# Phillip John Johnstone

#### Curriculum Vitae

#### Personal Details

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#### Career Statement

I have worked as a consultant in a large, adult and children Major Trauma Centre for over 10 years. Working in an MTC has ensured that I have an understanding of all case types that would typically present to UK Emergency Departments; and, additionally, I have experience in cases that would not be frequently seen in smaller Emergency Departments. My role as a Medical Examiner means I am experienced at investigating and reviewing cases to assess the standard of care provided.

I hold the Cardiff University Bond Solon (CUBS) Expert Witness Civil Certificate (2024). To achieve this, I have undergone the following Bond Solon training courses:

• Civil Law and Procedure (2023)

- Courtroom Skills (2023)
- Cross Examination Day (2023)
- Excellence in Report Writing (2024)

### **Education and Qualifications**

**CUBS:** July 2024

RCPathME: May 2021

**FCEM:** May 2013

**MCEM:** May 2010

MB BS: University of Newcastle 2004

### **Career History**

Dates	Specialty/Post	Location	Supervisor
4 <sup>th</sup> November 2013 - present		Royal Victoria Infirmary, Newcastle	N/A
1 September 2013 – 3 <sup>rd</sup> November 2013		Cumberland Infirmary, Carlisle	N/A
5 <sup>th</sup> September 2012 - 31 <sup>st</sup> August 2013t	ST6 in Emergency Medicine	Wansbeck General Hospital, Woodhorn Lane, Ashington, NE63 9JJ	Mr. Dean Shipsey

Dates	Specialty/Post	Location	Supervisor
1	ST5 in Emergency Medicine	Royal Victoria Infirmary, Queen Victoria Road, Newcastle upon Tyne, NE1 4LP	Mr. Jim Connolly
4 <sup>th</sup> August 2010 – 4 <sup>th</sup> September 2011	ST4 in Emergency Medicine	Sunderland Royal Hospital, Kyall Road, Sunderland, SR4 5TP	Mr. Malcolm Jones
3 <sup>rd</sup> February 2010 – 3 <sup>rd</sup> August 2010	ST3 ACCS	Cumberland Infirmary, Newtown Road, Carlisle, CA2 7HY	Dr. Paul Hill
5 <sup>th</sup> August 2009 – 2 <sup>nd</sup> February 2010	ST3 ACCS	North Tyneside General Hospital, Rake Lane, North Shields, NE29 8NH	Dr. Julie Davies
4th February 2009 – 4 <sup>th</sup> August 2009	ST2 ACCS (Anaesthetics)	Royal Victoria Infirmary, Queen Victoria Road, Newcastle upon Tyne, NE1 4LP	Dr. Karen Naru
6 <sup>th</sup> August 2008 – 3 <sup>rd</sup> February 2009	ST2 ACCS (Critical Care)	Royal Victoria Infirmary, Queen Victoria Road, Newcastle upon Tyne, NE1 4LP	Dr. Kaye Cantley
2 <sup>nd</sup> April 2008 – 5 <sup>th</sup> August 2008	ST1 ACCS (Acute Medicine)	North Tyneside General Hospital, Rake Lane, North Shields, NE29 8NH	Dr. Brian Wood
1 <sup>st</sup> August 2007 – 1 <sup>st</sup> April 2008	ST1 (Emergency Medicine)	North Tyneside General Hospital, Rake Lane, North Shields, NE29 8NH	Dr Julie Davies

Dates	Specialty/Post	Location	Supervisor
7 <sup>th</sup> February 2007 – 31 <sup>st</sup> July 2007	Paediatric SHO	Queen Elizabeth Hospital, Sheriff Hill, Gateshead, NE9 6SX	Dr Nicola Gittins
2 <sup>nd</sup> August 2006 – 6 <sup>th</sup> February 2007		Queen Elizabeth Hospital, Sheriff Hill, Gateshead, NE9 6SX	Mr. Mike Rickards
3	Programme Doctor	Wansbeck General Hospital, Woodhorn Lane, Ashington, NE63 9JJ	Mr. Mike Bradburn

### Clinical Skills and Experience

I have worked at a Major Trauma Centre for over 10 years, this involves working as Trauma Team Leader, in addition to leading an extremely busy inner-city Emergency Department. In my time in post, I have also been lead for stroke medicine and plastic surgery/burns, giving me an insight into the challenges affecting secondary and tertiary medical and surgical specialities.

I work as a crowd doctor for Newcastle United, giving me experience of the challenges faced pre-hospital and good links with the Ambulance Service.

I have worked in pilot projects for both Vocare and NEAS; which involved pre-hospital triage of patients via telephone – allowing a greater appreciation of the difficulty of the pre-hospital environment and remote assessment via telephone.

I am an instructor for both APLS and ATLS; allowing me to maintain my skills for both and paediatric resuscitation.

In 2021 I became a medical examiner for Newcastle Hospitals. The nature of my Emergency Department work and my clinical governance interest have helped in this role of scrutinising deaths, liaising with clinical teams and speaking with bereaved relatives.

### Medico-Legal Experience

**Bond Solon Excellence in Report Writing Course - 2023** 

**Bond Solon Civil Law and Procedure Course - 2023** 

**Bond Solon Courtroom Skills Training - 2023** 

**Bond Solon Cross-Examination Training - 2023** 

**MedCo Accreditation Training - 2024** 

### Management and Leadership Experience

Being a leader is part of being a consultant in Emergency Medicine, this is learned through training and honed as a consultant. Working in a tertiary Emergency Department is challenging and dealing with wide variety of specialities with competing pressures and interest requires significant people and negotiating skills.

The RVI has always been successful regarding national targets; however, given its size, the number and the calibre of the consultants it has, it should have greater regional profile in terms of education, leadership and research. As such I have been involved in the successful improvement in educational experience at the RVI, I have improved the research output at the RVI and have brought REBOA-UK.

As part of the REBOA-UK study, I have organised multi-disciplinary training days for all members of the Trauma Team and have secured funding for REBOA training simulator; allowing real-time in-situ training within the resuscitation room – this will be part of a larger, regular in-situ simulation training programme.

In my role as departmental stroke medicine lead, I was part of the planning and organising team that supervised the reorganising of local stroke services. My role saw the implementation of pathways that reduced unnecessary attendances to the Emergency Department and facilitated direct access to the specialty most suited to looking after the patient. In addition to this, I gained an insight into the challenges facing Trusts and the NHS with regards to the reorganisation of services.

I have been trauma lead for the last 5 years, in this time I have implemented the addition of full-week single consultant presence on the trauma ward; implemented the use of a trauma-specific clerking document, a daily sheet for use on trauma ward rounds; and been part of a very successful peer review which praised the Emergency Department's role within the Major Trauma Centre.

As a consultant I have developed an Investigation pathway for UTIs at the RVI, which reduced the number of investigations; this improved flow and reduced cost. I have also developed a low risk chest pain pathway, allowing patients to wait for result in ambulatory care rather than the Emergency Department; this improved flow and patient experience.

I have been part of internal peer review panels at the RVI, allowing me to appreciate what is expected from CQC inspections and the importance of constructive feedback when evaluating services which require improvement.

I was elected EMTG representative for Higher Specialist training. In this role I developed my skills of dealing with concerns from trainees and taking this to a higher level, facilitating discussions with both trainee peers and the consultant body to achieve mutually beneficial resolutions. These skills are essential in dealing with all members of the multidisciplinary team in my role as a consultant.

During training, I was invited to be a trainee representative on appeals panels for the Northern Deanery, an invaluable experience which has improved my skills in dealing with trainees in difficulty, as well as affording me a greater understanding of the appeals process and support available for trainees and supervisors who have concerns.

I have successfully taught on ATLS courses and in 2022 I became a director of the Newcastle-Gateshead ATLS course.

#### Courses attended

Course	Date
ATLS – Course Director	2022
Learning to Lead Together	2020-2021
ATLS	2009, revalidated 2013
APLS	2009, revalidated 2013
ALS	2010, revalidated 2013
Transfer Training Course	2009
Neonatal Life Support (NLS)	2007
Paediatric Sedation Course	2012
Organ Transplant Training Day	2012
Child Protection Level 3	2013

### Research Experience

**TAP** – International commercial study looking at the use of prothrombin complex concentrate in major trauma. Principal investigator.

**CoMiTED** – National study looking at conservative management of traumatic haemothoraces and pneumothoraces in the Emergency Department. Principal investigator.

**REBOA-UK** – National study looking at retrograde endovascular occlusion of the aorta in trauma. Principal investigator.

#### **NIHR Reviewer** since 2014

**EDIT study -** national study looking at F2 note-keeping when working in A&E, involved in local data collation and entry. Principal investigator.

**Penthrox STOP! Study -** national study looking at efficacy and safety of Penthrox (methoxyflurane) versus placebo for acute pain in minor trauma. Investigator

**Alcohol and fluid study -** ongoing study at the RVI looking at effect of fluid resuscitation on recovery from alcohol. Investigator.

As part of the FCEM exam I undertook a clinical topic review looking into at the role of ultrasound when performing loco-regional anaesthesia in fractures of the femoral neck.

I have submitted 2 review articles to the BESTbets website: "Use of ultrasound for femoral nerve block" and "Quantitative d-dimer value in PE."

#### Clinical Audit

**2022** RCEM Infection Prevention QIP, RCEM Mental Health (Self-Harm) QIP, RCEM Care of Older People QIP

**2021** RCEM Infection Prevention and Control QIP, RCEM Pain in Children QIP, RCEM Consultant Sign-off QIP

**2020** RCEM audits (fractured neck of femur, infection control, pain in children), PPE in COVID-19 pandemic, BOAST pelvic binder, trauma bypass protocol

**2019** RCEM audits (mental health, cognitive impairment, care of children), asthma, BPT in trauma, sedation

**2018** RCEM audits (feverish children, vital signs in adults, VTE risk lower limb immobilisation), analgesia for major trauma admissions, investigation of suspected VTE in ED, documentation of hand injuries in ED, NICE HI compliance

**2017** RCEM audits (fractured neck of femur, pain in children, procedural sedation), CT heads and adherence to NICE guidance, NEWS score in ED, management of homeless patients in ED, chest pain and ECG evaluation

Became audit lead for the RVI Emergency Department, overseeing RCEM audits (asthma, consultant sign-off & severe sepsis) and increasing departmental audits; including: time for CT head report, drug allergy, analgesia in ED, use of NEWS scoring, management of homelessness, vital signs in children, chest pain & ECG interpretation.

Royal College of Emergency Medicine, Procedural sedation – Royal Victoria Infirmary

Royal College of Emergency Medicine, Mental Health in the Emergency Department – Royal Victoria Infirmary

Quantitative D-dimer in DVT - Wansbeck General Hospital and North Tyneside General Hospital

Hip fractures and analgesia - Royal Victoria Infirmary

2011 Traumatic cardiac arrest - Sunderland Royal Hospital

### **Quality Improvement Projects**

**2020 – Code Red Trauma:** the challenging nature of 'code red' trauma cases: multiple disciplines, rarity & clinical instability has meant that improvements required a multi-directorate approach. In-situ simulations with multiple specialities identified areas of change: universal 'code red trauma' trolleys were created, surgical trays were simplified and additional equipment sourced.

**2018 – Improving procedural sedation within ED:** poor performance in RCEM audit mandated a change in practice. Changes made include development of sedation checklist and documentation, additional nasal capnography available in resus. Audit cycle 1 completed September 2018, audit cycle 2 to be completed by January 2019

#### Presentations and Publications

I have presented various audits and case presentations at local and regional level. I have regularly attended and presented at the trauma MDT held every month at the RVI.

I written a chapter for the forthcoming book "Emergency Point of Care Ultrasound" published in 2017.

#### Teaching Experience

Teaching is an important skill for any emergency medicine consultant; I have taken an active role in both formal and informal teaching sessions. I have received excellent feedback from both junior colleagues and consultants for my teaching style and content.

I am a higher specialist trainer and have been for the last 8 years. I have received good feedback from my trainees so far.

I am mentoring a nurse practitioner as she undergoes her prescribing course

I have been an educational supervisor for Foundation trainees and a clinical supervisor for GP VTS trainees and have received positive comments from Justin Burdon (TPD at NGPTP) for my role in helping doctors requiring educational support.

I organised the regional HST teaching schedule for 4 years, ensuring that the teaching sessions cover all aspects of the HST curriculum. My time in this role coincided with an improvement in the regional pass rate for the FRCEM examination.

I am an instructor for both ATLS and APLS and regularly teach in the region on these courses.

I was involved in trauma training for the nursing staff while working at the Royal Victoria Infirmary and at Sunderland Royal Hospital. I have been a mentor for nurses sitting the Northumbria Advanced Clinical Skills for Nurses (NACAN) course, a course to enable them to become Nurse Practitioners.

#### Information Technology Skills

I have a good knowledge in the use of Word, Excel and PowerPoint.

I am proficient in the use of medical databases such as Medline and EMBASE.

#### Personal Interests

I have always been an active person and use exercise to manage my stress levels; as I have long been aware of, and enjoyed, the positive all-round benefits this brings. Previously, I was a keen dingy sailor and undertook some distance cycling challenges such as the coast-to-coast cycle route from Whitehaven to Tynemouth. However, my personal life has undergone significant change in the past 2 years after I became a father. Amongst many other benefits, fatherhood has vastly improved my skills in dealing with unpredictability and organisation. As a result of the change to our family,

I've also been able to employ my adaptive skills and now mostly train on my turbo trainer at home – allowing me to still set myself and achieve physical challenges, whilst balancing this with my work and home responsibilities. I've been proud to make this continue to work well.

## References

Name	Address	E-mail
Dr. Jason Urron	Emergency Department Royal Victoria Infirmary Queen Victoria Road Newcastle upon Tyne Tyne & Wear NE1 4LP	Jason.urron@nuth.nhs.uk
Mr. Jim Connolly	Emergency Department Royal Victoria Infirmary Queen Victoria Road Newcastle upon Tyne Tyne & Wear NE1 4LP	jim.connolly@nuth.nhs.uk
Mr. Malcolm Jones	Emergency Department Sunderland Royal Hospital Kayll Road Sunderland Tyne & Wear SR4 7TP	malcolm.jones@chsft.nhs.uk