NHS
Cambridge
University Hospitals
NHS Foundation Trust

UNIVERSITY OF CAMBRIDGE

Academic Clinical Fellowship

In

Emergency Medicine

(ST1/ST4)

One post

Entry: August 2027

Job title	Academic Clinical Fellow in Emergency Medicine
Post(s)	ACF-2027-14-008 – Digital – Acute Internal Medicine OR Paediatrics OR Emergency Medicine Three NIHR-funded posts
NIHR Priority Research Theme	Post **ACF-2027-14-008** has been awarded under the research theme **Digital**. The appointee will be expected to develop a research programme in that theme area.

These posts will attract an Academic National Training Number – NTN(a)

Duration and Outcome

This post will be appointed at ST1/ST4 level and is funded for three years. The principal aim of the ACF scheme is to allow academically gifted clinical trainees the opportunity for 25% protected research training and during that time to formulate and submit an application for an externally funded Research Training Fellowship (RTF) (e.g. Medical Research Council, NIHR, British Heart Foundation). If candidates are unsuccessful in obtaining funding for an RTF/PhD, they can transfer into non-ACF ST3+ posts and pursue full-time clinical sub-specialty training. It is anticipated that all successful ACFs completing RTFs would be in a strong position to compete for Clinical Lecturer posts following award of their higher research degree, as per the Integrated Academic Training programme.

NHS Organisation(s) in which training will take place

Addenbrooke's Hospital, Cambridge University Hospital NHS Foundation Trust. Rotation to other hospitals in the region will be undertaken as required to fulfil training needs.

Research Institution(s) in which training will take place

University of Cambridge and Cambridge University Hospital NHS Foundation Trust.

Day release or block release for protected research time?

It is anticipated that the successful applicant will be available for research on a block basis (e.g. 3-9 months durations) comprising 25% WTE over three years. This will be subject to negotiation.

Description of the Research Component

Cambridge provides an exceptional environment for research, and the areas of institutional excellence are outlined elsewhere (see http://www.medschl.cam.ac.uk/ and http://www.cuh.org.uk/research/research_index.html).

The ACF would undertake a bespoke training programme, with the 25% protected academic time scheduled flexibly to support the individual trainee's needs. The main aim of this post is to allow an individual to be exposed to academic environments and research techniques that would inform their choice of subsequent full time research training and provide the senior academic input needed to support the submission of an externally funded research training fellowship. As such, the research components are not constrained. For example, an individual may wish to undertake an initial project involving basic molecular and cell biology followed by periods undertaking translational and/or patient based studies. Alternatively, an individual may be interested in exploring different research techniques and/or wish to spend their entire research time working in a single research area.

A successful applicant would become a member of EURECA (Emergency and Urgent Care Research in Cambridge) group. The particular strengths of emergency medicine based research include traumatic brain injury (TBI), major trauma systems and emergency department crowding. There are also strong links with prehospital research via RAID (research, Audit, Innovation and Development) group, part of the East Anglian Air Ambulance. All previous ACFs attached to Emergency Medicine have been successful in obtaining funding for subsequent research posts (PhD studentships and/or Clinical Lecturer).

With regards to the this theme there is a portfolio of NIHR funded research on mild traumatic brain injury including development of an App to help with management of post-concussion symptoms as well as enable follow-up of these patients, and BRAINS-TBI, a multi-center cohort study with embedded RCT which is assessing the use of biomarkers for diagnosis and prognosis. In addition, POCkET, an investigator led, industry funded (Abbott) multi-center study is focused on understanding implementation of biomarkers into clinical practice. These projects are linked to TBI-REPORTER, a UK TBI research Platform (https://tbi-reporter.uk/).

The opportunities are not limited to these and we would support ACFs interested in other areas of research that fits with the theme. Within the University of Cambridge, Emergency Medicine is within the PACE (Perioperative, Anaesthesia, Critical Care and Emergency Medicine) Section, part of the Department of Medicine, which was awarded a 5* rating in the last RAE. The particular strengths of PACE lie in neurosciences (including an extensive portfolio in traumatic brain injury) and critical care, and also has research programs in neuroanaesthesia, consciousness and coma, and pain medicine. The Emergency Department also has links with the Institute of Public Health, allowing outstanding training in population sciences, health services research and epidemiology.

Additional areas of strength for PACE include in advanced imaging at in the Wolfson Brain Imaging Centre directly adjacent to the Neurointensive Care Unit (3T and 7T MRI, PET MRI and PET-CT) and links with The Healthcare Improvement Studies Institute (THIS). Beyond the Cambridge Biomedical Campus, we have close research links with the MRC-Brain and Cognition Unit, and the Health Systems Design Group in the Engineering Design Centre, Department of Engineering. These connections and others available in Cambridge provide a range of research opportunities in a wide

range of biomedical science, through translational and experimental medicine, to clinical trials and health services research.

Given this breadth of research collaborations, successful applicants for these ACF posts would have an enormous range of world class science to consider for their choice of research focus.

Description of the Clinical Training Component

ACFs would participate in the normal specialty rotation. These posts would be indistinguishable from the mainstream ACCS/HST posts and involve normal pro-rata on-call commitments, and night cover. The successful candidate(s) will commence their training at ACCS ST 1 to 3 or HST ST 4 Level.

ACFs recruited at ACCS level will undergo two years of core training at Addenbrooke's Hospital during which they will undertake modular attachments to acute medicine, emergency medicine, ICU and anaesthesia. It is expected that these trainees will achieve Membership of the Royal College of Emergency Medicine (MRCEM) or Intermediate by passing the MRCEM exam towards the end of their second year. Following this (typically 12 or 24 months into their rotation but may be different by negotiation) they will enter a 12 month academic module which will offer near full time research, with the clinical commitments being restricted to a maximum of three months in total for the year. In general the academic block will contain no clinical commitments, but the exact timings of clinical work in that year will be negotiated to fit in best with the trainees academic and clinical training needs. This academic time will be spent in acquiring research skills and pilot data in preparation for a Research Training fellowship application, which would support study for a PhD degree.

While usually ACFs are appointed at ACCS level we recognise that some trainees become interested in research after their basic training, and so will also consider candidates who have completed ACCS, and are eligible for ST4. For successful trainees at this level the timing of the academic component will be negotiated to fit in with RTF applications, and clinical training needs including the anticipated timing of components of the FRCEM exam.

In line with national guidance, the mentoring, tutoring and annual training review (ARCP) processes will involve representatives from both the Academic and Emergency Departments in Cambridge. The region has a strong track record at the MRCEM and FRCEM examinations. Regular local and regional MRCEM teaching is in place as are a number of Simulator Centre and ultrasound training days. For HST level trainees there is a monthly regional training day.

The ACF Programme is principally designed to nurture trainees wishing to pursue an academic career. However, the post also equips the trainee with the necessary training to re-enter full time higher level training in emergency medicine after three years should this be required. Subject to satisfactory ARCP outcome, higher level training towards a CCT in Emergency Medicine could be accommodated within the School's existing Training Programme. The Region can provide training

across the entire range of emergency medicine, with particular strengths in pre-hospital care and paediatric emergency medicine.

Further Information and Contacts

Clinical Academic Training Office (CATO) at the University of Cambridge

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