



A WORD FROM DR MARIANNE COBHAM

APMJ Careers and Mentorship Coordinator

Welcome to this month's juniors' newsletter. I hope everyone has settled well into their new roles, though it's now approaching changeover time for our FY1/ FY2 colleagues!

In this month's newsletter we are highlighting some surveys, as we'd appreciate some feedback and suggestions on what our members want from the APM junior organisation. We're also hoping to get some insight from medical students to help us guide further teaching sessions and resources.

We have Dr Emily Holdsworth describing her experiences in palliative medicine and internal medicine as a registrar on the new curriculum. This will hopefully ease some anxieties around becoming the medical registrar, and highlights the benefits of having trainees who are dual accredited.

Our Junior conference 'Universal Palliative Care, Compassion for Everyone, Everywhere' is on Sunday 17th November, it's not too late to register [here](#) if you haven't done so already. We'd love to hear your thoughts on the conference afterwards too!



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APM Juniors Survey

Please fill in our survey to help us better understand what our members want from an APM junior membership. The survey will take no more than five minutes to complete and can be found [here](#). Thank you!

APM Medical Students Survey

Please fill in this survey to help guide our future events and resources for medical students. The survey will take no more than five minutes to complete and can be found [here](#). Thank you!

Palliative Care Research Society (PCRS) + European Association of Palliative Care (EAPC) Undergraduate Award

Undergraduates are encouraged to apply now for the PCRS EAPC Undergraduate Award.

All abstracts are welcomed and further guidance on submission can be found [here](#).

The winner of the PCRS EAPC undergraduate prize will receive:

EAPC Conference registration & travel expenses (up to £500) - The conference will take place in Helsinki, Finland in May 2025.

One year's free membership to the PCRS

More information can be found [here](#).



The Terminally Ill Adults (End of Life) Bill - Message from Dr Sarah Cox, APM President

Kim Leadbeater MP has presented a Private Members Bill to the UK Parliament to propose a change in the law on assisted dying. This isn't available to be publicly read and is due for parliamentary debate and vote on the 29th of November.

Any APM member wishing to contact their MP to discuss this can find a draft letter [here](#).

Other resources of interest include The House of Commons Health and Social Care Committee Assisted Dying/Assisted Suicide Second Report of Session 2023-24 Report, 20 February 2024 available [here](#) and The Policy Institute (Kings) Complex Life and Death Decisions Group publication on assisted dying: Principles, practice and politics available [here](#). Chris Whitty has written some advice to doctors in terms of speaking about their concerns on assisted dying available [here](#). Information about the process of Private Members bills through Parliament can be found [here](#).

Submissions for the 2024 Undergraduate Essay Prize are now open!

Entries for this year are invited to answer the following question 'Palliative care can be called the "heaven for the few": how can we improve access to good palliative care?'

If you are interested in submitting a piece of work and to be in with a chance of winning the top prize of £250, please visit the links below for more information.

[Undergraduate Essay Prize 2024 Rules](#)

[Undergraduate Essay Prize 2024 Entry Form](#)

The deadline for submissions is the 29th November 2024.

Good Luck!



CAREERS IN PALLIATIVE MEDICINE - SPECIALIST REGISTRAR

Dr Emily Holdsworth is an ST6 in palliative and internal medicine in Yorkshire. doctor at Rowan's Hospice. She discusses her route into palliative medicine and her experiences of being on the new curriculum and dual training in palliative medicine and internal medicine. Emily can be contacted at emily.holdsworth@nhs.net



I started Palliative Medicine specialty training in February 2022 excited to leave general medicine behind. I had spent 12 months as a specialty doctor in geriatrics but fallen out of love with the specialty as I wanted to spend more time with patients and families really understanding what matters to them. I moved to work as a specialty doctor in a local hospice as my first ever experience of palliative care, and knew within weeks that I had found my specialty. I was surrounded by others who shared my passion for holistic care, and I won't lie, the frequent pet visitors were also a major plus point!

Before commencing palliative medicine training it became clear that I would not escape the new dual training curriculum in both palliative and internal medicine. As I had done core medical training rather than internal medicine, my first job was in intensive care. Although this wasn't the hospice job I expected, I soon appreciated how much value palliative care trainees can bring to intensive care. Not only do we have skills in symptom management, which led to an audit and guideline for use of anti-emetics in ICU, we are specialists in communication skills and holistic care which are essential for patients and families experiencing an ICU stay. I was able to support with challenging conversations such as withdrawal of treatment, and the team were very welcoming of palliative care input - though at times they did laugh at my 15-point ward round plans! I avoided most procedural skills as I couldn't see too many central lines in my future..

Implementation of internal medicine training in Yorkshire, and across the country, has been a rocky process which now seems to be reaching some stability. We are required to have 12 months of internal medicine training experience throughout the four years of higher specialty training. This looks different depending on your deanery, and still remains subject to change as more trainees progress through the training programme and provide feedback. In Yorkshire, we cover the 12 months using 6 months internal medicine (IM)/geriatrics with full medical registrar on call in ST5, 3 months in oncology in ST6 and 1-3 months IM in ST7 plus 'maintaining capability' weeks regularly spaced throughout palliative medicine placements.



CAREERS IN PALLIATIVE MEDICINE - SPECIALIST REGISTRAR

I felt worried about returning to medical registrar on calls, and appreciate many of you may feel the same. It is important to remember that we as palliative medicine trainees have a lot to bring to this role, and that this internal medicine period will be well supported. The longer I spend in medical training the more I feel confident to ask for help from others around me. Given that we spend most of our training in palliative medicine settings, it is expected that we may not be as confident as other medical registrars and that we will need to ask more questions. I can honestly say that I enjoyed my internal medicine placements as much as I enjoy my palliative medicine time. My biggest tip is to have helpful apps downloaded to your phone. There is great value in having the Resus app available to read on your way to an arrest call, and in having NICE and local microbiology guidelines to hand - there is always time to look something up before making a decision.

I have reflected throughout my training on the huge benefit that dual training has had both for my personal development but also for provision of holistic palliative care. As the landscape of palliative medicine changes, and we are seeing an ageing and increasingly co-morbid and complex population, it is essential that we have palliative medicine consultants who are confident managing medical problems and are able to work across multiple settings. My current role is with the Marie Curie REACT service in Bradford, where I work 50% in A&E reviewing patients with life-limiting conditions and 50% in community seeing patients at home and in 24-hour care settings. The aim of the service is to reduce the time spent in hospital for patients in the last year of life and avoid hospital admissions by having responsive and flexible palliative care provision. I have the opportunity to work alongside emergency medicine teams and community colleagues to provide continuity of care and take pressure off a busy A&E department. I know that I am more confident in this dynamic role as a result of my dual training.



CAREERS IN PALLIATIVE MEDICINE - SPECIALIST REGISTRAR

Although I have had a lot of positive experiences, and I am a great advocate for dual training, having a dual e-portfolio is a challenge! Meeting the requirements for both palliative and internal medicine curricula can be frustrating at times, but as supervisors and trainees become increasingly familiar with the dual portfolio this is becoming much more manageable. The palliative medicine training programme is incredibly supportive, and this has continued with the introduction of dual training. There are written resources and experienced existing trainees to help you along the way.

If you are considering a career in Palliative Medicine but are worried about having to dual train in Internal Medicine, please do not let this deter you from applying. Having palliative medicine trainees in medical specialties brings a wealth of experience, knowledge and skills and allows us to learn and keep up to date with medical developments which we can bring to our palliative care teams and is particularly helpful when actively treating deteriorating patients in our own specialty. Dual training is allowing us to be confident and well-prepared future consultants in Palliative Medicine to meet the needs of our population. To anyone who has questions I am more than happy to be contacted. If you have a region-specific question, I will be able to put you in touch a more suitable trainee.



Association for
Palliative Medicine
Of Great Britain and Ireland

November
2024

APM Juniors Newsletter

UPCOMING EVENTS

17th November 2024

APM Juniors Conference 2024 - Universal Palliative Care: Compassion for everyone, everywhere

<https://apmonline.org/events/apm-juniors-conference-2024-universal-palliative-care/>

22nd January 2025

RCPE: Online Symposium: Palliative Medicine

<https://events.rcpe.ac.uk/rcpe-online-symposium-palliative-medicine>

This event is not free

20th-21st March 2025

Palliative Care Congress

<https://pccongress.org.uk/registration/>



USEFUL RESOURCES

APM/ PCRS Research directory

<https://apmeducationhub.org/wp-content/uploads/2023/06/Palliative-Care-Network-April-2023.pdf>

Palliative Medicine Curriculum

<https://www.jrcptb.org.uk/sites/default/files/Palliative%20Medicine%202022%20curriculum%20FINAL.pdf>

e-ELCA

https://portal.e-lfh.org.uk/myElearning/Index?HierarchyId=0_29&programmId=29

PREVIOUS WEBINARS TO WATCH

Palliative Care for FY1 Doctors

Vimeo Link <https://vimeo.com/apmeducationhub/pallcarefy1?share=copy>
Password ZHU5OOyabHZcdGnz

Palliative Care for FY1 Doctors

Vimeo Link <https://vimeo.com/apmeducationhub/pallcarefy1?share=copy>
Password ZHU5OOyabHZcdGnz