career in general practice for the better. It's a year to push yourself, learn as much as possible and try out things you perhaps never thought you would do. Feel free to contact me on laura.cameron6@nhs.net about this year or have a wee look at my blog:

www.wheezlesandsneezles.wordpress.com

Testimonial from Aaron Donald, Cowal Rural Fellow 2013/14.

If you're looking for a well rounded job to have a taste of general practice in the rural setting then look no further than this post. Based in Tighnabruaich on the west coast of Scotland looking down into the Kyles of Bute.

Here is situated the new build Kyles Medical Centre complete with consulting rooms, video conferencing suite, minor surgery theatre and an all singing and dancing dental suite, the practice is a well utilised medical facility serving the local population. The locals are friendly and welcoming into the community with plenty of activity in the area catering to all tastes.

A wide variety of things to do including sailing with a local marina, a golf course, badminton group, country dancing and a skiff rowing group with a second on the way. With a wealth of stunning scenery in the surrounding area, it also presents the opportunity for a variety of walking, cycling and photography enthusiasts, as well as some water sports with numerous kayaks/canoes active in the rivers and lochs.

As if this isn't rewarding enough, the other aspect of the job is based 45 minutes away in Dunoon (looking across the river into Glasgow, easily accessed by regular ferries) in Cowal Community Hospital. At CCH there is the chance to work in a full receiving accident and emergency as well as working in the medical and palliative wards upstairs. The local hospital is a vital component of the wider locality providing a variety of services including physiotherapy, occupational therapy, SALT, podiatry, out-patient clinics, plain film radiology, minor surgery, endoscopy and the base for the areas district nurses.

I am loving my time in the post here with a variety of challenges and skill development opportunity as well as the chance to care for patients in both the community hospital and back in general practice. These services are greatly appreciated by the locals which adds very much to

the rewards of the post, seeing patients through many aspects of their medical care needs and getting to know patients in more depth than possible in larger urban populations.

If you are considering one of the remote and rural fellowship posts I would strongly recommend this post in particular and giving it a go will lead to the development of many skills and experiences which I hope will leave you as enthusiastic about rural general practice as it has me.

Go on, do it.

Testimonial from Dr Jurgen Tittmar, former rural fellow and part time salaried GP in Tighnabruaich 2012-2013.

Do you want a job practicing 'Tesco medicine', an unending conveyor belt of anonymous patients in a list size so large it would take decades to get to know anyone? Then don't bother applying for this job. Do you want to be a cog in a machine, a large practice where someone else sets the rules and you spend your time ticking QOF boxes so that the partners who you never see can rake in the cash? Then the rural fellowship isn't for you. If however you'd like to make a difference to people's lives, to have the time and freedom to do your job properly and to get to know patients properly, then this is too good a chance to miss. I was in the second year of the rural fellowship, 13 years ago now, and it was one of the best professional decisions I ever made. It gives you the chance to plug the gaps in your training, to develop your own ideas and interests, to try stuff out or get confident in areas you know you really should be better at but haven't had time to do. It also gives you the chance to live and work in some amazing places that you'd never see otherwise. In Cowal, you'd be stepping into a diverse group of young, friendly, forward looking, rural GPs who between us have practised all over Scotland and abroad; you would learn single handed practice but you'd be far from alone.

I have friends who are GPs in Glasgow who on the one hand look enviously at what we get to do in rural practice and yet also would be terrified to even try. They have been so long away from emergency or palliative care and are so used to relying on large tertiary centres on their doorstep that their skills have atrophied and they are no longer general practitioners, more limited practitioners. Truth to tell, it still scares me at times but we'd help you develop the skills and supports to be genuinely able to work anywhere and deal with anything. Maybe more importantly, the fellowship can help make sure you avoid a future of getting stuck in a rut and wanting to stay safe within a comfort zone.

Can you really get to know a group of patients that feel like your own in only a year, part time? I just have in Tighnabruaich, it is a wonderfully friendly and open community with all the quirks and underlying issues of any small rural area. Maybe you're not sure if living and working in a wee rural community is for you – I've done it both ways and while I'd recommend living and working in the same community, I've worked in Cowal for 6 years now while living in Glasgow due to family commitments. Would you really be valued, accepted as a fully fledged GP and able to get involved in the wider practice as much as you wanted? Believe me, you would, because you'd have 2 mentors who have already been there, who are passionate about rural medicine and committed to making sure you would receive the best, needs led experience we can provide. As we have been rural fellows ourselves, we understand the ethos of the fellowship experience and we'd ensure there was no chance of you being taken advantage to cover service commitments or get dumped on. So what have you got to lose? Come and join us, you'll not regret it.