



Specialist Doctor appointments in Emergency Medicine March 2022

In September 2018 Royal College of Emergency Medicine produced a position statement regarding the reinstatement of the Associate Specialist grade or equivalent¹.

Following negotiations with the NHS Employers and the BMA the Specialist grade was introduced in April 2021 in England, Northern Ireland and Wales. The new grade is designed to provide a senior level for SAS doctors i.e. a step up from the Specialty Doctor grade.

The aim of introducing the new grade is to give SAS doctors the opportunity to have progression in their careers with recognition and reward for their additional experience and contribution to their work. This should also lead to increased recruitment and retention of these valuable doctors.

As this is a newly introduced grade, doctors and employers may not be familiar with the role and requirements of the grade in the specialty. The Royal College of Physicians² and Royal College of Anaesthetists³ have produced guidance and generic person specific specifications.

Much of the content of these documents is applicable to Emergency Medicine but there is a need for some specialty specific advice. The aim of this document is to provide some guidance regarding job descriptions for the Specialist doctor role. The specialist grade introduced in April 2021 requires employers to use the generic capabilities framework and template person specification, (see below) which they will develop based on the requirements of the service.

A doctor in this grade shall have:

- Full registration with the General Medical Council.
- Completed a minimum of 12 years medical work (either continuous period or in aggregate) since obtaining a primary medical qualification, of which a minimum of 6 years should have been in a relevant specialty.
- Meets the criteria set out in the generic capabilities' framework for the specialist grade which has been developed by AoMRC, BMA and NHS Employers^{4,5}.

The Royal College of Emergency Medicine works to ensure high quality care for patients by setting and monitoring standards of care in emergency departments, as well as providing expert guidance on policy to relevant bodies on matters relating to Emergency Medicine.

The aims of RCEM

- Promotion of patient safety.
- Advocate for professional and educational standards.
- Provide expert guidance on policy to relevant bodies on matters relating to Emergency Medicine.

While the College promotes the above and sets recognised standards in its membership and fellowship examinations, it does recognise that doctors who may not have obtained evidence





of achieving these standards by obtaining the above-mentioned examinations may still have the appropriate skills and knowledge.

The requirement to demonstrate the skills, knowledge and qualities required to work at a senior level in Emergency Medicine highlights the need for all Speciality doctors to be supported in recording their professional development throughout their careers. This includes annual appraisal and regular educational supervisor meetings. Support as is best practice advocated in the BMA SAS Charter and Maximising the Potential: essential measures to support SAS doctors^{6,7}.

There are several ways that evidence can be supplied, to protect the individual and the organisation when employing doctors at a senior level who are not on the Specialist Register.

Examples of this include:

- 1. WPBA's and population of the RCEM e-portfolio in a similar manner to ACP credentialling.
- 2. Supporting assessments and testimony from seniors/supervisors within the SAS Doctors department.

The role of the Royal College of Emergency Medicine in this process is limited to giving advice on the person specification and providing a representative for interview.

Regional advisers play an important role in reviewing job descriptions against national standards and criteria; to consider whether the post represents a satisfactory specialist doctor post within the local circumstances of the trust and in line with relevant terms and conditions of service.

References

- 1. https://rcem.ac.uk/wp-content/uploads/2021/11/RCEM_Position_Statement_on_the_AS_Grade.pdf
- 2. https://www.rcplondon.ac.uk/file/29046/download
- 3. https://www.rcoa.ac.uk/sites/default/files/documents/2021-08/PS%20for%20specialist%20posts.pdf
- 4. https://www.nhsemployers.org/articles/terms-and-conditions-and-resources-sas-contract-reform-2021
- 5. https://www.nhsemployers.org/sites/default/files/2021-06/SAS-Reform-Concordat-For-New-SpecialistGrade.pdf
- 6. https://www.bma.org.uk/advice-and-support/career-progression/sas-development/the-sas-charter
- 7. https://www.hee.nhs.uk/sites/default/files/documents/SAS Report Web.pdf





Appendix I - Generic Person Specification for Specialist Doctor in Emergency Medicine

	Essential	Desirable
Professional	Full registration and a Licence to Practice with	Post-graduate professional
values and	the General Medical Council	qualification
behaviours,	Minimum of 12 years medical experience since	Previous experience working in
skills and	primary medical qualification	the NHS.
knowledge	Minimum of 6 years as SAS grade or	
ogo	equivalent in emergency medicine and relevant	
	acute specialties (a minimum of 4 years in EM)	
	Adheres to professional requirements of annual	
	appraisal, job planning and reviews of	
	performance and progression	
	Demonstrates the professional values and	
	behaviours set out in Good Medical Practice	
	Demonstrated ability to manage patients with	
	complex needs whilst remaining aware of their	
	own limitations	
	Provides safe and effective care for critically ill	
	patients for all ages with specialist help and	
	guidance	
	Ability to lead resuscitation teams and safely	
	transfer critically ill patients	
	Communicates effectively with patients,	
	relatives and carers, placing them at the centre	
	of the care pathway	
Leadership	Ability to lead diverse teams	Undertaken training in
and	Understands own leadership style and its	management and / or
teamworking	impact on others	teamworking.
_	Demonstrated ability to develop effective	<u> </u>
	relationships across teams, contributing to their	
	successful working	
	Demonstrates ability to challenge others,	
	escalating concerns when necessary	
	Critically reflects on decision-making explaining	
	them effectively to others	
Patient safety	Takes prompt action to ensure a high standard	Participates in regional or
and quality	of safety and quality of patient care	national quality improvement
improvement	Ability to collaborate with hospital teams to	projects
	manage risk	Implements evidence-based
	Understanding of clinical governance systems	change to improve patient care
	Active and consistent engagement with local	Undertaken training in quality
	quality improvement projects	improvement methodology
Safeguarding	Evaluates and instigates initial management of	
=	safeguarding concerns	B
Education and	Critically assesses learning requirements for	Plans and provides effective
training	self and others	teaching and training activities
	Evaluates, reflects and acts on the	Meets the requirements of a
	effectiveness of education and learning -	clinical/educational supervisor,
	Creates effective learning opportunities for	as defined by the GMC
	medical and paramedical colleagues	Formal educational qualification
		Life support instructor.





Research and	Keeps up-to-date with current research and	Undertakes significant
scholarship	best practice	involvement in clinical research
	Locates and uses clinical guidelines	Presentations at regional and
	appropriately	national meetings
	Supports any research activities being	Publications in peer reviewed
	undertaken within the Trust as required	journal
		Undertaken training in research
		methodology

Appendix II - FAQ

FAQs for senior Emergency Medicine doctors and for Clinical Leads:

How are specialist doctor posts created?

Specialist doctor posts are designed to allow departments to employ doctors in a senior role and allow recognition of specialty doctors who are working at this level. Employers will decide if they have a need for such posts but Clinical Leads should encourage potential candidates and ensure that they have the opportunity to acquire the broad skills that they would require.

Who should apply for a specialist doctor post?

A specialist doctor post would be appropriate for an experienced practitioner (being a minimum of 12 years post primary medical qualification) who has the skills to act as a senior decision maker. They should have the associated generic professional capabilities as well as specialty specific capabilities.

Can these doctors act on consultant rotas?

Doctors in specialist doctor posts will be expected to have the skills of a senior decision maker and have satisfied the stated requirements and as such should be qualified to act in a senior role. The exact details of how specialist doctors work within their local teams a matter for individual departments to decide.

What should be considered by specialty doctors thinking of applying for a specialist post?

The decision to pursue a career as a specialist doctor will be a personal one and its suitability will depend on what a candidate's intentions and needs are. Other options to consider are whether to enter a training post with the aim of becoming a consultant or whether to pursue the CESR route.

What additional support is available for development of SAS Doctors?

It is important that SAS Doctors in Emergency Medicine and those supporting SAS doctors in their development are aware that there should be SAS tutors in their trusts who are employed by their deanery through HEE. These doctors have access to development funds, some with bursaries etc that can help with additional support for career development. Each trust should also have an SAS representative on their Local Negotiating Committee who can assist with terms and conditions within the trust and regionally.

What else should candidates to consider when taking on a specialist doctor post? It is of vital importance to establish a satisfactory working job plan and to consider the implications of moving onto a different contract with different conditions and pay scales.





Personal job plans should be negotiated with clinical leads before starting in post.

It is not the role of RCEM or EMSAS to advise on this but details can be found on the HEE website (link available earlier in this document) and BMA SAS contracts web pages. (https://www.bma.org.uk/pay-andcontracts/contracts/sas-doctor-contract/sas-contract)