

NDTP *Aspire* Post-CSCST Fellowship

1. Title:

(Please state the title of the proposed *Aspire* Fellowship)

Fellowship in ENT Skills for Primary Care

2. Duration of the fellowship:

(It is expected that most fellowships will be of a 12-month duration, however fellowship proposals up to 24 months will be considered)

12 Months

3. Primary Clinical Lead/Assigned Supervisor's Details:

Name	Organisation
Professor Camilla Carroll MD FRCS(ORLHNS)	NCPS / RVEEH

4. Location of the Fellowship:

**Royal Victoria Eye and Ear Hospital, Dublin 2,
ENT Urgent Care Department.**

5. Please provide a summary of the fellowship below (min 200 / max 500 words):

(include how this post CSCST fellowship would provide a quality experience, etc)

The **NCPS National Clinical Lead for ENT Education in Primary** care is applying for an Aspire Fellowship for a post CSCST GP Registrar, as part of the ongoing implementation of the HSE's ENT Model of Care for Otolaryngology :

[*Model of Care Otolaryngology Head & Neck Surgery: a model of care for Ireland*](#)

The Fellowship Programme will be based at the RVEEH ENT Urgent Care Department. The Fellowship is a competency-based educational programme underpinned by adult learning theories, with a focus on skills transfer in a situated learning environment.

The Fellow will gain advanced clinical and procedural skills in the management of adult ENT conditions. Upon completion of this one year post CSCST Fellowship, the “advanced” expertise gained will enable the Doctor to effectively manage adults with non-complex ENT Conditions in a primary care community setting and appropriately evaluate and refer patients with complex ENT conditions to a hospital based specialist.

The Fellowship curriculum is clinical, educational and research focused. The Fellow will be integrated into the multidisciplinary ENT Clinical team at the RVEEH ENT ED, where all duties will take place. The team is comprised of a Lead Consultant ENT Surgeon, Core Surgical Trainees, GP Trainees year 1, a Clinical Nurse Specialist, audiologist and vestibular physiotherapist. The Fellow will participate in the clinical evaluation, treatment and management of the undifferentiated patient presenting with “Urgent Care” ENT conditions at the RVEEH.

The Fellow will receive procedural skills training in a simulated environment in ear-suctioning using specialist microscopic equipment, fiberoptic endoscopic evaluation of the nasal cavities, nasopharynx and larynx, and non-complex management of anterior and posterior epistaxis in the adult. The practical skills sessions will be delivered in the educational centre at the RVEEH during the first 4 weeks of the programme. Following competency-based assessment, the Fellow will progress, under supervision, to perform these procedures in the clinical setting. Successful completion of the 12 month Fellowship programme, will result in the awarding of an Entrustable Professional Activity (EPA) for (1) Ear Suctioning, (2) Management of Non-complex Epistaxis (3) Fiberoptic evaluation of the larynx.

Weekly dedicated educational and research time will be factored into the programme. The Fellow will attend multidisciplinary teaching rounds and engage in clinical ENT teaching to undergraduate and postgraduate students. The research activity associated with this fellowship is to design a set of “Clinical Practice ENT Guidelines” for use by Primary Care when referring patients for Urgent Care ENT Assessment. It is expected that these guidelines would form part of a national implementation recommendation for use within the Irish healthcare setting.

Learning Outcomes

On successful completion of this Fellowship, the Doctor will have gained a range of specialised skills and clinical competence in relation to critical appraisal and management of adults suffering from non-complex ENT conditions. The Doctor will be able to instigate appropriate interventions using an evidence-based approach for patients and identify those patients requiring referral to a hospital based specialist.

The advanced ENT skills gained by the Doctor will ultimately result in improving patient outcomes and quality of life, through “caring for the senses”.

Word Count: 492

6. Please provide details of how the fellowship will protect/prioritise the unique learning requirements of the fellow (max 300 words):

The unique learning requirements of this Fellowship are to gain advanced ENT specialist clinical and skills training for primary care doctors undertaking non-complex management of adults with ENT conditions in primary care and to be familiar with ENT evidence-based guidelines.

The unique learning requirements also include audit and research in this area.

(1) Clinical activity

The Fellow will work as part of a multidisciplinary team, where they will see, treat and manage the undifferentiated adult patient presenting to a specialist “Urgent Care ENT Centre”.

Allocated time: 20 hours per week (Refer Section 7)

(2) Skills training

Procedural skills training will take place under Consultant supervision in a simulated and clinical setting. Skills gained will be in the use of ear-suctioning using a microscope and “loupes”, the use of an examining headlight, nasal instrumentation for examination and nasal packing, fiberoptic evaluation of the larynx.

(3) Audit / Research / Independent Learning

Dedicated and protected time has been scheduled into the Fellowship programme for these activities. Specific audit and research projects are described in section 7. The Fellow will receive support for this work from the Clinical and Educational Supervisor for this program Professor Camilla Carroll.

Protected time : 10 hours per week (Refer Section 7)

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6. Describe the opportunities for audit and research (max 300 words):

The Fellowship in ENT Skills for Primary care is clinical, educational and research focused.

The Fellow will have protected dedicated time to engage in clinical audit, research and independent learning. There will be 20 hours of Clinical activities weekly, scheduled Monday to Friday 9 am to 1pm. There will be 10 hours of protected educational time for non-clinical activity scheduled 2 - 4pm Monday to Friday, where the Fellow has access to the RVEEH Teaching and Educational Centre. The Fellow will have no on-call or out of hours duties.

The specific audit project to be undertaken by the Fellow will be to evaluate patterns of referral of patients to the Specialist ENT Urgent Care Centre at the RVEEH. This audit will be used to assist patients and referring primary care practitioners in seeking care from the “right person, in the right setting and at the right time”, central tenets of the “SlainteCare” document. The data will be utilised to design and deliver patient educational programs, for presentation at local and national meetings and for journal publication.

Based on the clinical activity of the Fellow and in conjunction with the audit process, the Fellow will undertake research aimed at formulating Clinical Practice ENT Guidelines for use by Primary Care when referring patients for Urgent Care ENT Assessment. It is expected that these guidelines would form part of a national implementation recommendation for use within the Irish healthcare setting.

Word Count 236

7. Outline the value of the proposed fellowship to the health services (max 600 words):

The potential benefits of the Fellowship in ENT Skills for Primary Care to patients and the Irish health service

ENT conditions account for approximately 30-50% of adult primary care visit's in the Republic of Ireland. ENT referrals from general practice, represent the third largest group of patient referrals to secondary care. Ireland has the lowest number of ENT Consultant Specialists in the EU with 1 Consultant per 82,000 population compared to an EU average of 1 Consultant per 19,500.

Age-related ENT conditions such as cerumen impaction, epistaxis and ear-related imbalance, place a significant burden on the Irish healthcare system. Cerumen impaction is present in approximately 60% of patients over 65 years and has been linked to the progression of cognitive impairment.

Currently over 80,000 patients are waiting for a public ENT out-patients appointment (NTPF data, September 2020). The ENT OPD waiting numbers represent the largest group of patients waiting for a specialist opinion and the longest waiters. This has been further compounded by the ongoing Covid19 Pandemic.

Over 20,000 patients are now waiting in excess of 18 months for ENT Expert opinion. Waiting list validation has identified, that approximately 33% of these patients have non-complex conditions, which are amenable to safe and effective treatment in a primary care, community based setting

There is however, limited ENT skills training in undergraduate and postgraduate medical education for primary care. Developing advanced ENT clinical and procedural skills in the primary care setting, through an integrated educational Fellowship programme would facilitate the safe and effective management of patients with non-complex ENT conditions in the primary care setting. This significant change in service delivery through "up-skilling" of the existing workforce would address unmet patient needs and is an integral part of the "ENT Model of Care" launched in February 2019 and in keeping with "Slaintecare" principles.

"The best health outcomes and value for money can be achieved by **re-orientating** the model of care towards primary and community care where most people's health needs can be met locally".

The significant **capacity constraints** that exist across the Irish health system in facilitating timely patient access to ENT care can and should be addressed through the integration of non-complex ENT care into a primary care setting.

This form of clinical “Task Sharing” can be achieved through advanced ENT clinical skills training of GPs. In 2017, we established the role of the National Clinical Lead for ENT Education in Primary care through the NCPS, following consultation with ICGP. At the ICGP Summer School 2017, 90% of surveyed GPs stated that advanced ENT skills training and “Task Sharing” was **relevant** for general practice. The ENT Educational Programme for Primary Care has subsequently designed and delivered a suite of clinical, educational and skills training workshops and engagements to over 200 primary care providers since 2017. A postgraduate Certificate for ENT Skills in Primary Care will commence in November 2020, which will provide a credentialing pathway for these practitioners :

<https://www.rcsi.com/dublin/postgraduate/taught-courses/ent-skills/course-details>

The **potential benefits to the Irish health service and patients** of delivering non-complex ENT Care in a community setting is estimated to result in an annual reduction in the scheduled care OPD ENT waiting list by over 30%.

Introduction of a post CSCST Fellowship for ENT Skills in primary care consolidates the ongoing clinical and educational work of the National Clinical ENT Programme in training a sustainable number of nationwide GPs with a “**skillset**” of advanced clinical and procedural ENT Skills. Currently, this unique and innovative Fellowship Programme does not exist in Ireland.

It is envisaged, that following Fellowship training in this “**Niche**” area, the Fellow would establish a regional primary care referral base for patients requiring management of non-complex ENT conditions and would have the opportunity to “link-in” to a hospital based ENT specialist for timely referral of patients with complex-ENT conditions. Supporting and upskilling primary care providers in this manner optimises the use of resources and avoids delays in care for the patient.

Advocating for transformative change in ENT services by delivering non-complex ENT Care in the community, through integrated care pathways is an important component of the “ENT Model of Care 2019”.

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Name of the Clinical Lead/Assigned Supervisor:

Professor Camilla MA Carroll