

# Trainees' NEWS UPDATE

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## APM Trainees' News

Dear Trainees,

Welcome to the latest edition of the APM trainees' news update. As ever, there is information regarding a variety of events (APM and non-APM) that may be of interest, so please do have a look through. Also included is an article from our former Chair, Rebecca Lennon, on her Leadership and Management Fellowship Experience. Management skills are vital as we progress through our training and look to be the future leaders of our speciality therefore it is always useful to hear about the ways in which other trainees have acquired these. I hope it will be an informative read. If anyone feels that they would be able to contribute an article to the newsletter about a training experience that you think might be useful to share please do get in touch – it would be great to hear from you.

Included at the end of the newsletter is a flyer from the UK Palliative Trainees Research Collaborative, something that we have highlighted previously. This is a really great initiative as we look to both strengthen the research base of the speciality and broaden access for trainees to high quality research. Please do drop them an email if you would like to get involved or want more information.

Finally, I would like to wish every success to all those sitting the SCE next month – all the best!

Best wishes, Anthony Williams Chair, APM Trainees' Committee

# **Upcoming Events**

# The Future Direction of Palliative Care – Implications for SAS Doctors and Trainees

An APM Event, organised by the SAS and Trainees Committee
North West Cancer Research Centre, University of Liverpool
Date: 8th January 2019

https://docs.google.com/forms/d/e/

## Ethics Study Days An APM Event, org

An APM Event, organised by the Ethics Committee Severn Hospice, Telford Dates: 21st\_22nd January 2019

https://docs.google.com/forms/d/e/



## Research Methodology Workshop

An APM Event, organised by the Science Committee Saint Michael's Hospice, Harrogate

Dates: 20<sup>th</sup> March 2019

https://docs.google.com/forms/d/e/



## The APM's Supportive & Palliative Care Conference

Harrogate Convention Centre Dates: 21<sup>st</sup> – 22<sup>nd</sup> March 2019 Registration opens soon



## Oxford Advanced Courses in Pain and Symptom Management

4 July 2019 Oxford



Map curriculum competencies.docx



OAdC 2018.docx

Palliative care in the hard to reach groups - bridging the gap  $30^{\rm th}$  November 2018, RCP London

This 1-day conference run by the RCP will showcase up-to-date evidence and research findings in palliative medicine for harder to reach population groups with a unique and dynamic programme presented by clinical experts. The programme covers the key practical and ethical issues needed to assist clinicians with decision making and good symptom control.

For more information and to register, please click here

# Meet the Trainees' Committee



Dr Hannah Rose Thompson

Junior's Committee Representative I'm Hannah. I joined the APM juniors committee earlier this year as a core medical trainee in Salisbury. Since then I've become a palliative medicine registrar working in Bournemouth. Before that I've worked through Wessex including some of the local hospices and also worked in New Zealand for a year. I'm hoping my recent transition from junior to trainee will put me in a great position to liaise between the two committees and am really excited about the being involved in the future of palliative medicine in the APM.

# **Knowledge Hub**

The APM Professional Standard's Committee has produced some useful summaries signposting guidelines on various common symptoms in palliative care: <a href="http://apmonline.org/committees/professional-standards-committee/">http://apmonline.org/committees/professional-standards-committee/</a>

**e-ELCA** is a national e-learning programme and includes some interesting modules with specialist content including:

- ·Intrathecal drug delivery
- •Heart Failure in end-of-life care
- Discussing intimacy in advanced illness
- •Dying as a homeless person
- Tracheostomy care

Sessions within the program are currently being mapped to the palliative medicine specialty training curriculum. <a href="http://www.e-lfh.org.uk/programmes/end-of-life-care/">http://www.e-lfh.org.uk/programmes/end-of-life-care/</a>

There are some also valuable resources available to help support the care of patients with learning difficulties: <a href="https://www.mariecurie.org.uk/help/support/publications/easy-read-booklets">https://www.pcpld.org/links-and-resources/</a>

The **RCP Quality Improvement Hub** has been set up to support anyone embarking on quality improvement work. Resources to support quality improvement work can be found at: <a href="https://www.rcplondon.ac.uk/projects/rcp-quality-improvement-rcpg">https://www.rcplondon.ac.uk/projects/rcp-quality-improvement-rcpg</a>

If there is anything else that you have found useful in preparing for the SCE, or for CPD in general, then please do contact us and we will endeavour to add this to the next News Update.



## Post of the Month

Leadership and Management Fellowship Experience – Dr Rebecca Lennon ST6 Palliative Medicine

When I started my Palliative Medicine training, I heard some senior trainees talking about their anxieties heading towards CCT date, which centered around their perceived lack of leadership and management skills. I felt determined I would not feel the same way, so I began looking for opportunities to improve my leadership and management skills.

My TPD signposted me to a fellowship that my LETB was running, so I applied. They only accepted 8 candidates a year, but I got through the interview and started alongside 7 other trainees from varying specialties; surgery, anaesthetics, GP and medicine. The fellowship including doing supported quality improvement projects, study days by The King's Fund and a Masters degree through completing the NHS Leadership Academy's Elizabeth Garrett-Anderson programme. I was the only doctor in my tutor group for the Elizabeth Garrett-Anderson programme, the rest included nurses, commissioners, IT, finance and other non-clinical roles.

Theoretical learning was the basis of the fellowship, but most of my learning came from understanding myself, my leadership style, the structure of the NHS and the roles of others. The discussions/debates we had about the NHS, led to a deeper understanding of these issues through hearing multiple different perspectives. Through the Kings fund days, I met various NHS and non-NHS leaders and heard from their experiences. One of the most interesting experiences I had was visiting a local social enterprise company. They conduct projects using an asset-based approach and we reflected on how helping people to solve their own problems impacts of healthcare resources. Over the 2 years of studying, I felt frustrated compared to my non-medical colleagues when conducting projects, so focused my dissertation on understanding the enablers and barriers to junior doctors doing quality improvement projects. I am currently waiting for this paper to be published.

I was able to reduce my clinical time to 60% and complete the fellowship in the remaining 40%. Even with this time, the fellowship was demanding, however, I knew that I was gaining skills that would pay dividends in the future. I was able to easily complete the leadership and management Palliative Medicine curriculum competencies, as well as the research competencies through completing my dissertation. It also gave me the confidence that I could be Chair of the Trainees Committee, so when this opportunity arose, I put myself forward. This role helped me put into practice the skills I was learning. I would highly recommend that any trainee search for similar opportunities. It is often perceived as more work, but in reality, these skills are generic and you will probably save time proving competencies elsewhere. I believe the projects I did during this time also helped during my consultant interview and the panel commented that they were impressed with what I'd done during my training. This certainly seemed to make up for the part of my interview I didn't perform so well in! When I start my consultant role, I now have no anxieties about taking up the leadership and management aspects of the job. In fact, it is the part I am most looking forward to, as I know I have the skills to make a difference. All I have to do is remember what I have learnt to be the most effective leader I can be.

# Research/Journals

#### TRAINEES RESEEARCH COLLABORATIVE

Dear Palliative Medicine Registrars.

We're setting up an exciting new national collaborative for palliative medicine trainees to conduct high quality research, and we'd like you to be part of it.

This is an opportunity to get involved in innovative research projects and national audits, and in doing so help to meet curriculum requirements for research and audit. You can contribute at any level, from collecting small amounts of data locally, to co-ordinating data collection within your region, to conceiving and directing national research projects. All contributions, however small, are important and will be acknowledged.

We're looking for trainees in every region of the UK to get involved, so please email us on palliativetraineecollaborative@gmail.com if you're interested and we'll add you to the circulation list. Tell us who you are, any burning research questions you'd like to see investigated, and how you'd like to help. If you have a nagging clinical question-now is the time to spell it out on a piece of A4 and perhaps your question can be answered at a national level! Please read the fact sheet attached to this email for more information about the collaborative, and more reasons why you should get involved.

Warmest wishes, and we look forward to hearing from you,

Charlotte Chamberlain, Anna Sutherland, Simon Etkind & Jonathan Koffman
On behalf of the UK Palliative Trainees Research Collaborative



#### RESOURCES FOR TRAINEES WANTING TO CARRY OUT RESEARCH

Knowing how to get into research can be daunting for trainees, and with this in mind the Science Committee has produced a resource to help trainees consider the research element of the curriculum, highlight some useful resources and outline how you might approach carrying out a research project. This resource can be found under the Science Committee section of the APM website or via the link below. <a href="https://apmonline.org/wp-content/uploads/2015/04/Resources-for-Trainees-Wanting-to-Carry-Out-Research.pdf">https://apmonline.org/wp-content/uploads/2015/04/Resources-for-Trainees-Wanting-to-Carry-Out-Research.pdf</a>

### Accessing journals through the APM

There are incredibly low levels of access to journals via the APM website, therefore, the APM are always reviewing their access to journals and whether it represents value for your membership fee. A many number of publications are available through the BMA website, as long as you have membership. A list of these can be found at <a href="https://www.bma.org.uk/library/e-resources/e-journals">https://www.bma.org.uk/library/e-resources/e-journals</a>.

## RESEARCH OPPORTUNITY - Administering injectable medication to patients in their own homes

This is an exciting opportunity to get involved in a research project looking at barriers/facilitators to untrained family carers administering injectable medication to patients in their own homes. In the first instance, the research team are looking for a trainee to help with planning and undertaking a literature review to help define an appropriate and original research question. Following this there will be opportunities to get involved in the next stages of the project, which is likely to be a qualitative study conducted through a series of interviews/focus groups of both carers and health care professionals to identify barriers and facilitators. If interested, or for further information, please contact Dr Katie Taylor at: katie.taylor@hospiceintheweald.org.uk

#### **JOURNALS**

The following journals can still be accessed via the APM website; Palliative Medicine, BMJ Supportive and Palliative Care and the European Journal of Palliative Care (at a reduced subscription rate). These journals can be accessed by going to the member's area of the website <a href="http://apmonline.org/login/?redirect\_to=http%3A%2F%2Fapmonline.org%2Fmembers-area%2F">http://apmonline.org/login/?redirect\_to=http%3A%2F%2Fapmonline.org%2Fmembers-area%2F</a>, logging in, then scrolling down to 'membership benefits' and clicking on the 'journals' tab. An example of what should then appear on the page is given below. If you click 'online access' this will take you through to the journal's website.

## ARTICLE OF THE MONTH

The engagement of young people in their own advance care planning process: A systematic narrative synthesis

A systematic narrative synthesis from the University of Lancaster exploring advanced care planning (ACP) in young adults. The authors highlight the fundamental need to understand barriers and facilitators to young people's engagement with ACP in order to assist in the fulfilment of their wishes and inform future practice. Although some barriers, including poor communication, relationship conflicts and lack of training for healthcare professionals were recognised, a lack of rigorous, high-quality research limited conclusions and the authors call for future studies to facilitate ACP engagement in young people in the future.

Hughes, B. O'Brien, M. Flynn, A. Knighting, K. Palliat Med. 2018 Jul;32(7):1147-1166.

## International palliative care research in the context of global development: a systematic mapping review

Palliative care has global support from the World Health Organisation but has failed to attract attention from funding agencies and policymakers. The authors of this review argue that an international approach to palliative research is required to put palliative care on the global map. They performed a systematic mapping review of international studies to inform future planning.

They concluded that international palliative care research is in its infancy but is developing. They identified gaps in the evidence, highlighting that observational studies predominate and a paucity of interventional research demonstrating the cost-effectiveness of palliative interventions, this therefore limits engagement with international policymakers.

Clark, J. Gardiner, C. Barnes, A. BMJ Supportive & Palliative Care 2018;8:7-18.

# Contact the APM Trainees' Committee

We always want to hear your feedback, so please do get in touch:

- Via your regional APM Trainees' Representative.
   For full list of regional Representatives go to <a href="http://apmonline.org/committees/trainees-committee/">http://apmonline.org/committees/trainees-committee/</a>
- Email us directly via apmtraineescommittee@gmail.com
- On our Facebook page 'APM Trainees'
- On Twitter @apm\_trainees









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