What I wish I knew when applying for consultant jobs...

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Approaching CCT

Don’t let fear be the deciding factor

Forever job
Critical appraisal

• Like analysing a paper

• Make your own discreet enquiries
“Will I be happy?”

- Nice people?
- Shared ideals about acute medicine?
- Innovating and growing?
- Commute?
- What PAs are they offering?
PA = 4 hours

→

10 pa/week

DCC x 8

SPA x 2

8:2
“What is my dream job?”

• What you do with your 2 pa/week?
• What is your special skill?
• Get creative!
• Could they make a job for you?
Red flags

• Someone is already doing your dream role

• Too much to do, too much needs changing

• Bad vibes
Online Application

• Standard information plus 1000 word personal statement
• Sell yourself
• Cover
  • Clinical experience
  • Leadership
  • Teaching
  • QI/research
  • 1-2 facts about the department
Preparing for interview

Like nothing you have been through
Face Time

• You meet a lot of people
• Emails/phone calls are not sufficient
• You need to SEE the department
Meeting people

Your interview has begun!!

- MUST meet
  - Clinical lead
  - Divisional Clinical Director (DCD)
  - Divisional manager
  - Medical director
  - Matron

- Recommended
  - General manager
  - Sister
  - Chief executive
Meeting people

• Questions
  • What are the greatest challenges in the dept?
  • What do you think the department needs?
  • What does the department do well?

• Show them your personality and values
Preparing for interview

• Need to be an expert
  • Easier if you work/worked there
  • If never worked there need to befriend those who do

• Go to senior level meetings
Need to know

• Latest Quality/Safety data

• Risk register

• Latest CQC findings

• F&F/patient feedback (find Quality/Safety manager)
Being a consultant
Workload

- Med SpR
- Consultant prep
- First month consultant
- 3 months in
First couple of months....
So much SPA time!

- Within 1 month of being consultant I was
  - Post grad lead for education
  - QI/Audit lead
  - Rota co-ordinator
  - ES for 6 trainees

- Do not do this
Welcome to the Ambulatory Emergency Care Unit (AECU) - the emergency clinic

What is ambulatory care?
We are an emergency clinic for patients with urgent health problems. Our patients are referred to us by either

- Local GPs who recognise that their patient needs emergency hospital assessment and treatment
- Our A&E department who identify patients who require urgent assessment, but do not require oxygen, intravenous medicine, or intensive cardiac monitoring.

AECU helps patients by diagnosing and treating them quickly, then sending them home, just like A&E. Being admitted to hospital is stressful and frightening, and we aim to avoid admission whenever we can. AECU helps the hospital by allowing A&E to focus on life-threatening accidents and medical emergencies. This also helps reduce A&E waiting times.

How is AECU different to A&E?
Whilst most people attending A&E have urgent health problems, many do not require intensive resuscitation and treatment, and are able to come to AECU for assessment (‘ambulatory’ means that you are able to move around freely, rather than be restricted to a hospital bed).

How is AECU different to the GP?
Many people with urgent health problems require tests and treatments only available in a hospital. For example, we can get results of blood tests, X-rays, ECGs, CT scans and many other tests within minutes to hours. We can give intravenous treatments and

What happens in AECU?
After registering with the reception staff, you will see the nurse, who will take your vital signs, perform blood tests and an ECG. Some people also need an X-ray. Then you see the doctor or the nurse consultant, who will go through your symptoms with you and review any test results. Occasionally, they will request some more tests, like a CT scan.

What happens next?
We are able to send most patients home with a diagnosis and a treatment plan. A small number of patients need to return to AECU for a follow up review, and very sick patients may need admitting to hospital. If we are not able to obtain medical test results for you in your appointment, we will telephone you at home in the next few days to tell you, and talk through what to do next.

Can anyone come to AECU?
AECU is not a walk-in clinic – you need to be referred to us by your GP or A&E. This is because most health problems can be treated very well in the GP surgery, whereas more dangerous emergencies must be treated in A&E. We need to make sure that AECU is the most appropriate and safe place for a patient to be.

Who works in AECU?

Why am I waiting?
We try to keep waiting times to a minimum, but we do have to wait for test results such as blood results to become available. We apologise for this, and understand this can be frustrating. Please help yourself to free tea and coffee (our receptionist can show you where). If you want to go out of the hospital for an hour you are very welcome – just make sure you come back within the hour and leave your mobile number with reception in case we need to contact you.
Parting shots

Forever job

Will you be happy?

Meet everyone

Know the department

IT’S WORTH IT