



**FACULTY OF  
PUBLIC HEALTH  
MEDICINE**

ROYAL COLLEGE OF  
PHYSICIANS OF IRELAND



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## **ASPIRE Fellowship 2020**

### **CLINICAL LEADERSHIP AND QUALITY IMPROVEMENT**

RCPI & HSE NDTP are now seeking applications from suitable candidates for the following Aspire Fellowship in Clinical Leadership and Quality Improvement.

Post: Cork University Hospital and Royal College of Physicians of Ireland (Diploma in Leadership and Quality in Healthcare and Quality Improvement scholar in residence).

- Duration: 12 months
- Commencing: July 2020
- Role: 0.5 Clinical Leadership and Quality Improvement and 0.5 Management of the Acutely Deteriorating Patient
- Eligibility: Available to doctors who have obtained CSCST within the last three years or have an expected CSCST in July 2020. Doctors eligible to be appointed into the NDTP Aspire fellowships must have completed their HST training within an Irish Postgraduate Training Body.

The fellowship is open to doctors from General Medicine/Acute Internal Medicine, Anaesthesia/Intensive Care Medicine or other suitable disciplines. Prior experience in Clinical Leadership and Quality Improvement would be an advantage. The Fellowship will be of equivalent standard to international counterparts.

### **Fellowship Details**

The ASPIRE fellowships are a programme of highly prestigious fully-funded post-CSCST Fellowship training opportunities that provide a candidate with a structured certifiable educational experience.

#### **Primary Lead/ assigned supervisor**

Dr Dorothy Breen  
Cork University hospital  
[Dorothy.breen@hse.ie](mailto:Dorothy.breen@hse.ie)

### **Goal of Fellowship**

Post CSCST Fellowship in Clinical Leadership and Quality Improvement provides a structured certifiable educational experience immediately following CSCST, designed to deliver the requirements of Clinical Leadership and Quality Improvement which are not readily available within the specialist training programmes.

The aim of this fellowship is to develop clinical leadership and quality improvement capability. This fellowship is supported by the Royal College of Physicians of Ireland and Quality Improvement



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Division of the HSE as a means of growing Clinical Leadership/Quality Improvement (QI) capacity and capability in both the individual and the Irish Health service. Participants will develop skills and knowledge to enable them to provide both quality improvement and clinical leadership and provide local QI education support.

The Fellowship covers the following area:

- Patient Safety
- Quality Improvement
- Leadership
- Clinical Medicine as it pertains to the Acutely Deteriorating Adult Patient the Fellowship will be of equivalent standard to international counterparts and is aimed at post CSCST doctors from General Medicine/Acute Internal Medicine and Anaesthesia/Intensive Care or other suitable specialties. This post is designed to post to recruit and retain talent to become the next generation of clinical leaders in healthcare in Ireland.

The Fellowship will deliver a curriculum of leadership skills and quality improvement as outlined below. These skills will be consolidated through practical application in the clinical setting by means of a Quality Improvement project based on the “Deteriorating Patient” and clinical care pertaining to this group of patients. The Deteriorating Patient has been identified as a key focus area in the Patient Safety Strategy (draft 2019-24) based on international evidence highlighting the care of these patients as a high impact risk and common cause of patient harm. The Deteriorating Patient Governance Group and Service in CUH has strong support from the Executive Management Board of CUH and has recently undertaken work on the implementation of the “Safety Huddle” as a tool to improve care for these patients. It is anticipated that the QI project would build on this work.

This proposal is supported by the National Deteriorating Patient Improvement Programme.

The curriculum includes:

### **Leadership for Quality**

Managing change, understanding workplace culture, human factors, influencing behaviour, motivating teams, sustaining change, influencing governing structures and boards, personal leadership styles and mentorship.

### **Person and family engagement**

Building a culture that listens and learns from patient and family healthcare experiences and delivers person-centred care.

### **Staff engagement**

Participation in the following initiatives underway in CUH: Schwartz rounds, Quality and Safety walk-rounds, After Action Review and other engagement techniques e.g. liberating structures, frontline ownership.



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### **Quality Improvement Science**

Coaching on the Model for Improvement and practical application of PDSA, Lean-Six-Sigma (CUH has a Lean Academy), Learning from Excellence.

### **Measurement for Quality**

Clinical audit, the role of national audit e.g. NOCA, NAHM, NQAIS etc. and local audit, measurement of harm and implementation of reliability theory.

### **Governance**

Governance frameworks that support accountability, quality, safety and experience of patients

Both the clinical and quality improvement work will have a strong focus on sustaining spread of the "Safety Huddle" already being implemented in CUH as a means of improving early recognition, assessment, management and mitigation of the acutely ill patient in conjunction with the Deteriorating Patient Governance Group and Service in CUH.

### **Programme Structure**

The role will be structured as 0.5 protected time in Clinical Leadership Development and Quality Improvement, based in the Quality Office in CUH under the supervision Dr Dorothy Breen, Clinical Lead for Quality and Consultant in Intensive Care, CUH. In addition, there will be a commitment (and release time) to undertake the QI Scholar in Residence Programme (outlined below) and the Diploma in Leadership and Quality in Healthcare in RCPI in the 2020/21 intake.

The fellow will be expected to consolidate this learning through the implementation of a quality improvement project based on the Deteriorating Patient. As part of the 0.5 clinical time the fellow will contribute to the clinical care and management of these patients as part of the Deteriorating Patient Service in CUH. The emphasis in the clinical time will also be on quality improvement as part of service delivery.

#### **\*Deteriorating Patient Service**

The Deteriorating Patient has been identified as a key focus area in the Patient Safety Strategy (draft 2019-24) based on international evidence highlighting the care of these patients as a high impact risk and common cause of patient harm. The Deteriorating Patient Governance Group and Service in CUH have strong support from the Executive Management Board of CUH. The service has been the first to develop the curriculum and train an Advanced Nurse Practitioner for the Deteriorating Patient in Ireland. At present the service is led by a Consultant in Intensive Care and consists of an ANP, 2 CNM2s and a data collector. The fellow will work closely with this team in the 0.5 clinical time. The fellow will gain skills in assessment and early management of the Deteriorating Adult Patient in the ward setting including but not limited to resuscitation, sepsis, non-invasive ventilation, communication including safety huddle conduct and end of life. There will be a strong emphasis in the clinical time on integrating the Quality Improvement project into clinical practice.



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### **Audit and research**

As the role is based around quality improvement, it will be structured around clinical audit, PDSA and measures for quality improvement. The successful candidate would be invited to join the Irish Safety in Health Systems (SHS) partnership between clinicians and researchers in the field of Patient Safety.

It would be anticipated that at the very minimum that the findings from the QI project would be written up and submitted to one of the Quality related journals e.g. BMJ Quality Open or BMJ Quality and Safety in order to disseminate the output and learning. Further research opportunities could be facilitated through The Deteriorating Patient Group who are already actively engaged in research such as an ISBAR communication simulation project with the College of Medicine and Health, University College Cork and contribute to international research e.g. a collaborative known as CrisTAL ([swscs.med.unsw.edu.au/project/validation-cristal-criteria-screening-and-triaging-appropriate-alternative-care](http://swscs.med.unsw.edu.au/project/validation-cristal-criteria-screening-and-triaging-appropriate-alternative-care)).

If the candidate is interested in preparing work to form the foundation of an MD/PhD this would be supported, and academic supervision could be offered (optional).

### **Applications Timeframe**

Applications close on 5pm Wednesday 12<sup>th</sup> February 2020 and interviews will be held on Tuesday 18<sup>th</sup> February 2020. To apply interested candidates must submit the following to Ciara Buckley, RCPI ([ciarabuckley@rcpi.ie](mailto:ciarabuckley@rcpi.ie))

1. An up to date Curriculum Vitae
2. Statement of interest
3. Confirmation of CSCST date

For further details please contact Dr Dorothy Breen [Dorothy.breen@hse.ie](mailto:Dorothy.breen@hse.ie)