# med-co RECRUITMENT

### MOD Info Sheet for GPs

Med-Co have been proudly associated with our Armed Forces for over 15 years and have supplied all manner of clinicians to every branch of the MOD. We understand the differing needs of the MOD, and take care of our clinicians from an expression of interest through to completion of an assignment (and hopefully booking you into another one!).

In this info sheet we explain

- Job Opportunities
- Duties and session times
- Remuneration
- Registration and Security Clearance
- Case Studies
- Frequently Asked Questions

### **Job Opportunities**

We receive the jobs list every week, and can share this with you via our mailing list. Assignments vary from one week to one year, and can be within the UK or overseas.

Assignments have a minimum session fill-rate of 80%, so unfortunately we are not able to put you forward unless you are available for the majority of sessions, unless we can arrange a job-share with another clinician. This is to ensure continuity of care at the base. Please let us know if you are interested in a job-share.

### **Duties and session times**

Duties involve the running of Primary Healthcare Clinics (PHC) and can include carrying out Occupational Health Assessments.

A typical session runs from 0830 until 1630, and includes appointments, breaks and admin. Appointments are 15 minutes per patient.

The dress code is considered smart and an ID badge will be provided for use throughout your time on a base.

#### Remuneration

The rate is fixed at £69.15 per hour.

If you require accommodation, Mess accommodation can sometimes be made available to you at low rates (around £10/night).



For overseas assignments, flights and accommodation are provided.

Your hours need to be submitted via the MOD's own system by close of play on Sunday, following your working week. Failure to submit your hours in time may result in late payment.

### **Registration and Security Clearance**

Every candidate who applies for a post with the MOD will need to obtain security clearance. We collect a number of documents from you as part of our registration process that will allow a BPSS form (Baseline Personnel Security Standard) to be completed. Non-British Nationals may be subject to additional vetting once at the base, depending on their security level.

#### **Case Studies**

Case Study #1 - Overseas MOD assignment (Kenya)
The following is an excerpt from Dr Turley's blog:

Back in clinic for a full week of regular work now after last week's safari exploits, and my first patient is a swift reminder that we are not in Dorset! Some of the patients had been helping with relocation of some wild animals and she came to see me having had her foot trodden on by a baby elephant. Thankfully the local cottage hospital has some basic x-ray facilities and I am able to reassure her that she just has some soft tissue injuries rather than any fractures.

Despite being out in semi-rural Africa, the local hospital does have some basic facilities such as a pathology lab and x-ray, however there is no one there to interpret x-ray results, so you have to rely on the knowledge gained during A&E SHO jobs to spot fractures, etc. Thankfully we have a very basic telemedicine set-up, which relies on placing the X-ray film on a light box, taking a digital photograph and then emailing that picture to the orthopaedics consultant in Nairobi. Although it is not the most "high-definition" way of transferring X-ray images, at least we have some means of getting a second opinion when absolutely necessary.



My next patient was from the same group and came in having had her leg scratched by a baby cheetah. Thankfully we have a small supply of rabies vaccinations and co-amoxiclav. By the end of the week, both had made a very good recovery.

I had my own brush with local wildlife too. On my Sunday off I visited the Mount Kenya Safari Club. Basically it's a very posh hotel, but has its own animal orphanage filled with rescued baby cheetahs, bongos, impalas, Columbus monkeys and buffaloes. The baby buffalo took a particular liking to me and kept head butting my legs. I now have a cracking bruise on my calf!



Case Study #2 - UK base assignment (Plymouth)
The following is a review from Dr Nick Batten

My first assignment was at HMS Drake in Plymouth where I live. It's convenient for me as I can commute and gives a good work/life balance. It certainly does no harm that it's an excellent team there to work alongside and you feel fully integrated into the unit. I look forward to continuing my work at HMS Drake and it even becoming more regular over the next few years.

Between stints at HMS Drake I had the pleasure to stay at Buckley Barracks, Hullavington, Wiltshire with IX Reg Royal Logistics Corps & work with XXI Reg Signals for 6 weeks as they made the transition from an on-site medical centre to a larger combined medical centre at Lyneham. It was a great experience to live on base and stay in the officer's mess where we had some fantastic socials and made some good friends.

Working with the Armed Forces is a privilege and it's fantastic to have 15 minute appointments to help well motivated individuals optimise their health and fitness. I have an interest in Musculoskeletal medicine and while there is a great deal of it in the caseload, there really is a great variety of presentations and problems running the whole range from Cardiology to Psychiatry plus the added aspect of a very specific Occupational medicine. I won't lie, it takes a while to get used to the Occupational side of things in terms of the various classifications and forms (each service has slight variations) but I've been well supported throughout.

### **Frequently Asked Questions**

To provide you with genuinely useful information, we asked our MOD GPs to answer our FAQs:

How are the clinics run? Are they like General Practice in the community?

Much more chilled than community. Usually 15 min appointments, with a staff catch up mid morning. Most places have double appointments in the afternoon for medicals etc. No home visits! Every surgery is different! Generally you are there for 7.30 and clinics start at 8am. Some similarities to "ordinary GP surgeries" and some big differences! Usually 2 clinics a day, morning and afternoon, but some bases have evening clinics too. In some places you provide on-call in the evenings or overnight and weekends.

Morning and afternoon session, 15 minute appointments (longer for occupational grading reviews), no home visits!

Yes and no . Acute injuries 1st thing., often triaged by a nurse or medic, a few routine problems later in the day . Some bases are military only, others see families so more medicine 15 mins appts, catch up coffee breaks.

You see both acute and routine patients but you have 15 minutes to see patients and then in the afternoon you have medical military gradings which are 30 minutes long.

Are there other Practice staff (nurses etc) available for support?

Loads of different staff on site to help you out. Nurses, HCAs, military medics and usually onsite Physio as well.

Yes... there's plenty of support available at all times.

Yes, other staff, but again everywhere is different. Some places there is only one doctor so you are on your own and others several doctors - military and civilian to discuss things with. Some have



nurses and medics and support staff, others will have a different variety of staff, or maybe admin only.

In short; yes. Depends on the size of the base as to how much support is available, but generally always someone to ask for help. In the mornings medics or nurses will triage "sick parade" or "fresh cases", some of which will be passed to you to see (obs and an initial history will be available for you by the time you're due to consult with them).

There are nurses and physios and pharmacy technicians available.

### What do you enjoy about MOD work?

Good support and friendly staff, both clinical and non clinical.

The variety. Playing a small part in supporting our armed services who go many extra miles to give us our freedom.

Enough time to spend with patients, who are for the most part very motivated to stay fit and to recover from illness/injury, with a supportive team network to support that recovery.

The pace. For me, it helps me develop my musculoskeletal knowledge.

You get longer with the patients and it feels less stressed. You also get allocated administration slots.

### What can I expect on my first day, as a civilian GP?

For your first day it will most likely be just induction. Each practice is slightly different, so no matter how much MOD work you have done before it's likely that at least part of the day is blocked off to show you around, get computer sorted, etc

Full induction, support and time to get used to the IT system, etc.

To find out a lot about how similar and how different the military is to usual GP's! To meet lots of jargon you are not sure of. To see many uniforms with incredible badges and headgear. To be called Sir or Ma'am.

You'll usually be given a tour of the facility, meet the team, and if it's your first assignment, will probably have a chance to discuss the occupational aspects of the role.

Induction and then patients booked later in the day.

A routine clinic being a normal GP dealing with usual illnesses.

### Any other useful feedback you wish you had known beforehand?

Brush up on your MSK skills.

The military have a completely different way to do a number of things, including recording how fit someone is to work. There are forms and systems and protocols for almost everything.

Very few occupational decisions need to be made on the spot, even if service personnel are pressing for a decision to be made. Try to get to know the officers and senior NCO's so you can build up a productive working relationship with them, and if you don't get that chance, then don't be afraid to contact them to get their side of the story when it comes to tricky decisions regarding occupational grading decisions. There will always be someone to ask for advice, even if it's a medical officer at a nearby base to speak to on the phone.

Update your musculoskeletal knowledge



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