

NATIONAL MEDICAL DIRECTOR'S CLINICAL FELLOW SCHEME

**Information Pack
2014-2015**

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Overview of the scheme

Thank you for your interest in the National Medical Director's Clinical Fellow Scheme, sponsored by Professor Sir Bruce Keogh. The scheme is managed by the Faculty of Medical Leadership and Management.

Clinical Fellows work in an apprenticeship model to the most senior personnel in national NHS and healthcare-related non-NHS organisations. This offers an unparalleled experience and the opportunity to develop a range of skills including: policy development, project management, research and analysis, writing and publishing.

It is anticipated that there will be approximately 24 clinical fellow posts available for 2014-15. In 2013-14 a number of posts have been created in the north of England to enhance access across the country. This will continue for 2014-15 and there will be a single recruitment process and a joint induction programme for all posts. It is also anticipated that 2014-15 Clinical Fellows will gain opportunities for joint working with fellows from the Welsh and Scottish schemes. A list of the 2013-14 host organisations can be found in this document and at www.fmlm.ac.uk.

In addition to the induction programme run by FMLM, there will be northern and southern-based action learning sets. Clinical Fellows are also encouraged to work collaboratively on projects throughout the year and to organise ad hoc events to meet prominent figures and arrange visits for colleagues to their host organisations to share learning.

Posts commence on 1 September 2014 and run for one year.

Clinical Fellows are responsible for negotiating (ideally) a secondment from their current employer to the host organisation. It is wise to negotiate this as early as possible upon appointment. **FMLM accepts no responsibility for any contractual arrangements.** You are invited to make an application to the scheme. Prior to interview, shortlisted applicants will be given the opportunity to meet current Clinical Fellows and many of their potential hosts, to help in ranking preferred posts.

There is also a chance to join this year's clinical fellows for a webinar on 17 December 2013 (www.fmlm.ac.uk/events/medical-directors-clinical-fellow-scheme-what-is-it-about).

We hope that this information pack will answer your questions about the scheme. Should you have additional queries, please refer to the FMLM website.

With best wishes,

The Recruitment Team

clinicalfellowscheme@fmlm.ac.uk

Eligibility criteria

Essential criteria	When evaluated ⁱ
<p style="text-align: center;">Qualifications</p> <p>Applicants must have:</p> <ul style="list-style-type: none"> • MBBS or equivalent medical qualification 	CV
<p style="text-align: center;">Eligibility</p> <p>Applicants must:</p> <ul style="list-style-type: none"> • be eligible for full registration with, and hold a current licence to practiseⁱⁱ from, the GMC at time of intended start dateⁱⁱⁱ • have 12 months' experience after full GMC registration, and evidence of achievement of foundation competencies with resultant award of a FACD5.2 or equivalent, in line with GMC standards / Good Medical Practice by intended start dateⁱⁱⁱ • be eligible to work in the UK or participate in this scheme according to visa requirements 	Application form Interview
<p style="text-align: center;">Fitness to practise</p> <p>Applicants will be:</p> <ul style="list-style-type: none"> • up to date, fit to practise safely and aware of own training needs 	References CV
<p style="text-align: center;">Language skills</p> <p>Applicants will have:</p> <ul style="list-style-type: none"> • demonstrable skills in written and spoken English, adequate to enable effective communication • undergraduate medical training undertaken in English; or the following scores achieved in the academic International English Language Testing System (IELTS), in a single sitting, no more than 24 months prior to the date of application: <ul style="list-style-type: none"> ➢ overall 7.0, Speaking 7.0, Listening 7.0, Reading 7.0, Writing 7.0 • adequate communication skills, but where evidence is not in one of the above forms, alternative supporting evidence of language skills^{iv} must be provided 	Application form Interview
<p style="text-align: center;">Career progression</p> <p>Applicants must:</p> <ul style="list-style-type: none"> • be able to provide complete details of their employment history • have evidence that their career progression is consistent with their personal circumstances • have evidence that their present level of achievement and performance is commensurate with the totality of their period of training • have not previously resigned or been removed from a post or programme 	Application form Interview
<p style="text-align: center;">Application completion</p> <p>ALL sections of the application form completed FULLY according to written guidelines.</p>	Application form

ⁱ 'When evaluated' is indicative, but may be carried out at any time throughout the selection process.

ⁱⁱ The GMC introduced the licence to practise in 2009. Any doctor wishing to practise in the UK after this date must be both registered with and hold a licence to practise from the GMC at time of appointment.

ⁱⁱⁱ 'Intended start date' refers to the date at which the post commences, not (necessarily) the time an offer is accepted. For 2014 posts this will be 1 September 2014, unless a different start date is specifically indicated in advance by the employing organisation.

^{iv} An example of alternative evidence could be testimony from a clinical/educational supervisor, in the form of a signed letter (this will be subject to review by any organisation to which you apply).

For further details on eligibility please read the FAQs.

Selection criteria

Essential criteria	Desirable criteria	When evaluated
Qualifications		
(as above)	Additional related qualifications, eg intercalated degree, BSc, BA, MBA, PhD, BMedSci or equivalent	CV Interview
Academic / Professional		
<ul style="list-style-type: none"> • Primary medical qualification • Full registration with GMC • Doctor in, or eligible for, training • Must have completed both years of foundation training by start date 1 September 2014 or equivalent • Must not have completed specialist training before 1 September 2014 (GP trainees please see FAQs on eligibility) 	<ul style="list-style-type: none"> • Additional degree (intercalated, masters or doctorate) • Publications/presentations 	CV Interview
Quality/Service Improvement		
<ul style="list-style-type: none"> • Evidence of involvement in quality improvement, audit, formal research project or other activity which: <ul style="list-style-type: none"> ➢ focuses on patient safety and clinical improvement ➢ exhibits innovation in challenging situations • Good knowledge of the English healthcare system including education, research, service provision, regulation, career structures, medical politics and ethical issues • Demonstrates understanding of the basic principles of audit, clinical risk management, evidence-based practice, patient safety, and clinical quality improvement initiatives • Interest in/knowledge of the delivery of safe effective healthcare services 	<ul style="list-style-type: none"> • Evidence of publications/presentations/prizes in quality improvement • Experience of using quality improvement tools to deliver quality improvement • Clear insight into issues facing English healthcare services • Understanding of population health 	Application form CV Interview Reference form
Education and Teaching		
<ul style="list-style-type: none"> • Evidence of interest in, and experience of teaching • Evidence of feedback for teaching 	<ul style="list-style-type: none"> • Attendance at teaching courses • Evidence of regular teaching or instructor 	CV Interview Reference form
Leadership and management		
<ul style="list-style-type: none"> • Evidence of involvement in management commensurate with experience • Demonstrates an understanding of NHS management and resources • Evidence of effective team working and leadership, supported by multi-source feedback or other workplace based assessments • Interest in/knowledge of the importance of leadership and management for clinicians 	<ul style="list-style-type: none"> • Evidence of achievement outside of medicine • Evidence of effective leadership in and outside medicine • Evidence of altruistic behaviour eg voluntary work • Evidence of organisational skills – not necessarily in medicine 	Application form CV Interview Reference form

Skills		
<ul style="list-style-type: none"> • Quick to understand new information and adapt to new environment • Clarity of thought and expression • Demonstrates basic computer literacy, including electronic communication • Communication skills: <ul style="list-style-type: none"> ➢ demonstrates clarity in written/spoken communication ➢ capacity to adapt language to the situation, as appropriate ➢ able to build rapport, listen, persuade and negotiate. • Problem solving and decision making: <ul style="list-style-type: none"> ➢ capacity to use logical/lateral thinking to solve problems/make decisions, indicating an analytical/scientific approach 	<ul style="list-style-type: none"> • Writing experience: <ul style="list-style-type: none"> ➢ clinical and/or non-clinical topics ➢ peer reviewed publications and/or other communication medium (eg blog, letters etc) • Experience of presenting complex information • Leadership skills gained within the NHS or elsewhere • Demonstrates information technology skills 	<p>Application form CV Interview Reference form</p>
Personal		
<ul style="list-style-type: none"> • Shows initiative/drive/enthusiasm (self-starter, motivated, shows curiosity, initiative) • Commitment to personal and professional development • Managing others and team involvement: <ul style="list-style-type: none"> ➢ able to work in multi-professional teams ➢ ability to show leadership, make decisions, organise and motivate other team members; through, for example, quality improvement and audit projects • Organisation and planning: <ul style="list-style-type: none"> ➢ capacity to manage/prioritise time and information effectively ➢ evidence of thoroughness (is well prepared, shows self-discipline/commitment, is punctual and meets deadlines) ➢ capability to work with long time scales for delivery within agencies with differing priorities • Coping with pressure and managing uncertainty: <ul style="list-style-type: none"> ➢ capacity to operate under pressure ➢ demonstrates initiative and resilience to cope with changing circumstances 	<ul style="list-style-type: none"> • Achievements outside of medicine 	<p>Application form CV Interview Reference form</p>
Probity – professional integrity		
<ul style="list-style-type: none"> • Demonstrates probity (displays honesty, integrity, aware of ethical dilemmas, respects confidentiality) • Capacity to take responsibility for own actions 		<p>Application form Interview Reference form</p>

Timeline

10 December 2013

Application process opens

14 February 2014

Application process closes

21 February 2014

Short listing completed

Invitations to host evening and interviews sent out

28 February 2014

Contact unsuccessful applicants

3 March 2014*

Host evening (London)

10 – 11 March 2014*

Interviews (London)

31 March 2014

Offers sent out

4 April 2014

Contact unsuccessful interview candidates

Offers process closed

1 – 3 September 2014 and 8 – 10 September 2014

New Fellows Induction

*Tentative dates. Dates to be confirmed in January.

Applications

Applications must be received online by 5pm on 14 February 2014.

To apply, please visit www.fmlm.ac.uk/professional-development/national-medical-directors-clinical-fellow-scheme/clinical-fellows. The online form will require you to submit:

- A curriculum vitae of **no more than three sides of A4** in length (minimum font size 11), including the details of **two** referees. Full references should be brought to interview.
- A personal statement in no more than 400 words, explaining:
 - Your motivation for applying to the scheme
 - Your most relevant achievement(s) to date
- A description of your involvement in any education and teaching activities in no more than 200 words.
- A description of your involvement in any quality improvement initiatives in no more than 200 words. Although not essential, where possible please provide a hyperlink to any online reference (the link will not be included in the word count).
- A description of your experience in a leadership and/or management role (clinical or non-clinical) in no more than 200 words. Although not essential, where possible please provide a hyperlink to any online reference (the link will not be included in the word count).

We expect to inform applicants whether or not they have been shortlisted by 21 February 2014. An information evening will be held in London for shortlisted candidates on 3 March 2014, where they will have an opportunity to meet some of the current Clinical Fellows and potential mentors.

Interviews will be held in central London on 10 and 11 March 2014 (dates to be confirmed).

All offers will be made by 22 March 2014, following which formal secondment arrangements can begin. Posts will commence on 1 September 2014.

Important notes:

Successful candidates should be able to express important information concisely. Your CV and personal statement will be scored based on the person specification provided.

Please note that all criteria will be judged appropriately against each candidate's career level. Evidence will be sought to support possession of the criteria outlined in the person specification through the application form, CV, interview and references.

We strongly advise all applicants currently in training programmes to inform their respective Deaneries and Trusts of a possible out-of-programme experience **on application** to this scheme to allow timely conversations regarding arrangements for secondment.

Please note that due to the competitive nature of the scheme, you should **only rank placements you are prepared to accept** as it may mean that you need to relocate. We are unable to facilitate moving between hubs.

If you become a member of the FMLM, please ensure that you do **not** unsubscribe to bulk emails. This will prevent us from sending you emails regarding the scheme.

Host organisations in 2013-2014

A list of all host organisations that have taken clinical fellows for 2013-14, is provided below. Host organisations for 2014-15 have not yet been finalised and are subject to change.

- NHS England/FMLM
- NHS England/BMJ
- NHS England
- Health Education England
- Academy of Medical Royal Colleges/ Health Education England
- Public Health England
- BUPA
- NICE
- General Medical Council
- Royal College of Physicians
- Royal College of Physicians/FMLM
- Royal College of Obstetricians & Gynaecologists
- St Andrews Healthcare
- Association of British Healthcare Industries

Finalised post details and locations will be made available to those who are shortlisted.

Sample job description

Title	Clinical Fellow to... (President of the Royal College of Physicians etc.)
Duration of post	1 year
Details of post	<p>All posts involve working directly to the lead doctor in the organisation. The post-holder's programme of work will be very varied. Some posts are for a single individual; others involve a small intelligence team. Tasks can broadly be divided into five areas:</p> <ul style="list-style-type: none"> • Research: high-level analysis of areas of specific interest to the organisation's management, liaising within and outside of the organisation, in order to identify key facts and themes • Presentations: research and preparation of material to inform speeches and presentations given by supervisor to a wide variety of audiences in the UK and, in some roles, abroad • Projects: in depth involvement with particular work streams, working in advisory and/or project manager capacity • Advice: occasional provision of advice in relation to areas relevant to the post-holder's own background and field of expertise • Regular publications: involvement in the preparation of major publications. <p>Opportunities may arise to become involved in work relating to topical areas of specific personal interest.</p> <p>Six-weekly learning set with FMLM Medical Director. Additional coaching and mentoring from other faculty members and external experts.</p> <p>Part of formal and informal network with other Clinical Fellows.</p>
Salary	On clinical scale at current grade, with 1B banding. London weighting for jobs in London.
Hours	At 1B banding level.
Contractual	By secondment from NHS Trust or university department (on existing terms and conditions).

Title	Joint clinical fellow to the Editor-in-Chief, BMJ Group and National Medical Director, NHS England
Duration of post	1 year
Description of organisation	<p>BMJ is a wholly owned subsidiary of the British Medical Association - the professional body for doctors in the UK. Established in 1840 with the publication of the first edition of the British Medical Journal, it is now an international organisation with over 450 staff based in locations around the world. In 2013, BMJ Group was rebranded as BMJ, with the flagship journal known as The BMJ.</p> <p>We bring over 160 years of experience in communicating with and educating doctors and other healthcare professionals, with a strong reputation for independence and trustworthiness.</p>
Details of post	<p>This post is split between BMJ and NHS England. The post-holder will spend 2.5 days per week at NHS England, and 2.5 at BMJ. Please see NHS England job description for further details of the NHS England post.</p> <p>BMJ has a broad portfolio of activities and the post-holder is encouraged to be involved as per their interests and skills. The post involves working directly with Dr Fiona Godlee as well as the Head of Quality (Dr Ashley McKimm), and potentially other senior members of the editorial staff and the company on projects across the company's footprint. The post-holder will be exposed to a unique mix of journalism, healthcare technology, healthcare improvement and business. The role-holder will have designated projects and areas of work to lead on. A final programme of work will be agreed with the post-holder.</p> <p>BMJ Editorial</p> <p>Previous postholders' achievements have included:</p> <ul style="list-style-type: none"> • Leading the clinical awards for BMJ Awards • Food Council: assisting the Deputy Editor in the inception of the BMJ Food Council, including editorial activities and event organisation • Research misconduct (helping organising a UK summit on research integrity that lead to a national consensus statement, writing briefings for the House of Lords, a prominent feature article in the BMJ, etc) • Opportunities to be involved in editorial activities (attending manuscript meetings, 'hanging committees' where papers which are being considered for publication are discussed in depth, planning meetings where the non-research content for the journal is decided and other insights into the workings of a leading peer-reviewed journal • Writing (extensive opportunities to write for the journal, both news reporting, attending press conferences etc but also more in-depth pieces and interviews). An example of the current fellow's article is here http://careers.bmj.com/careers/advice/view-article.html?id=20015322

	<p>BMJ Quality and Learning</p> <p>The group also has a significant presence in the evidence-based medicine market through its learning, evidence centre, clinical evidence, best practice, action sets, etc, including:</p> <ul style="list-style-type: none"> • Participating in business and marketing activities for BMJ Quality • Peer review for articles submitted to BMJ Quality Improvement Reports • Leading on a project to design, market and manage a clinical quality improvement product for GPs to introduce COPD Rescue Packs Helping shape the BMJ Group’s secondary care strategy • The BMJ Group also runs numerous national and international conferences and acts as the media partner for a number of high profile healthcare events (eg King’s Fund annual conference, Nuffield Trust Policy Summit) and the post-holder can arrange to attend as per interest. <p>The post-holder is also responsible for chairing the Strategic Advisory Board responsible for organising the highly prestigious and successful Agents for Change conference that takes place yearly with the support of the Editor-in-Chief and National Medical Director.</p>
Supervisor	Dr Fiona Godlee Editor-in-Chief, The BMJ
Salary	On clinical scale at current grade, with 1B banding. London weighting for jobs in London.
Hours	At 1B banding level.
Contractual	By secondment from NHS Trust or university department (on existing terms and conditions).

Job descriptions for each specific post will be made available to applicants shortlisted for the scheme, prior to interview.

Frequently Asked Questions (FAQ)

Eligibility

1. I am approaching or just past my CCT date – am I still eligible to apply?

The scheme is open to doctors in training who have completed both years of foundation training by 1 September 2014. Applications from all specialties are welcome. You are eligible to apply providing you have full GMC registration and do not expect to gain CCT around or before 1 September 2014. Candidates who have completed their training by 1 September 2014, regardless of the number of years of training they have undergone, are not eligible for this scheme. You must clearly state your expected CCT date on your application.

2. I am a GP with only three years training. Do the CCT eligibility criteria still apply to me?

We would encourage GPs to apply to the scheme. Those at ST1/2 and those at ST3 with an expected CCT completion date around or before 1 September 2014 are eligible to apply. Please note that if successful, an appointment to the scheme during ST1/2 would extend training at the grade they have reached and this would also apply at ST3 to ensure completion of the scheme within the training envelope.

3. I am a Foundation Year 1 doctor. Can I apply?

Unfortunately, you are not eligible to apply, as you will not have gained your Foundation competencies (certificate FACD 5.2) before 1 September 2014. We hope that you do consider applying for the scheme in future years.

4. I do not have a medical degree. Can I apply?

Unfortunately this scheme is only open to applicants with a primary medical qualification, in training and full GMC registration.

5. I am a dentist, can I apply?

This scheme is only open to applicants with a primary medical qualification, in training and full GMC registration at this time.

6. I am in public health, can I apply?

If you are in training, hold a primary medical qualification and full GMC registration then you may apply.

7. I am an SAS doctor, can I apply?

This scheme is only open to doctors in training, with a primary medical qualification and full GMC registration by 1 September 2014.

8. I am a doctor, but am currently not in a training programme. Am I eligible?

The scheme is open to all doctors on a UK recognised training scheme who have completed both years of foundation training or equivalent by 1 September 2014 across all specialties. This can include candidates currently out-of-programme, eg pursuing a higher degree.

You are eligible providing you have a primary medical qualification, full GMC registration and do not expect to get a CCT on or before 1 September 2014. We ask candidates to clearly state their GMC number and CCT date on the application.

If successful, you will be seconded from your current Trust (or the Trust that would employ you from September 2014). If this is not possible, it is your responsibility to make every effort to find an alternative arrangement and ensure negotiations with the relevant organisations. In previous years this has proved effective, so this should not deter you from applying to the scheme.

Training

9. I am currently applying for a training post that starts in August. What should I do?

You should continue with that application in parallel to this one. If you are successfully appointed as a clinical fellow, you may find yourself in the difficult position of having to give up the training post. You will then need to contact your deanery to discuss either resigning from your clinical post, or possibly deferring it under exceptional circumstances. Please be advised that if you are successfully appointed as a Clinical Fellow and you choose to give up a training post, you will have to re-apply the following year.

10. I have a clinical training post. Would I have to give this up?

This depends on your stage of training and your deanery regulations. The [Gold Guide](#) stipulates: "The start of training may only be deferred on statutory grounds (eg maternity leave, ill health)" (section 6.20) and that "time out-of-programme (OOP) will not normally be agreed until a trainee has been in a training programme for at least one year, unless at the time of appointment deferral of the start of the programme has been agreed eg for statutory reasons." (section 6.66).

Hence trainees entering the first year of core or specialty training may not be permitted to defer their clinical post by their deanery. For successful candidates, this may mean giving up your clinical training post and reapplying in the next round. Those entering higher training posts (eg ST3+) may also not be permitted to defer their clinical post by their deanery.

For other grades, depending on your training arrangements, you should arrange to come to this role as an out-of-programme experience (OOPE, or equivalent). Given that many deaneries stipulate six months' notice for OOPE placements, you are advised to start this conversation with your deanery early (ie on submitting your application form).

11. During the year, can I combine participation on the scheme with my clinical training or can I participate in the scheme on a part-time basis?

The scheme is designed as an intensive programme. However, requests for flexible, part-time or compressed hours will be considered by host organisations on a post by post basis and the

decision as to whether or not this could be accommodated will reside with them. While clinical work is not guaranteed, in exceptional cases it may be possible to negotiate to undertake the occasional clinical session with the host organisation.

12. Can I count this role towards my training?

In general, no. Most people see this as valuable out-of-programme experience, rather than contributing to clinical training. Depending on your specialty, however, it is possible that you could arrange for all or some of this post to count towards training, but this will probably require prospective Royal College and GMC approval.

13. Can international or EEA doctors apply?

The scheme is open to all doctors in training, across all specialties who have full GMC registration, are in training and eligible to work in the UK or participate in this scheme according to visa requirements. Applicants who do not have GMC registration at the point of application must ensure they obtain full GMC registration by the time of appointment (31 March 2014).

Doctors who are not UK or EEA nationals and whose immigration status entitles them to work without restriction in the UK will be considered on an equal basis with UK and EEA nationals. Other non-UK or non-EEA nationals with limited leave to remain in the UK and whose employment will require Tier 2 sponsorship are subject to the Resident Labour Market Test (RLMT). For further information on how this may affect your application please visit www.ukba.homeoffice.gov.uk.

Application

14. Can I defer entry to 2015?

We are unable to accept applications for deferred entry to the scheme. All posts will commence in September 2014. The scheme has previously been supported by many deaneries, with successful approval for Out-of-Programme Experience across several specialties and grades of training. Therefore, if you are interested in the scheme you are encouraged to apply this year and defer your current training post. Please bear in mind that if you are a Foundation Year 2 Doctor and depending on your deanery, you must be willing to give up your training post and re-apply in the next round.

15. Can I speak to any of the current Clinical Fellows in person or over the telephone?

Given the number of applicants for this scheme, we are unable to provide contact details for current Clinical Fellows. However, if shortlisted, you will have the opportunity to meet current Clinical Fellows during an information evening in London 3 March 2014 (TBC), hear about their personal experiences of their placements and the scheme and ask any questions you may have.

If directly contacted via other channels, current Clinical Fellows will not discuss any specifics or provide additional details around the selection process. Please see previous FAQs for details on eligibility.

16. Do I need reference forms?

If you are invited to attend an interview, we will require two references to be brought in a sealed envelope to your interview. Reference forms can be downloaded from the FMLM website, please note that references provided in any other form will not be accepted. These references should help to support your CV and application form. Failure to bring references to your interview may result in your application being rejected.

17. How many people apply to the scheme?

The 2013-14 scheme received around 300 applicants.

Interview

18. I am unable to attend either interview dates, is there an alternative?

Due to the nature of the selection process we are unable to offer alternative interview dates or telephone/video interview format.

19. What do the interviews entail?

Shortlisted candidates will be advised about the interview stage. The interviews will be held in London on 10 and 11 March 2014 (subject to change). We ask all candidates to keep these dates available, but please indicate in your application if there is an interview date you are unable to attend. We will not offer any further information about the format of the interview.

Host organisations

20. How will I be selected for a host organisation?

If shortlisted, you will be asked to rank the host organisations that you would be prepared to work at prior to the interview. Please note: the Fellowship is designed to provide successful candidates with generic, transferrable skills although some host organisations require candidates to have specific clinical backgrounds. If successfully appointed, there will then be a matching process based on your performance at interview and your ranking preferences.

21. How many posts outside London are planned?

The number of posts has not yet been finalised.

Employment, contracts and expenses

22. What is the salary?

You would be paid at the clinical salary point that you would be on in September 2014. These posts are banded at 1B (this is appropriate to the workload associated with the posts). Posts in London attract London weighting as usual.

23. Will I get relocation, daily commuting or travel expenses if selected for a post?

Once in post, work related travel expenses are normally reimbursed by the host organisation. Relocation and daily commuting fees are not usually covered. However, employment contracts vary so if appointed you will need to consider your contract and discuss expenses with your employer and post graduate dean.

Please note that we are unable to reimburse travel and accommodation expenses for interviews.

24. Do I need to relocate?

This will depend on your current location and where your host organisation is based. It is advised therefore that you rank placements you will be prepared to take, which may mean that you need to relocate.

For example, if you live in Norfolk and you successfully secure a place in a host organisation in Manchester, you should be willing to relocate to Manchester for the duration of the scheme.

We are unable to facilitate movement between offices of the same host organisation.

25. Will I have to move between offices in the same organisation?

Some organisations have more than one site/office; this may be both within and outside of London. You may be expected to travel between sites by your host organisation.

26. What will my terms of employment be? Will I still be contributing to my NHS pension?

You will continue to be employed by your Trust (either your current Trust or the Trust that would employ you in September). You will therefore retain your existing terms and conditions, pension arrangements, etc.

You will be seconded from your Employing Trust to the organisation that will host you as a Clinical Fellow. Your Employing Trust will continue to pay you, and will then be reimbursed by your host organisation. Reimbursement is arranged either on a quarterly or annual basis, between your Trust and your host organisation.

Additional reading material

Please see the FMLM website for more details about this year's Clinical Fellows (www.fmlm.ac.uk/professional-development/national-medical-directors-clinical-fellow-scheme). You may also be interested to read the following articles written by fellows:

My pathway to leadership

Dr Felicity Taylor

www.fmlm.ac.uk/news-policy-and-opinion/opinion/blogs/my-pathway-to-leadership

Becoming a clinical fellow...

Dr Jean Wang, Clinical Fellow, Health Education England

www.fmlm.ac.uk/news-policy-and-opinion/opinion/articles/becoming-a-clinical-fellow

Women in leadership: what's all the fuss?

Dr Felicity Taylor and Dr Sveta Alladi

www.fmlm.ac.uk/news-policy-and-opinion/opinion/blogs/women-in-leadership-whats-all-the-fuss

A personal view of what Quality Improvement is, ending with some top tips for those interested in starting a project.

Dr Marc Wittenberg

<http://blogs.bmj.com/quality/2013/10/17/quality-improvement-making-the-leap/>

Medical leadership must move from "amateur sport" to professional discipline

Dr Marc Wittenberg

<http://careers.bmj.com/careers/advice/view-article.html?id=20015322>

The Shape of training review: What's the big deal?

Dr Sonia Panchal and Dr Steven Alderson

www.fmlm.ac.uk/news-policy-and-opinion/news/articles/shape-of-training-review-a-trainees-perspective

The Keogh review: What's the big deal?

Bethan Graf, Lola Loewenthal, Esther Kwong, Nassim Parvizi, Parashar Ramanuj

www.fmlm.ac.uk/news-policy-and-opinion/policy/keogh-review-a-trainees-perspective

The Francis report: What's the big deal?

The clinical fellows 2012-2013

www.fmlm.ac.uk/news-policy-and-opinion/policy/the-francis-report-a-trainee%E2%80%99s-perspective

The Welsh Clinical Leadership Fellows Programme

www.fmlm.ac.uk/news-policy-and-opinion/opinion/articles/the-welsh-clinical-leadership-fellows-programme

Transitions: Foundation Doctor

Dr Sveta Alladi, Dr Sonia Panchal and Dr Kayur Patel

www.fmlm.ac.uk/professional-development/transitions/foundation-doctor

We must put hospitals at the centre of our communities

Dr Naeem Ahmed

www.fmlm.ac.uk/news-policy-and-opinion/opinion/blogs/we-must-put-hospitals-at-the-centre-of-our-communities

And now for something completely different?

Claire Lemer, Felix Greaves, Helen Woodward & Douglas Noble

www.careers.bmj.com/careers/advice/view-article.html?id=2893

An ex-clinical adviser to the chief medical officer

Lucy Butler

<http://careers.bmj.com/careers/advice/view-article.html?id=3173>

Urgent and Emergency care review – what’s the big deal?

Dr Rachael Brock and Dr Jean Wang

www.fmlm.ac.uk/news-policy-and-opinion/policy/urgent-emergency-care-review-whats-the-big-deal

Mobasher Butt

Clinical Advisor to the Regional Director of Public Health, NHS London 2008-2009

The leap out of clinical medicine into a heady concoction of policy, politics, leadership and management has been exciting and challenging. By virtue of the fact that you are reading this I am hoping you have already started to feel the first sparks of excitement!

As the inaugural clinical advisor at NHS London there was the inevitable anxiety on my part as to what it was I would actually be doing on a day to day basis. However NHS London took this in their stride and set up two interviews prior to my job commencing to tailor the projects I am currently leading to account for my existing skills, knowledge and experience.

Coming to the post from surgical training lead to my main areas of current work being very much 'cutting edge!' Two of my key work streams have been implementing the WHO Safe Surgery Checklist in the UK and establishing data sharing between Emergency Departments and their local Crime and Disorder Reduction Partnerships to help tackle knife crime in London.

Both of these pieces of work have involved working with a diverse range of professionals. The WHO Safe Surgery work has involved collaborating with the Harvard School of Public Health, the National Patient Safety Agency and local surgical teams and their respective NHS trusts. The data sharing work has had an equally broad focus on partnership working and I work in a team with representation from the Home Office, the Metropolitan Police, the regional department of Public Health and the Government Office for London.

To give you a flavour of my daily work I have taken some highlights from a ten day period of my diary:

- attending a Summit on Serious Youth Violence
- chairing a meeting of A&E and Public Health consultants at King's College Hospital with Metropolitan Police and Home Office colleagues
- meeting the Head of Ethics and Standards at the GMC to discuss sharing of patient data
- participating in a weekly international teleconference with colleagues from Boston and Geneva to organise the European launch of the WHO Safe Surgery checklist
- presenting at a Great Ormond Street Anaesthetic Dept breakfast meeting
- attending the National NHS Medical Directors' Conference
- learning set with Sir Liam Donaldson.

Hopefully this captures a little of the enormous variety of opportunities that this post offers on a daily basis as well as reassuring you that it most certainly does not involve being chained to a desk in an office. Although I must add the novelty of actually having my own desk has not quite worn off just yet!

Thinking back to what inspired me to take up this post when I was at the stage you are at now, brings to mind a quote from an e-mail I received from an existing Clinical Advisor who has been a pioneer of this scheme:

"The aim is to start to forge a new cadre of clinical leaders capable of translating the clinical world into policy" (Claire Lemer - 2008)

I hope this inspires, excites and motivates you as it still does me.