

SAS DEVELOPMENT PROGRAMME CASE STUDY CLAIRE GILROY

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I work less than full time (30 hours/week) and my job plan is split into three main roles;

- work clinically in the Emergency Department assessing and treating patients who present acutely to the Hospital.
- I am programme manager to the Medical Directors Office and have been working on a variety of projects across NHS Ayrshire and Arran. The main project I am concentrating on at the moment is our doctor to doctor recruitment drive.
- Joint Clinical Lead for Realistic Medicine I am also Joint Clinical Lead for Realistic Medicine. My main role is to support local projects which fall under the Realistic Medicine agenda and share them at a national level

I left my ACCS EM training post in 2013 to undertake a master's degree whilst I decided what to do next. I was not sure whether Emergency Medicine was the right career choice for me. I decided to take up a Specialty Doctor post within the Clinical Decision Unit at University Hospital Crosshouse which at the time was run by the Emergency Department. This was a good choice for me as I was still able to do shifts within the Emergency Department whilst exploring whether ambulatory medicine was a good career option for me. The post involved developing patient care pathways and I quickly realised that I did not have all the skills required to do this part of the post. I lacked knowledge of improvement science and had very little understanding of service re-design.

Using the SAS Development fund, I opted to do a postgraduate certificate in Advancing Healthcare Practice with the Open University which allowed me to explore what healthcare improvement means and how it can be achieved. Through the course itself I learned about the theory of improvement science and change agency skills. I also developed leadership skills in relation to service improvement, innovation and policy implementation. In addition, my department were very supportive and allowed me put some of the theories into practice within the CDU e.g. implementing new pathways. I was also given access to one of our General Managers who taught me about the structure of our board and gave me his insights into some of the factors that influence service re-design. One of the Senior Medical Management Team was also generous with his time and challenged me on some of the theories.

Receiving SAS funding has definitely impacted on my clinical practice. I helped implement a further seven Clinical Care Pathways and helped re-design the DVT service so that patients bypassed the Emergency Department and were seen directly by the DVT service. My patients have benefitted from having clearly defined care pathways which gives access to early review by a senior decision maker and quick access to diagnostic tests.

In terms of future career aspirations, I am currently undertaking an MBA with the Open University - I hope that whatever I choose to do in the future it will involve improving services for the NHS.

I would absolutely recommend using the NES SAS Development Fund to SAS Colleagues. We are lucky to have access to this fund - it can be used to help you with CESR or to explore different areas of interest that you are looking to develop.