

**London School of General Practice**

Stewart House

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**Global Health Fellowship (GHF) Gurkha Welfare Trust Nepal**

**Job Description, Person Specification and Terms of Service.**

**Job Title: Medical officer/**Clinical Fellow in Global Health

**Directorate: Management, Clinical Governance and Clinical training responsibilities**

**Reports to: Dr Satish Gurung (Deputy Medical Director) and Dr Thakur Devkota (GP**

**trainer)**

**Key relationships:** Doctors, clinical practice manager, nurses and mobile health practitioners

Clinical governance team

# INTRODUCTION

There is an increasing demand for Global Health experience to be made available to UK General Practice Trainees. To this end London General Practice in collaboration with The Gurkha Welfare Trust (GWT) (<https://www.gwt.org.uk/>) is offering a six- to twelve-month GHF post in Kathmandu, Nepal.

London General Practice sees GHF as an opportunity for GP trainees to extend their training and enhance their knowledge and skills in areas that are difficult to achieve within the present three-year programme. As well as develop experience in international health, the trainee will bring added value to the post through the competencies developed in the ST1 and ST2 years.

Eligibility

The post is available to GP trainees who will have completed their ST2 placements. Trainees must be able to demonstrate through ARCP approval, acceptable progression in their training.

# GWT ORGANISATIONAL OVERVIEW

[The Gurkha Welfare Trust](https://www.gwt.org.uk/) is a registered charity (Registered Charity No 1103669) which has been working in Nepal for over 50 years (est 1969), providing financial, medical and development aid to retired Gurkha veterans, their families and their communities. –

The medical services aim ***‘to provide the highest possible quality of primary health care, free at the point of access; including rehabilitation and palliative care; referral and impartial advice for secondary care and reimbursement of medical costs on the basis of need - in the context of an integrated programme aimed at ensuring that retired Gurkhas can live their lives with dignity.’***

The Trust operates clinics in 21 Area Welfare Centres throughout Nepal, 7 of which are situated in urban settings and provide services comparable to a NHS general practice, with MBBS and post graduate doctors (physicians and GPs), as well as nurse practice managers, clinical receptionists, practice nurses, pharmacists, phlebotomists and rehabilitation therapists.

The centres also have mobile teams consisting of doctors and mobile health practitioners (nurses or health assistants) who visit patients at their homes and support rural outreach clinics.

In addition, the trust runs two residential homes with in-patient rehabilitation facilities which also provide palliative care services.

In total, there are around 200 medical professionals working for GWT throughout Nepal.

Services provided at the GWT AWC clinics are free to registered patients and include:

* Physician consultation,
* basic procedures (ECG, spirometry, ABPM), vaccination, dressings, etc
* nurse led chronic disease management
* screening for cervical and colorectal cancer
* laboratory investigations (phlebotomy on site with samples sent to a contracted laboratory)
* free dispensing of prescribed medication (from a generic formulary of approx. 350 molecules)
* physiotherapy for selected cases
* referral to secondary care

In rural clinics, mobile health practitioners contact doctors by phone and consultation and prescribing are done remotely with doctors having access to the patients’ EMR.

Mobile teams provide most of the above services in patients’ homes where necessary, including palliative care and rehabilitation.

Where care cannot be provided at home, patients can be admitted temporarily to the two residential homes and rehab centres in Pokhara and Dharan.

**NEPAL OVERVIEW:**

Nepal is a low-income country with a still predominantly rural population, some communities being very remote (several days walk from the nearest road or airstrip access), and with huge ecological, cultural and religious diversity: situated just North of the Tropic of Cancer, with altitudes ranging from near seal level to above 8,000m, the climate varies from subtropical to alpine and glaciers.

There are over 100 local languages spoken in Nepal, with many distinct ethnic groups following diverse faiths (Hinduism predominates, followed by Buddhism, Christian and Muslim populations are minorities but growing).

Travel in country is often difficult and dangerous; especially during monsoon rains both roads and air travel can be held up for hours or days by poor weather, floods and landslides, and both roads and vehicles are poorly maintained, adding to the risk; the country is also highly earthquake prone.

In other aspects travel in Nepal is very safe and pleasant, as crime rates are low and people in general are courteous and helpful towards foreigners.

Nepal’s public health system is very basic with access and quality both being problematic, although there have been huge strides in the last 15 years; there is also a growing and not very well regulated private sector, ranging from medical shops to large tertiary hospitals.

Nepal has a “MDGP” programme, which produces hospital generalists with management skills, rather than primary care physicians. – Primary care in the public system is largely delivered by mid-level health practitioners.

Multidisciplinary primary care teams do not really exist. – Clinical professions like nurse practitioners, pharmacists, physiotherapists, counsellors are all in the early stages of development.

In this context GWT is aiming to provide high quality comprehensive primary care, which is challenging for a variety of reasons.

In March 2023, GWT commissioned and external assurance review by four (ex-)CQC consultants who worked pro bono and completed an adapted version of a CQC visit in 8 of 21 centres. The subsequent report has focussed clearly on the need for further clinical skills development of health professionals and strengthened clinical governance systems. The GHF post can help with both of these.

**JOB RESPONSIBILITIES:**

**Patient safety and clinical governance**

Audit and quality improvement are recognised as a primary tool in maintaining standards and protecting patients. The GHF doctor would be involved with conducting quality improvement projects, audits and possibly small pieces of research, as agreed with Dr Gerda Pohl (Medical Director) and Dr Satish Gurung (deputy medical director) and in supervision of Dr Thakur Devkota (GP Trainer in Kathmandu).

**Management and Leadership:**

The GHF doctor will have the opportunity to take part in clinical governance meetings with the HQ medical team and to take part in any governance or audit meetings and leadership meetings.

She/he will learn how decisions are made in allocating limited resources and be part of this process. They will gain experience of how senior management review the various service elements, manage staff and resolve problems.

**Clinical training**

An important part of the placement will be the development of clinical skills among non-medical health professionals (nursing and other backgrounds), as GWT relies heavily on these for service provision in rural areas and at patients’ homes.

The GHF doctor will be involved in clinical training of nurses, mobile health practitioners and pharmacists on site, and will have the opportunity to visit the related rural Area Welfare Centres to provide clinical mentoring and coaching to mobile health practitioners there.

Joining in home visits and outreach clinics will also be an option.

**Clinical responsibility**

As the GWT will not be able to obtain Nepal Medical Council registration for the GHF, the doctor will not be able to provide direct clinical services. However, she/he will be able to work closely with mobile health practitioners, guiding them in taking histories and developing a management plan, with prescriptions provided remotely by GWT doctors.

**EDUCATIONAL SUPERVISION AND ASSESSMENT**

Dr Thakur Devkota (GWT GP Trainer – previously a GP trainer in the NHS) will be the GHF doctor’s supervisor and will be available on site in Kathmandu for at least weekly formal meetings.

There is usually one other GWT doctor attached to Dr Devkota’s practice for update training in clinical skills, so joint tutorials and joint case based discussions can be offered.

In addition, the GHF doctor will have ready access to Dr Gurung and Dr Pohl, who are based in Pokhara, but visit Kathmandu periodically.

The GHF doctor will be able to maintain online contact with their UK GP Training programme as well as RCGP e-learning packages including a review atsix monthly intervals on line with a UK Educational Supervisor.

Dr Pohl and Dr Devkota have both worked in NHS training practices (Dr Pohl as F2 tutor and FSRH trainer and Dr Devkota as a GP trainer) and will be able to provide appropriate educational and pastoral support.

**TERMS AND CONDITIONS OF SERVICE:**

Employment arrangements: (TBC) The doctor will have a formal volunteer contract with GWT(UK) in Salisbury. This will include appropriate insurance arrangements and will require the doctor to sign up to GWT code of conduct and Safeguarding policies and procedures.

The appointment is for one year. In practice, this is for 11 months to allow for travel and settling both in Nepal and back in the UK. Normally starting in mid-August and leaving in mid-July.

A shorter, 5-6 months placement is also an option.

**Salary:** TBC: See below for housing and basic living costs.

**Leave**: Two weeks every 3 months (with some flexibility).

**Registration and Visas**

Nepal provides tourist visas on arrival (visas can also be obtained at the Nepal Embassy in London before travel) for up to 3 months, which can be extended for up to a total of 5 months within a calendar year. Therefore, volunteers who arrive in August can remain in Nepal for 5 months and take some time off in December/ January, returning to Nepal for a further 5 months in Jan / Feb of the following calendar year, with a total stay of 10-11 months.

**Housing**

GWT can provide accommodation for the GHF within the Area Welfare Centre free of cost and including basic meals (TBC); the doctor may prefer to find rented accommodation locally, which is not expensive.

**Weekly budgets**

We would suggest budgeting around £50 – 60 a week for food and other expenses.

**Passages**

One time Economy Fare from the UK to Nepal and return will be borne by GWT. Any flights to the UK from Nepal for leave will be the financial responsibility of the doctor.

**Person Specification**

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| --- | --- | --- | --- |
|  | Essential | Desirable | When evaluated |
| Eligibility, education, qualifications | Current trainee in the London GP School completing ST. Available for one year (minimum 6 months)  Satisfactory Progression through ARCP panels  Broad-based clinical experience to date | Postgraduate qualification in a relevant discipline, e.g. DTM&H | Application form |
| Knowledge and skills | Effective organisational, planning and administrative skills  A demonstrable understanding of International Health Development  Competence in Information Technology  Competence and experience of audit and working within guidelines  Evidence of learning and teaching activity | Evidence of International Health Experience  Experience in service development  Knowledge of Nepalese language a major advantage | Application form and interview |
| Personal attributes | Effective written and oral communication skills  Able to work well individually and in a team  Good problem solving skills  Tolerant and empathetic  Flexible, adaptable personality | Evidence of leadership potential  Experience of a change process  Experience of travel or living in South Asia | Application form and interview |

**Further information:**

Dr Gerda Pohl, MRCGP, Medical Director GWT

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Dr Patrick Kiernan FRCGP

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General Practice Health Education London

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