

**2021 -2023**



**East Lancashire Hospitals**  
NHS Trust

**2021-2023 Academic Foundation Programme**

# **ACADEMIC FOUNDATION PROGRAMME**

**Academic Foundation Lead**  
**Miss Suzanne Gawne**  
Director of Medical Education and Associate Medical Director



## General Information

There are 3 Academic Foundation Programme (AFP) posts at East Lancashire Hospitals NHS Trust.

The East Lancashire Hospitals NHS Trust and Clinical Commissioning Groups provide services to the population of East Lancashire of approximately 510,000 people. Geographically it covers the Blackburn, Burnley, Hyndburn, Pendle, Ribble Valley and Rossendale areas. The posts are based in the Royal Blackburn Hospital and Burnley General Hospital.

The Trust offers a comprehensive range of “in” and “out-patient” services and provides outpatient clinics from a range of visiting tertiary specialities. There are full diagnostic services available at both sites and both sites are also fully supported by Postgraduate Education facilities, fully equipped libraries and subsidised staff gyms. The Trust also has a number of tertiary services which it provides to a larger area including Maxillofacial surgery and Hepatobiliary surgery who, amongst other specialities, undertake procedures using the De-Vinci Robot.

The Royal Blackburn Hospital new build opened in July 2006 and provides a full range of hospital services to adults and children. The new building includes state of the art in-patient facilities, centralised out-patients department, new operating theatres and Emergency Department.

Burnley General Hospital is East Lancashire Hospitals NHS Trust's site which specialises in planned (elective) treatment and most recently opened the new Urgent Care Centre Building. In November 2010, the Trust opened the £32 million Lancashire Women and Newborn Centre which includes East Lancashire's centralised consultant-led maternity unit along with a Level 3 Neonatal Intensive Care Unit, a midwife-led birth centre and a purpose-built gynaecology unit. Maternity services have been awarded the (RCM) Royal College of Midwives' Mothercare Maternity Service of the Year Award and have also been voted the best unit for Gynaecology training in the Country.

## The Foundation Programme at ELHT

There are 69 F1 and 69 F2 posts making ELHT a large Foundation Programme. There are 3 Foundation Programme Directors who take a very hands-on approach and are always keen to receive feedback about your training. There are regular Foundation Forums built in to protected teaching programme for you to give and receive feedback.

The Foundation teaching programme takes part every Thursday afternoon 1300-1700 for F1 doctors and every Thursday morning 0800-1200 for F2 doctors. Attendance is compulsory and you are protected from clinical activities in this time. Absences are authorised for study leave, annual leave and when on night duty or zero hours. The Teaching Programmes are continually updated and reviewed in response to the feedback given by Foundation Doctors. Towards the end of the F1 year and the beginning of the F2 year, the teaching programme also includes career sessions. The Teaching Programme is delivered not only by

consultants and trainees from within the Trust but by external companies to deliver aspects of the curriculum that can be difficult to deliver by traditional methods.

We host a Poster Day for Foundation trainees and invite other Trusts to give Foundation Doctors an opportunity to present their audits or quality improvement projects at a regional event.

Foundation doctors have the opportunity to take on extra roles such as Foundation Rep, Lessons Learnt Lead, Surgical Skills Foundation committee member, QI Foundation leads, Undergraduate Teaching lead roles and lead organiser for above mentioned Poster Day. Trainees are also encouraged to take part in a number of audits and service improvement projects. The Foundation Teaching Programme also includes peer led teaching and case presentations so that all F1 doctors have the opportunity to present and receive feedback.

## Academic Posts

All academic posts are linked with Lancaster University as the Higher Education Institute (HEI). All Academic Foundation Doctors (AFD) can apply for honorary researcher status at Lancaster University to have access to the University facilities and library privileges. Each AFD will have 1:1s with a nominated academic lead at Lancaster University to identify individual learning and project/research opportunities. All AFDs will have access to the Lancaster research catalogue which lists current research projects and opportunities for collaboration with academic staff.

AFDs will attend Academic Teaching sessions hosted by Lancaster University and attended by AFDs from East Lancashire Hospitals, Lancashire Teaching Hospitals and University Hospitals of Morecambe Bay.

There are other HEI opportunities with UCLan Medical School including access to teaching, assessments and examining. In addition, UCLan has a wide range of research opportunities for which the trainees are encouraged to get involved.

The rotations include a variety of 4 month placements. Specific academic tracks can be seen below.

Each of the three trainees will have a half day a week protected for the academic aspect of their training throughout both the F1 and F2 years. In each of the tracks there will be one four month block (highlighted in red) in which the trainee has a full day protected for the academic component. Each will have the usual Clinical and Educational Supervisors with an additional Academic Supervisor as named below. Miss Suzanne Gawne, Director of Medical Education and Associate Medical Director will be responsible overall for the Academic Foundation Programme and ensuring that the academic trainees are achieving their learning objectives.

Track 3: F1: Emergency Medicine / General Medicine (Gastro) / **Breast Surgery**  
F2: Neonatal / O&G / GP  
Academic focus: **Leadership and Management**, Supervisor: Dr Ian Stanley

Track 4: F1: General Medicine (Gastro) / T&O / **Anaesthetics**  
F2: General Surgery / General Psychiatry / GP  
Academic focus: **Research**, Supervisor: Dr Anton Krige

Track 6: F1: Breast Surgery / General Psychiatry / General Medicine (Cardio)  
F2: Emergency Medicine / GP / Gen Medicine (endocrine)  
Academic focus: **Medical Education**, Supervisor: Miss Suzanne Gawne

\*Please note that your rotation order may differ from the above. Please contact the FPA for East Lancashire Hospitals NHS Trust, Rocio Martin via [FoundationDoctors@elht.nhs.uk](mailto:FoundationDoctors@elht.nhs.uk) for further information.

## Detailed Post Descriptions

### Leadership and Management Academic (Track 3)

Lead: Dr Ian Stanley, Deputy Medical Director and Consultant Anaesthetist

Email: [ian.stanley@elht.nhs.uk](mailto:ian.stanley@elht.nhs.uk)

<b>Track 3 (2xFP 1xAFP) LEADERSHIP</b>	General (Internal) Medicine	General Surgery	Emergency Medicine	Neonates	Obstetrics and Gynaecology	General Practice
Additional Post Description	Gastroenterology	Breast				
Post Location	RBH	BGH	RBH (will include element of Urgent Care setting at BGH)	BGH	BGH	TBC (East Lancs Catchment area)

Dr Ian Stanley is the supervisor for this track and is involved in numerous Trust-wide Quality Improvement and patient safety initiatives, along with taking a lead management role at Trust Board level. The Academic Foundation Doctor would be expected to also lead on a number of these projects and present their work at National or International meetings with the aim of achieving publication in peer-reviewed journals.

Opportunities for learning and development are listed below. This list should be discussed with your supervisor to individualise your own personal development plan. Those in bold are considered mandatory.

#### Education Theory / Personal Development

- **20 credits of PG Cert at Edge Hill University: HEA4117 module in Medical Leadership:**  
<https://www.edgehill.ac.uk/health/cpd-modules/medical-leadership-hea4117/>
- Undertake relevant Modules from the ELHT Learning Hub such as:
  - o **Managing Change**
  - o **Promoting Effective Team working with Belbin**
  - o **Negotiating skills**
  - o **Resilience**
  - o How to present
  - o Mindfulness
  - o Presenting with Confidence
  - o Introduction to Teaching and Course Design
  - o Facilitation Skills
  - o Coaching Conversations
  - o Mentorship training via <https://mentoring.nwacademy.nhs.uk/>
  - o Advanced Communication Skills

#### Leadership

- Year Rep for F1 and F2 including attendance at FWG and Regional trainee forums
- **Role modelling to peers**
- **Lessons Learnt lead** and other activities such as Poster Day event lead and careers events lead.
- **Attendance at morbidity and mortality meetings**
- **Attendance at Trust Management meetings**
- **Shadowing leaders in the workplace**

#### Research relevant to field

- Undertake research project in Trust or taken from portfolio with Lancaster University

#### Quality Improvement

- **Undertake a QI project at both local and Trust level**
- **Member of Foundation QI group (offer leadership and support to peer Foundation doctors in the Trust and undertake additional training with Haelo)**

## Clinical Research Academic (*Track 4*)

*Lead: Dr Anton Krige, Director of Research & Development, Co-lead Critical Care Speciality Group Cumbria & Lancs CLRN, Clinical Lead Enhanced Recovery Programs East Lancashire, Consultant in Intensive Care & Anaesthesia*

Email: [Anton.Krige@elht.nhs.uk](mailto:Anton.Krige@elht.nhs.uk)

<b>Track 4 (2xFP 1xAFP) RESEARCH</b>	General (Internal) Medicine	Trauma and Orthopaedic Surgery	Anaesthetics	General Surgery	General Psychiatry	General Practice
Additional Post Description	Gastro			HPB		
Post Location	RBH	RBH	RBH	RBH (will include 5 days at BGH during on call block)	LCFT	TBC (East Lancs Catchme nt area)

Dr Krige leads a research team consisting of a research fellow and a research nurse dedicated to clinical research at ELHT. There are also three further research nurses funded by the network to assist with multicentre studies. The research academic foundation doctor would become part of this team. East Lancashire NHS Trust is a leading Trust in recruitment to NIHR multicenter portfolio studies trials with 150 such studies currently active in the Trust. Please see the attached portfolio of studies in which Dr Krige is the Chief Investigator, with one of these the beneficiary of a NIHR RfPB grant and thus on the national portfolio, and in which the research academic foundation doctor would have access to. Dr Krige is also a member of the Steering Committee for the UCLAN Clinical Trials Unit providing good links to UCLAN University.

## Opportunities for learning and development

Opportunities for learning and development are listed below. This list should be discussed with your supervisor to individualise your own personal development plan. Those in bold are considered mandatory.

- **Good Clinical Practice Course**
- Recruit to National trials - including information giving, recruitment and data collection
- **Involvement with local studies**
- Involvement with a number of trials at different stages to include
  - o **Data collection**
  - o **Analysis of data**
  - o **Research Ethics and NHS permission application process**
  - o Performing a literature search on a topic
  - o Developing a protocol for a new proposed study
  - o Grant application preparation alongside Dr Krige's grant writer
  - o Recruitment to already approved studies/trials
  - o Dissemination of results including manuscript preparation, meeting abstract and poster preparation and presentation
- **Liaise with the R&D department and gain insight in to their role**
- **Attendance at quarterly local meetings for research leads - trial activity discussed and educational presentations with the aim being to improve lead researchers performance and improve recruitment and development of new trials and with potential for grant opportunities.**
- Attendance at National Meetings such as UK Critical Care Trials Forum at which there are educational research orientated workshops to attend
- Opportunity to undertake relevant research courses such as the statistics course provided by UCLAN, study days provided by R&D department and if applicable, a module from the PG Cert in Clinical Research provided by Lancaster University.

### Medical Education Academic (Track 6)

Lead: Miss Suzanne Gawne, Director of Medical Education and Associate Medical Director, East Lancashire NHS Trust

Email: [Suzanne.Gawne@elht.nhs.uk](mailto:Suzanne.Gawne@elht.nhs.uk)

Track 6 (2xFP 1xAFF) MEDICAL EDUCATION	General (Internal) Medicine	General Surgery	General Psychiatry	Emergency Medicine	General (Internal) Medicine	General Practice
Additional Post Description	Cardiology	Breast			Endo & Diabetes. Weekly community placement in a multidisciplinary E&D clinic on Mon PM at Rossendale Community Care Centre.	
Post Location	RBH	BGH	LCFT	RBH (will include element of Urgent Care setting at BGH)	RBH	TBC (East Lancs Catchment area)

Miss Gawne leads a number of projects being undertaken within medical education and will supervise the medical education academic foundation doctor to undertake projects/research of their choice. She herself has completed a Masters in Clinical Education and has experience in delivery, assessment, curriculum development and leadership in medical education.

#### Opportunities for learning and development

Opportunities for learning and development are listed below. This list should be discussed with your supervisor to individualise your own personal development plan. Those in bold are considered mandatory.

#### Education Theory / Personal Development

- **20 credits of Edge Hill University PG Cert: Teaching and Learning in Clinical Practice module (CPD 4454)** <https://www.edgehill.ac.uk/courses/teaching-and-learning-in-clinical-practice/tab/modules/>
- Undertake relevant Modules from the ELHT Learning Hub such as:
  - o **Resilience**
  - o **Introduction to Teaching and Course Design**
  - o **Coaching Conversations**
  - o How to present
  - o Negotiating skills
  - o Mindfulness
  - o Presenting with Confidence
  - o Facilitation Skills
  - o Mentorship training via <https://mentoring.nwacademy.nhs.uk/>
  - o Advanced Communication Skills
  - o Managing Change
  - o Promoting Effective Team working with Belbin

#### Delivery of Education

- **Postgraduate teaching sessions; lead regular peer teaching sessions and feedback faculty in the teaching programme in F2**
- Undergraduate teaching sessions; lecture/small group/mentoring/shadowing
- Multidisciplinary teaching: opportunistic (PAs, ACPs, Nursing staff and trainees etc.)

### Curriculum Understanding/Development

- **Developing intended learning outcomes and curriculum mapping for teaching sessions delivered by you**
- Undergraduate curriculum development opportunities with UCLan & Lancaster
- Ongoing project work in PGME – identifying and updating learning outcomes and mapping to the curriculum for training posts.

### Assessment

- **Undertake training as OSCE examiner with UCLan and take part in undergraduate OSCE examinations (minimum 2)**

### Educational Leadership

- Year Rep for F1 and F2 including attendance at FWG and Regional trainee forums
- **Role modelling to peers**
- **Lessons Learnt lead** and other activities such as Poster Day event lead and careers events lead.

### Educational Research

- Undertake research project taken from portfolio with Lancaster University

## FOUNDATION PROGRAMME JOB DESCRIPTIONS

Please refer to your Academic Track to identify the FY1 and FY2 placements that you will undertake as part of your Academic Programme. All job descriptions are provided below

### YEAR ONE (FY1)

<p><b>Post:</b> FY1 Anaesthetics</p>
<p><b>The department:</b> There are 45 Consultant Anaesthetists, including 14 Intensive Care Consultants, over 25 Core Trainee &amp; Specialty Trainees &amp; NCCGs There are 11 theatres on the Blackburn Site and 12 theatres at Burnley. 20 Critical care beds &amp; 4 Post Op Care beds</p>
<p><b>Main duties of the post:</b></p> <ul style="list-style-type: none"> <li>• Critical Care based team work for the majority of the 4 month post, with a secondment into theatres at the end of the attachment.</li> <li>• Hand-over ward round starts at 8am in the resource room on side A, with Consultants &amp; trainees in attendance</li> <li>• The workload is then allocated between staff, with full Consultant Supervision of all F1             <ul style="list-style-type: none"> <li>○ Activities</li> <li>○ Daily review of all patients, history &amp; examination</li> </ul> </li> <li>• Daily Teaching Ward rounds usually commence mid-morning</li> <li>• Lunchtime tutorials on Tuesdays, F1s expected to contribute</li> <li>• Wednesday lunchtimes Grand Round &amp; Share to Care meeting</li> <li>• Afternoon activities include Practical procedures on patients as required, clerking in post-op             <ul style="list-style-type: none"> <li>○ Patients</li> </ul> </li> <li>• Ongoing audit projects to be continued</li> <li>• Discharge letter programme to be maintained by F1</li> <li>• Opportunity to pursue projects of interest by individuals is supported &amp; encouraged</li> <li>• Outreach &amp; Emergency Anaesthetist shadowing as arranged</li> </ul>
<p><b>Typical working pattern in this post</b></p> <p><b>See Work Schedule</b></p> <ul style="list-style-type: none"> <li>• No Unsupervised activity at any time by Foundation Doctor</li> <li>• Annual &amp; Study leave to be signed by Ed Supervisor</li> </ul> <p>Any absences must be informed to Elaine Filbin, Anaesthetic Secretary on 01254 733744 as soon as is possible</p>

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

**Specific Learning Objectives for this Post:**

- Works as part of the critical care team and theatre team and appreciates the roles of each member of the team in patient care.
- Observes consultations with patients and families about management decisions and appreciates the views of the patient are central to every decision.
- Understands the importance of communication skills in difficult situations or when difficult decisions are made
- Appreciate the importance of patient safety check lists and protocols in theatre and critical care
- Take part in ward rounds and on critical care
- Assess patients theatre under supervision
- Exposure to medical devices and equipment used for general anaesthesia and in critical care.
- Improves skills of airway management and managing an acutely unwell patient
- Opportunity to manage patients with abnormal physiological parameters and improve knowledge of managing organ failure
- Improves knowledge of the management of the unconscious patient
- Manages pain
- Manages sepsis
- Recognises and manages the critically ill patient
- Understands the principles and takes part in discussions regarding end of life care and DNAR orders
- Appreciates the importance and anticipates the impact chronic disease can have on treatment choices
- Understands the importance of addressing nutritional needs in critically ill patients
- Improve investigative interpretation skills including blood results, ABGs, CXR, ECG, PFTs

**Post:**  
FY1 Breast Surgery

**The Department:**

The breast surgery unit comprises 5 Consultant breast surgeons of whom 4 do breast reconstruction. The department also provides a breast screening service for the same population served by East Lancashire NHS Trust. There is 1 Staff Grade, 1 ST trainee, 1 FY2 and 2 FY1s trainees in the unit.

**Main duties of the post:**

The FY1 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient's medical record. They will have opportunity to work with the consultants in outpatients clinics and will become familiar with assessing patients who have been referred to the breast services along with seeing follow up patients. Trainees will also attend at least one theatre session each week where they will have the opportunity to assist in breast cancer surgery including reconstructions and will have the chance to practice their suturing technique. They are expected to prepare for and present patients at the weekly MDT meeting. Each trainee will also be expected to undertake an audit project during the placement. Please see below for the suggested learning objectives for this post which have been mapped to the curriculum.

**Typical working pattern in this post e.g ward rounds, clinics, theatre sessions:**

*The timetable is produced in house and varies from week according to who is around. However, a typical would week include the following:*

Daily: 0800 Ward round Gynae ward

Mon: am JLM Theatre  
pm JLM theatre

Tues: am Ward cover/MDT prep  
pm MDT

Wed: am JI OSC  
pm SG theatre

Thurs: am JI Theatre  
pm FY1 Teaching

Fri: am SG r/v clinic  
pm Ward cover/MDT prep

**There may or may not be out of hours work included.**

**Where the post is based:**

Burnley General Hospital

**Clinical Supervisor(s) for the post:**

Miss Julie Iddon, Miss Suzanne Gawne, Mr A Topps

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

## Specific Learning Objectives for this Post

*(other generic aspects of the Foundation Programme curriculum such as 'professionalism' will also be encountered and can be mapped accordingly in the trainees portfolio)*

- To meet the members of the breast care team and understand their individual roles and how each contributes to the care of breast patients
- Gain a greater understanding of the day to day activity of a breast surgeon and breast trainee
- Take part in a one stop clinic where all new breast patients are seen and assessed
  - Know the criteria for referral of patients on a breast cancer pathway and for routine referral
  - Know how to assess a patient with breast symptoms
- Take part in review clinics where results are given to patients and treatment options are discussed along with routine follow up patients
- Appreciate the importance of addressing survivorship in patients following breast cancer treatment
- Understand the importance of communication skills in difficult situations
- Observe breaking bad news
- Observe the importance of patient understanding in decision making when there is more than one option available to patients
- Observe how management plans for breast cancer are individualised to take in to account the patient's needs and wishes
- Appreciates how co-morbidity can affect the options available to patients considering reconstruction
- Appreciate the holistic approach to breast surgery
- Be part of the theatre team and scrub in to assist surgical procedures
- Observes patients being consented for surgery and obtains valid consent after appropriate training
- Appreciate the importance of patient safety checks in theatre
- Follow an aseptic technique and understand the additional measures taken when using implants and foreign material in breast reconstructions
- Subcutaneous injections and suturing (+/- any other procedural skills that arise such as female catheterisation)
- Contributes to the MDT meeting
- Take part in ward rounds reviewing the post-operative patients
- Maintain accurate patient notes, produce discharge summaries in a timely efficient manner and dictate letters when in the OPD
- Takes part in the discharge planning process
- Participate in an audit project and present it at the breast audit meeting

<p><b>Post:</b> FY1 Cardiology</p>
<p><b>The Department:</b> The cardiology department comprises of 6 consultants who work in paired teams and look after the patients in their particular team. In addition to the ward they also cover the coronary care unit. The junior team consists of 3FY1, 1FY2, 4CT and 1 ST doctor.</p>
<p><b>Main duties of the post:</b> The FY1 doctor is responsible for the day to day care of the patients on the ward (approx. 25 bed ward). They assist ward rounds and carry out the necessary jobs including TTOs, referrals, cardiology investigation requests etc. They also conduct mini ward rounds for those patients who have not been consultant reviewed that day. It is a very busy role but there will be the opportunity to observe angiograms and attend clinics. Every week there is a team meeting where one of the juniors will have the opportunity to present a case and do a short teaching session.</p>
<p><b>Typical working pattern in this post e.g ward rounds, clinics, theatre sessions:</b>            Mon:        am Ward round Dr RK Singh &amp; Dr SK Singh                             pm Jobs and juniors ward round            Tues:        am Ward round Dr Banyprasad                             pm Jobs and juniors ward round            Wed:         am Ward round Dr Garg                             pm Jobs and juniors ward round            Thurs:      am Ward round Dr Bala                             pm FY1 Teaching            Fri:          am Ward round Dr McDonald                             Pm Jobs and juniors ward round</p> <p><b>There may or may not be out of hours work included.</b></p>
<p><b>Where the post is based:</b> Royal Blackburn Hospital</p>
<p><b>Clinical Supervisor(s) for the post:</b> Dr J McDonald, Dr Bala, Dr R Singh</p>

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### Specific Learning Objectives for this Post

*(other generic aspects of the Foundation Programme curriculum such as 'professionalism' will also be encountered and can be mapped accordingly in the trainees portfolio)*

- To meet the members of the cardiology team and understand their individual roles and how each contributes to the running of the cardiology dept
- Gain a greater understanding of the day to day activity of a cardiologist and cardiology trainee
- Take part in ward rounds and conduct mini ward rounds
- Know the criteria for treating patients with CCF, IHD, arrhythmias
- Know how to assess a patient with cardiology symptoms and be able to identify those patients who become unstable and need coronary care intervention
- Understanding treatment options and discharge planning
- Understand the importance of communication skills in difficult situations
- Appreciate the holistic approach to cardiology patients
- Observe how angiograms are done, what the different results mean and how that may impact on a patients treatment and prognosis
- Observes patients being consented for CABG and angiogram
- Work with nurses, pharmacists and health care assistant to ensure optimal care for the patients
- Maintain accurate patient notes, produce discharge summaries in a timely efficient manner and dictate letters when in the OPD
- Takes part in the discharge planning process
- Participate in an audit project

**Post:**

FY1 – Emergency Medicine

**The Department:**

The Dept. of Emergency Medicine comprises of 3 sites namely the Emergency Dept. at RBH, Urgent Care Centre at RBH, an urgent Care Centre at BGH & a Minor Injury Unit at Accrington Victoria Hospital.

The Dept. has 10 Consultants in Emergency Medicine, 1 of whom is Part Time and all except 3 do on call. 3 of the 10 consultants are long term locums. They have interests in Resuscitation, Critical Care, Medical Management and Leadership, IT, Mental health, Education & Training, Clinical Audit, Patient safety & Governance and Paediatrics. 7 are trained to GMC level 1 & 2 to be CS and ES.

There are also a number of Specialty doctors Senior clinical fellows and ST4-6 trainee doctors and with backgrounds ranging widely from surgery to education. Many senior doctors are keen to teach FY1's and when time pressures allow will take advantage of teaching opportunities that arise from clinical cases seen by the FY1 Dr in the department.

All seniors review cases themselves as part of discussion of cases the FY1 trainee have seen. They also undertake SLE's & are able to sign off their core procedures.

The Dept. sees approx. 184,000 patients per annum.

The Dept. serves the catchment population of 550,000 of East Lancashire.

The Dept. is closely linked with tertiary services of Neurosurgery in Preston, Cardiothoracic Surgery in Blackpool, Burns and Plastic Surgery in Preston & Wythenshawe, and Paediatric tertiary services at Manchester Children's Hospital.

**The type of work to expect and learning opportunities**

There is a great feeling of camaraderie amongst the entire clinical team, and opportunities to manage unwell patients, with the ready back-up of senior doctors often only a cubicle away when needed is a valuable experience.

FY1's will be seeing all kinds of emergencies and non-emergencies; from trauma, minor injuries, emergency medical presentations to a variety of GP (i.e. chronic disease management) and psychiatric presentations of disease in both adults and children. In addition FY1's will become skilled in managing patient expectations, and will see the value of explaining diagnoses, timeframes and medications to patients thoroughly, which will be a valuable experience applicable to all other fields of medicine.

F1s will learn patient safety, coping with stress, organization, communication and team working all of which help them in becoming better doctors of tomorrow.

F1s should be able to fulfill almost all the areas in their curriculum in particular all under section 3.

**Where the placement is based:**

Royal Blackburn Hospital – ED and UCC.

**Clinical Supervisor(s) for the placement:**

Mr S Bhattacharyya, Dr C Thomson, Dr Mr M Tan, Dr A Kirby, Dr B Sarin, Dr H Turner, Dr N Prater, Dr R Garlapati, Dr R Uppalapati, Dr S Siva, Dr Z Tahir

**Main duties of the placement:**

The FY1 doctor is responsible with other staff for the care of patients with all kinds of emergencies, trauma and non-trauma in both adults and children attending the ED and UCC, obtaining input from seniors and other specialties to inform their management, supervising the initial management and ensuring the patient is admitted or discharged appropriately, along with maintenance of their medical record. They will have opportunity to work with the Consultants and take graded responsibility of the patients. They are expected to attend FY1 teaching programme (13.00-17.00) every Thursday.

**Typical working pattern in this post e.g. ward rounds, clinics, theatre sessions**

Mon: 08:00 to 16:00 - ED/09.00-17.00 & 10.00-18.00 – RUCC or ED

Tues: 08.00-16.00 – ED/ 12.00-20.00 – ED/09.00-17.00 & 10.00 to 18:00 – RUCC or ED/ 14.00-00.00 & 18.00-00.00 - ED

Wed: 08.00-16.00 & 10.00 to 18:00 & 12.00-20.00 - ED/ 09.00-13.00 & 10.00-18.00 - RUCC or ED/14.00-00.00 - ED

Thurs: 08.00-17.00 - ED/09.00-13.00 – ED/RUCC/ incl.

13:00 to 17:00 in FY1 Teaching at PG Dept.

Fri: 08.00-16.00 & 10:00 - 18:00 - ED/09.00-17.00 & 10.00-18.00 – RUCC/ED

Work on weekends either 08:00-20:00 or 10:00-22:00 - ED.

**There may or may not be out of hours work included.**

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### Specific Learning Objectives for this Post

The overall educational objectives of the FY1 year are to provide the trainee with the knowledge, skills and attitudes to comply with the FY1 curriculum objectives and to be able to:

- Take a structured and focused history and examine a patient systemically or systematically
- Identify and synthesise problems to make a clinical decision
- Learn to Prescribe safely under supervision
- To do a DOPS for the 1<sup>st</sup> time they administer IV Morphine to a patient as analgesia
- Assist and perform minor procedures, possibly including injection of local analgesia, suturing, basic wound care, assisting in manipulating joints and re-locating dislocations.
- Keep an accurate and relevant, legible, contemporaneous records and complete the mandatory data sets.
- Appreciate the importance of clinical coding to ensuring information reaches the patient's general practitioner and the trust is reimbursed for the costs associated with assessing and treating the patient in the ED or UCC.
- Manage time and clinical priorities effectively
- To handover effectively as per SBAR method to colleagues.
- Communicate effectively with patients, relatives, colleagues and staff, including obtaining specialty input at a high level, for instance potential neurosurgical emergencies with the neurosurgery registrar on-call at RPH or obtaining CT imaging urgently to exclude haemorrhagic stroke.
- Use supporting resources on the floor, on line, evidence, guidelines and audit to benefit patient care e.g Toxbase, NICE, BTS etc.
- To participate in an audit project (this will be assigned by the department)
- Act in a professional manner at all times, cope with time and other non-clinical pressures while acting as an advocate for patient safety and clinical care, to be punctual, to be well presented, to look after your health,
- Cope with ethical and legal issues which occur during the management of patients with emergencies
- Seek help from seniors at all times - good, accessible senior support at all times is a major benefit to FY1's working in ED - all cases seen should be discussed with a senior
- Maintaining infection control procedures at all times
- Be safe
- Cope with stress
- Become lifelong learners
- To complete the e-learning modules allocated & demonstrate evidence on HORUS at the CS meetings.
- To meet with CS and ES
- To get SLE's done and learn from them
- To get appropriate core procedures signed off
- To ensure HORUS engagement with reflection, curriculum mapping, TAB

**Post:**

FY1 Gastroenterology

**The Department:**

The gastroenterology department comprises 10 Consultants, 2 of which are based on the wards. There are outpatient clinics and endoscopy (OGD, ERCP, EU, colonoscopy) lists to attend. There are 4 ST doctors, 3 CMTs, 1 JCF, 1 FY2 and 6 FY1s.

**Main duties of the post:**

The FY1 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient's medical records. Foundation doctors have the opportunity to attend outpatient clinics and endoscopy (OGD, ERCP, EU, colonoscopy) lists and OPD ascetic drain clinics. FY1's will also be expected to present at 'gastro club' and attend Grand Round.

Typical working pattern in this post includes a daily ward round on the gastro ward. Occasionally ward round may start later or be postponed to the afternoon if there is a morning list. If it is the latter, the F1 doctor is expected to review the patients prior to the ward round to anticipate problems needing to be addressed. There are endoscopy lists and OP clinics daily which you are restored to attend.

**There may or may not be out of hours work included.**

**Typical working pattern in this post e.g ward rounds, clinics, theatre sessions:**

*The timetable is produced in house and varies from week according to who is around. However, a typical would week include the following:*

Daily: 0800 Ward round Gastro ward

Occasionally ward round may start later or be postponed to the afternoon if there is a morning list. If it is the latter, a morning ward round is done by the F1 to anticipate problems needing to be addressed

There are endoscopy lists and OP clinics daily.

**There may or may not be out of hours work included.**

**Where the post is based:**

Royal Blackburn Hospital

**Clinical Supervisor(s) for the post:**

Dr Lynch, Dr H Hatab, Dr I Gkikas, Dr J Collum, Dr S Soteriadou, Dr V Mahesh

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### Specific Learning Objectives for this Post

*(other generic aspects of the Foundation Programme curriculum such as 'professionalism' will also be encountered and can be mapped accordingly in the trainees portfolio)*

*Each objective should be achieved to the standard laid out in the outcomes for F1 and F2 years stated in the curriculum*

- To meet the members of the gastro team and understand their individual roles and how each contributes to the care of patients
- Gain a greater understanding of the day to day activity of a gastroenterologist
- To understand the management of gastro emergencies
- To recognize the patient who is unwell, initiate appropriate treatment and involve a senior as necessary
- To develop a holistic approach to the patient whose current condition arises on a background of multiple factors – medical but also social and psychological
- Understand the importance of communication skills in difficult situations
- Observe breaking bad news, discussion of DNAR
- Observe the importance of patient understanding in decision making when there is more than one option available to patients
- Subcutaneous injections, suturing, ascetic drains and taps
- Maintain accurate patient notes, produce discharge summaries in a timely efficient manner and dictate letters when in the OPD
- Takes part in the discharge planning process

<p><b>Placement:</b> Psychiatry (ICU) F1</p>
<p><b>The Department:</b> Psychiatric Intensive Care Units (male ward in Pendleview Unit, Royal Blackburn Hospital, female ward in Victoria Wing, Burnley General Hospital)</p>
<p><b>The type of work to expect and learning opportunities:</b> Psychiatric Intensive Care Units (PICUs) care for psychiatric patients who are too unwell to be nursed on open wards. The PICUs are locked wards; all patients are detained under the Mental Health Act 1983. Patients are usually transferred from other inpatient wards but can be admitted directly from the community, police stations and prisons. PICU patients are at risk of deliberate self-harm or suicide and or pose a risk to the safety of others. The F1 will become familiar with a range of severe mental disorders including psychosis (schizophrenia, mania, drug-induced episodes), affective disorders (mania) and personality disorders (emotionally unstable, paranoid, dissociated). The clinical work includes spending 1:1 time with patients as well as routine jobs such as arranging investigations, writing discharge summaries and ward rounds. The F1 is expected to manage physical complaints and refer to other secondary care teams for more complex problems. There are ample learning opportunities including significant time spent with the Consultant. The F1 will participate in the weekly academic programme in the department. Time is available to develop audit and research skills.</p>
<p><b>Where the placement is based:</b> Burnley General Hospital and Royal Blackburn Hospital</p>
<p><b>Clinical Supervisor(s) for the placement:</b> Dr. M Shivalingam, Consultant Psychiatrist</p>
<p><b>Main duties of the placement:</b></p> <ul style="list-style-type: none"> <li>ward work, ward rounds, physical Health assessment/ referral</li> </ul>
<p><b>Typical working pattern in this placement:</b> <u>Morning (9-1):</u> Mon: Ward round (Blackburn) Tues: Ward round (Burnley) Wed: Ward work/ Admin work Thurs: Ward round (Blackburn) Fri: Ward round (Burnley) <u>Afternoon (1-5)</u> Mon: Ward work/audit Tues: Ward work Wed: Psychiatry academic programme Thurs: F1 teaching programme Fri: Audit/ Admin/ Weekly supervision</p>
<p><b>Employer information:</b> Lancashire Care NHS Foundation Trust / ELHT</p>

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### **Specific Learning Objectives for this Post**

*(Other generic aspects of the Foundation Programme curriculum such as 'professionalism' will also be encountered and can be mapped accordingly in the trainees portfolio)*

- To work as a member of a multidisciplinary mental health team and understand the individual roles and contributions to the effective care of psychiatric patients
- To gain a better understanding of the day-to-day activities of a Consultant Psychiatrist and psychiatry trainee
- To learn how to work with and delegate tasks to other professionals
- To learn how to prioritise tasks
- To be able to take a psychiatric history from a patient
- To be able to perform a mental state examination on a patient
- To be able to order relevant investigations to exclude physical causes of psychiatric symptoms
- To understand when to seek the support of senior colleagues
- To have a basic understanding of the concept of risk
- To participate in ward reviews - to give updates on patients and take part in discussions about investigations, diagnoses and treatment plans
- To take part in Care Programme Approach (CPA) meetings and appreciate the multidisciplinary team nature of diagnostic formulation, risk assessment and management
- To be able to formulate short-term treatment plans under the guidance of senior colleagues
- To be familiar with first line pharmaceutical treatment options for symptoms of psychosis, mania, depression and anxiety
- To have an understanding of psychological treatment options in affective disorders, anxiety disorders and personality disorders, and referral pathways
- To have an appreciation of longer term treatment options in hospital and community settings
- To gain an understanding of the Mental Health Act and observe patients being detained and released
- To observe the workings of a Mental Health Review Tribunal and understand the interface between medicine and law. To contribute to reports for the Mental Health Review Tribunal
- To be able to assess capacity and have a basic understanding of the Mental Capacity Act
- To understand the principle of medical confidentiality
- To be able to write accurate notes in the medical record
- To complete ward discharge letters within 48 hours of discharge
- To understand the role of liaison psychiatric services and when to refer patients to other secondary care services
- To have an understanding of the role of community mental health services in the monitoring and management of mentally ill patients in the community
- To have an understanding of the role of primary care services in the monitoring and management of mentally ill patients in the community
- To take part in prison visits to assess prisoners referred for assessment and/or treatment in a hospital setting
- To understand the importance of communication skills when talking to patients
- Understand how to handle complaints and escalate concerns
- To take part in weekly supervision sessions with the Clinical Supervisor
- To take part in the weekly academic programme
- To teach medical students attached to the team
- To participate in audit and research

**Post:**  
FY1 Trauma & Orthopaedics

**The department**

- Large department with 20 consultants and 30 junior grade medical staff members.
- Multidisciplinary set up with close cooperation with Orthogeriatricians, Trauma Coordinators and Allied Health Professionals on a daily basis.
- 2 daily multidisciplinary ward rounds.
- Split site working with Trauma surgery at the RBH site and Elective surgery at the BGH site.
- Wards RBH: B22 (Hip Fracture ward) B24 (Trauma Ward)
- Ward BGH: 15 Elective ward
- Purpose built Fracture clinic suite with 8 consultation rooms (RBH)
- Theatres RBH: Theatre 10 and 11 (Trauma)
- Theatres BGH: 5 Elective Theatres (Wilson Hey Complex)

**Main duties of the post**

**Day Job**

- Ward-based inpatient care to Trauma patients at RBH site.
- Support ward-based FY2 Doctors.
- Participate in daily Orthopaedic Consultant ward round when based on ward B24.
- Participate in daily Orthogeriatric Consultant ward round when based on ward B22.
- Attend daily teaching in the Trauma Meeting when based on B24 ward.
- Attend daily multidisciplinary hand over when based on ward B22
- Attend Monday afternoon Orthopaedic trainees teaching programme.
- Attend Monthly Audit and three monthly Morbidity and mortality meetings.
- Attend Orthopaedic Foundation Doctors forum every month.
- Complete 1 audit project during post.
- Attend Fracture and Elective clinics (aim for 4 in post)
- Participate in theatre sessions on BGH and RBH site per (aim for 4 in post).

**On Call**

- No on call commitment in FY1 post
- Shadow on call with FY2 doctor (aim for minimum of 1 in post)

**Typical working pattern:**

- Normal working day 8am to 4pm.
- Leave at 3pm one day a week per rota as compensation for FY1 teaching.
- Day starts with Trauma meeting when based on ward B24.
- Day starts with multidisciplinary hand over when based on ward B22.
- Participation in Orthopaedic or Orthogeriatric daily multidisciplinary ward round.
- Mornings are always ward-based but flexibility to attend theatre and clinic sessions in the afternoon based on workload.
- Aim to shadow on call with FY2 doctor for experience in the management of acute trauma patients.

**Where the post is based:** Royal Blackburn Hospital

**Clinical Supervisor(s) for the post:**

Mr A Zubairy, Mr A Sloan, Mr R Mohil, Mr S Hadi, Mr K Sharpe and Mr H Marynissen

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

## YEAR TWO (FY2)

**Post:** FY2 Diabetes and Endocrinology

**The department:** Staff consists of Consultants, ST trainees, FY2 and FY1s trainees. The department is spread across three main medical wards; D3, D5 and C10.

**Main duties of the post:** The FY2 doctor is responsible with other staff for the ward care of patients and the maintenance of the patient's medical record. They will also have the opportunity to regularly lead the ward round. Each trainee will be expected to attend out-patient clinics to seek educational opportunities and undertake SLEs under consultant supervision.

Each trainee will also be expected to undertake an audit project during the placement. There is departmental teaching each Tuesday at which there is the opportunity to present cases.

**Where the post is based:**  
Blackburn Royal Hospital

**Clinical Supervisor(s) for the placement:** Dr M D Littley

**Main duties of the placement:** The FY2 doctor is responsible with other staff for the ward care of patients and the maintenance of patient's medical record. Trainees are expected to attend ward rounds every day and will also have the opportunity to lead the ward round. Trainees will participate in multi-disciplinary team meetings, assessment of patients, attending ward rounds, ordering investigations.

**Typical working pattern in this placement:**

Depending on your rota, you will start by attending your allocated ward which may change regularly. The day usually starts with reviewing new or sick patients and putting out blood forms, followed by the ward round. The afternoon involves completing the jobs from the ward round and reviewing the bloods.

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### **Specific Learning Objectives for this Post**

- To meet the members of the diabetes and endocrine team and understand their individual roles and how each contributes to the care of patients
- Gain a greater understanding of the day to day activity
- Understand the importance of communication skills in difficult situations
- Observe breaking bad news
- Observe the importance of patient understanding in decision making when there is more than one option available to patients
- Participate in an audit project and present it at audit meeting
- Know how to assess a patient on the ward and how to manage them
- Follow an aseptic technique when doing invasive procedures e.g. bloods and subcutaneous injections
- Take part in ward rounds reviewing all the patients
- Maintain accurate patient notes, produce discharge summaries in a timely efficient manner
- Manage those patients who have raised EWS and know when to call for senior help
- Manage patients who are suffering with pain
- Observe consultants making decisions on patients for DNAR
- Assess and manage patients with different nutritional needs, with the help of nutrition nurses Learn how to manage those with nasal feeding tubes, nil by mouth or those with PEG in place
- Takes part in the discharge planning process

**Placement:**

FY2 – Emergency Medicine

**The Department:**

The Dept. of Emergency Medicine comprises of 3 sites namely the Emergency Dept. at RBH, Urgent Care Centre at RBH and an Urgent Care Centre at BGH & a Minor Injury Unit at Accrington Victoria Hospital.

The Dept. has 10 Consultants in Emergency Medicine, 1 of whom is Part Time and all except 3 do on call. 3 of the 10 consultants are long term locums. They have interests in Resuscitation, Critical Care, Medical Management and Leadership, IT, Mental health, Education & Training, Clinical Audit, Patient safety & Governance and

Paediatrics. 7 are trained to GMC level 1 & 2 to be CS and ES.

There are also a number of SAS doctors, Senior clinical fellows and ST4-6 trainee doctors with backgrounds ranging widely from neurosurgery to education. Many senior doctors are keen to teach Foundation doctors and when time pressures allow will take advantage of teaching opportunities that arise from clinical cases seen by the Foundation doctor in the department.

All seniors review cases themselves as part of discussion of cases the FY1 trainee have seen. They also undertake SLE's & are able to sign off their core procedures.

The Dept. sees approx. 184,000 patients per annum.

The Dept. serves the catchment population of 550,000 of East Lancashire.

The Dept. is closely linked with tertiary services of Neurosurgery in Preston, Cardiothoracic Surgery in Blackpool, Burns and Plastic Surgery in Preston & Wythenshaw, and Paediatric tertiary services at Manchester Children's Hospital

**The type of work to expect and learning opportunities:**

There is a great feeling of camaraderie amongst the entire clinical team, and opportunities to manage unwell patients, with the ready back-up of senior doctors often only a cubicle away when needed is a valuable experience.

FY2's will be seeing all kinds of emergencies and non-emergencies; from trauma, minor injuries, emergency medical presentations to a variety of GP (ie chronic disease management) and psychiatric presentations of disease in both adults and children. In addition FY2's will become skilled in managing patient expectations, and will see the value of explaining diagnoses, timeframes and medications to patients thoroughly, which will be a valuable experience applicable to all other fields of medicine.

FY2's will be expected to attempt to make clinical decisions after assessment of a patient. Training will be given to develop this skill.

**Where the placement is based:**

Royal Blackburn Hospital – ED and UCC

Burnley General Hospital – UCC

**Clinical Supervisor(s) for the placement:** Mr S Bhattacharyya, Dr C Thomson, Dr Mr M Tan, Dr A Kirby, Dr B Sarin, Dr H Turner, Dr N Prater, Dr R Garlapati, Dr R Uppalapati, Dr S Siva, Dr Z Tahir

**Main duties of the placement:**

The FY2 doctor is responsible with other staff for the care of patients with all kinds of emergencies, trauma and

non-trauma in both adults and children attending the ED and UCC, obtaining input from seniors and other specialties to inform their management, supervising the initial management and ensuring the patient is admitted or discharged appropriately, along with maintenance of their medical record. They will have opportunity to work with the Consultants and take graded responsibility of the patients. They are expected to attend the Dept. (09.00-10.00 on Thursdays) and FY2 teaching programmes (13.00-17.00 on Tuesdays). They should be able to fulfill almost all the areas in their curriculum in particular all under section 3.

**Typical working pattern in this placement:** Example timetable

There may or may not be out of hours work included.

Mon: 14.00-00.00, 16.00-00.00 - ED

Tues: 12.00-20.00 – BUCC

Wed: 08.00-16.00 & 16.00-00.00 – ED/ 12.00-00.00 - BUCC

Thurs: 08.00-16.00 inc. FY2 Teaching 0800-1200

Fri: 10:00 - 18:00 & 16.00-00.00 & 22.00-08.00 - ED/ 08.00-16.00 - BUCC 1300-1700

Work in weekends are either 08:00-20:00 in BUCC or 20.00-08.00 in ED

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### **Specific Learning Objectives for this Post**

The overall educational objectives of the FY2 year are to provide the trainee with the knowledge, skills and attitudes to comply with the FY2 curriculum objectives and to be able to:

- Take a structured and focused history and examine a patient systemically or systematically
- Identify and synthesise problems to make a clinical decision
- Prescribe safely
- Assist and perform minor procedures, possibly including injection of local analgesia, suturing, basic wound care, assisting in manipulating joints and re-locating dislocations.
- Keep an accurate and relevant, legible, contemporaneous records and complete the mandatory data sets.
- Appreciate the importance of clinical coding to ensuring information reaches the patient's general practitioner and the trust is reimbursed for the costs associated with assessing and treating the patient in the ED or UCC.
- Manage time and clinical priorities effectively
- To handover effectively as per SBAR method to colleagues.
- Communicate effectively with patients, relatives, colleagues and staff, including obtaining specialty input at a high level, for instance potential neurosurgical emergencies with the neurosurgery registrar on-call at RPH or obtaining CT imaging urgently to exclude haemorrhagic stroke.
- Use supporting resources on the floor, on line, evidence, guidelines and audit to benefit patient care e.g Toxbase, NCE, BTS
- To participate in an audit project (this will be assigned by the department)
- Act in a professional manner at all times, cope with time and other non-clinical pressures while acting as an advocate for patient safety and clinical care, to be punctual, to be well presented, to look after your health,
- Cope with ethical and legal issues which occur during the management of patients with emergencies
- Seek help from seniors at all times - good, accessible senior support at all times is a major benefit to FY2's working in ED - all cases seen should be discussed with a senior
- Maintaining infection control procedures at all times
- Be safe
- Cope with stress
- Become lifelong learners
- To complete the e-learning modules allocated & demonstrate evidence on HORUS at the CS meetings
- To attend Dept. teaching
- To meet with CS and ES
- To get SLE's done and learn from them
- To ensure HORUS engagement with reflection, curriculum mapping, TAB

**Post:**  
General Practice FY2

**The Department:**  
Individual Details provided at induction

**Main duties of the post:**

FY2 has own clinics allocated and is expected to see and manage patients under supervision from GP.

Diagnosis, examination, appropriate investigations if necessary and management. Responsible for patient follow up if required, continuity of patient care.

If referrals are required or admissions are needed then FY2 should arrange/facilitate.

Home visits daily.

Listed below are some of the learning experiences available in most GP practices. Please discuss these with your supervisor.

- On the day appointments
- Home Visits
- Midwifery
- Pharmacist
- Women's Health Procedures
- Counsellor
- Community Drug Clinic
- Baby Clinic
- Alcohol Services
- Phlebotomy
- 1:1 Coaching
- Adult Family Planning
- Teenage Drop In (Family Planning)

**Outside Agencies**

GPs have excellent relationships with a number of outside agencies, such as:-

- Chemist
- Community Matron
- Nursing/Retirement Homes
- Health Care Workers
- Specialist clinics
- 

Please discuss a placement with your mentor – if there are any specific areas you would like to visit then please ask your supervisor who will try to accommodate your request where ever possible.

Typical working pattern in this post **e.g ward rounds, clinics, theatre sessions:** *This is an example timetable*

Mon: am Shadowing/running practice nurse clinics  
pm admin afternoon  
Tues: am morning surgery  
pm afternoon surgery  
Wed: am morning surgery

<p>Thurs: pm afternoon off am Foundation Teaching at RBH pm late afternoon surgery finishing 6.30pm</p> <p>Fri: am Tutorials at practice pm afternoon surgery</p> <p>Generally daily home visits at lunch time</p> <p><b>No out of hours work during this placement.</b></p>
<p><b>Where the post is based:</b> Individual Details provided</p>
<p><b>Clinical Supervisor(s) for the post:</b> Individual details provided</p>

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### Specific Learning Objectives for this Post

*(other generic aspects of the Foundation Programme curriculum such as 'professionalism' will also be encountered and can be mapped accordingly in the trainees portfolio)*

- To work within the general practice team and understand the different team members individual role in the provision of patient care.
- Improve understanding of how general practice works – both from a management level in relation to QOF and external bodies but also on a local level within the practice.
- Develop and understanding in regards to presentation and management of a wide range of common general practice presentations.
- Appreciate the importance of addressing survivorship in patients following cancer treatment and appreciate the effect of chronic disease on patients.
- Manage chronic diseases within the community and exacerbations of chronic disease.
- Run GP clinics assessing patients and discussing management plans.
- Develop and understand the importance of communication skills within a consultation and improve communication skills in difficult situations
- Develop individualized management plans for patients considering their needs and wishes
- Perform procedures such as taking blood and administering injections
- Take the opportunity to assist in minor dermatological surgical procedures
- Appreciate the importance of public health campaigns and contribute to health promotion.
- Maintain accurate patient notes and document interactions with patients and relatives in the notes whether a consultation or a telephone interaction
- Participate in an audit project
- Participate in teaching tutorials held at the practice

**Post:**

FY2 General Surgery; Hepatobiliary and pancreatic (HPB) Surgery

**The Department:**

HPB surgery is the busiest of the general surgical specialties and turns over a very high volume of patients. The team consists of 5 consultant HPB/general surgeons, 5 ST3+ (or equivalent), 1 CT1 doctor, 2 FY2 doctors and 5 FY1 doctors (4 banded 1B and 1 unbanded). The consultants and senior members of the team conduct daily ward rounds. The junior members of the team are mainly based on the surgical ward and there are also have patients on intensive care, paediatrics and other medical wards. They also have the added responsibility of working on call in the Surgical Triage Unit (STU) on a rotational basis.

**Main duties of the post:**

*Ward role*

The FY2 doctor is responsible with other staff for the general ward care of surgical patients, the population of the surgical patient list and the maintenance of the patient's medical record. During the placement the FY2 will become familiar with regularly assessing a large variety of surgical patients from the following categories:

- Acute/emergency surgical patients requiring rapid assessment and treatment
- Acutely unwell patients (pre and post operatively)
- Elective surgical patients
- Post operative patients

Trainees will have the opportunity to attend clinic and theatre (particularly during the allocated days in Burnley General Hospital) sessions.

*STU role*

The FY2 role on STU involves the initial clerking, accurate medical record keeping and assessment of all general surgical patients. The FY2 is also expected to formulate an immediate action plan and effectively hand over to a ST3+ or equivalent or consultant in order to finalise treatment.

Out of hours, the FY2 is expected to provide medical cover to surgical patients within the hospital. Please see below for the suggested learning objectives for this post and the critical care week which have been mapped to the curriculum.

**Typical working pattern in this post:**

*Daily ward round:* 0800 prompt start. Support to FY1 doctors.

*Thursday Foundation Teaching:* 0800 - 1200

*STU Role:*

*Day shift:* 0800 - 2030

*Night shift:* 2000 - 0830

**There may or may not be out of hours work included.**

**Where the post is based:** Royal Blackburn Hospital

**Clinical Supervisor(s) for the post:** Miss A Kausar, Mr D Chang, Mr D Subar, Mr G Sgourakis

*It is important to note that this job description is a typical example of your placement and may be subject to change to meet the demands of the trainee or service.*

### Specific Learning Objectives for this Post

- To meet the members of the general surgical team and understand their individual roles and how each contributes to the care of surgical patients, particularly the upper gastrointestinal patients
- Understand the importance of communication skills especially in difficult situations
- Observe/contribute to breaking bad news
- Observe the importance of patient understanding in decision making when there is more than one option available to patients
- Observe how management plans for surgical patients are individualised to take in to account the patient's needs and wishes
- Appreciates how co-morbidity can affect the options available to patients considering surgery
- Appreciate the holistic approach to general surgery
- Consider the ethical and legal aspects of a patient's care, in particular patients who have limited mental capacity
- Be part of the theatre team and scrub in to assist surgical procedures where possible
- Observes patients being consented for surgery and obtains valid consent after appropriate training
- Appreciate the importance of patient safety checks in theatre
- Follow an aseptic technique
- Subcutaneous injections and suturing (+/- any other procedural skills that arise such as catheterisation)
- Contribute to the MDT meeting
- Take part in ward rounds reviewing the post-operative patients
- Maintain accurate patient notes, produce discharge summaries in a timely efficient manner
- Takes part in the discharge planning process
- Participate in an audit project and present it at the surgical audit meeting
- Provide teaching and learning opportunities for medical students/other healthcare professionals within the general surgical team
- Use clinical situations to direct and develop self-directed learning
- Implement and keep up to date with national and local surgical and medical guidelines
- Participate in daily ward round and complete all necessary jobs that arise from it
- Assess, triage and treat acutely unwell surgical patients in an on-call/out of hours setting
- Participate in/initiate life saving treatment/resuscitation to the critically unwell patient
- Understand the clinical, ethical and legal implications of a do not attempt resuscitation (DNAR) order and any other advanced directives
- Understand how long term conditions and co-morbidities can effect treatment and patient recovery
- Work with members of the multidisciplinary healthcare team to provide holistic care to the surgical patient, particularly during the recovery phase
- Inform and accurately disseminate medical information to patients and their families in order to promote health and provide knowledge from which informed decisions on treatment can be made

**Placement:**

FY2 in Neonatal Medicine: 4 months

**The Department:**

The Department of Neonatology is part of the Family Care Division and based at the Lancashire Women and Newborn Centre in Burnley.

The birth suite caters for over 5000 births annually and the level 3 neonatal unit admits over 500 babies per year. There are 6 consultant neonatologists, 7 middle grade doctors and 12 junior posts. The department works closely with the busy Paediatric Department based at the sister site, the Royal Blackburn Hospital. Outpatient services are provided at both Blackburn and Burnley sites. Nearby Manchester and Liverpool tertiary paediatric and neonatal services provide support and clinical links.

**The type of work to expect and learning opportunities:**

FY2 trainees in neonatology are mainly ward-based but their work is varied:

- Emergency work: attendance at deliveries where resuscitation of newborn is expected or required, attending to sick infants on NICU and postnatal wards.
- Routine work: Performing newborn physical examinations on postnatal wards, reviewing patients requiring additional input over and above that of normal healthy infant in parents' care
- Practical skills to be learnt such as capillary blood sampling, intravenous cannulation and venepuncture, central line insertion, lumbar puncture, intradermal and intramuscular injection, prescribing for neonates

The post presents opportunities for the trainee to:

- Take a history, collate information from medical notes and examine a patient
- Diagnose and manage patients
- Take part in newborn resuscitation and in assessing and stabilizing the acutely ill/collapsed patient
- Reassess patients after initiating treatment
- Seek senior help appropriately
- Prescribe safely
- Ensure good basic nutritional care
- Keep an accurate and relevant medical record
- Manage time and clinical priorities effectively
- Communicate effectively with parents, families and colleagues, including sharing bad news
- Use evidence, guidelines and audit to benefit patient care
- Ensure and promote patient safety
- Act in a professional manner at all times
- Manage issues of consent
- Learn about ethical and legal issues which occur during the management of difficult patients including discussion of end-of-life decisions
- Plan for discharge
- Educate parents effectively
- Reduce the risk of cross-infection
- Become life-long learners and teachers, have the opportunity to present cases for discussion
- Understand and apply the basis of maintaining good quality care
- Develop good team working skills and liaison between disciplines
- Understand child protection issues and procedures

**Where the placement is based:**

Trainees are based predominantly at Lancashire Women and Newborn Centre, Burnley with 1 week's experience in paediatric outpatients and in-patient unit at the Royal Blackburn Hospital

**Clinical Supervisor(s) for the placement:**

Dr A Cox, Dr I Moritiwon, Dr J Shihab, Dr J Murali, Dr A Paria, Dr A Sur

**Main duties of the placement:**

FY2s are expected to work with consultants and middle grades in each area on the NICU starting with the daily ward round and then attending to problems that arise. They are responsible for keeping the medical record updated, including the electronic neonatal system that is shared region wide and further. Trainees will hold in rotation the emergency bleep for deliveries and acute events and initiate resuscitation as required. They are expected to examine newborn infants as part of the National Screening Programme and assess and manage patients with any problems on the postnatal wards. Trainees are well-supervised throughout their placement, including out-of-hours.

Trainees are expected to attend Foundation Teaching on a weekly basis as well as participate in the Departmental Teaching programme and get involved in departmental audits.

**Typical working pattern in this post e.g. ward rounds, clinics, theatre sessions**

Daily: 09:00-09:30 Handover  
09:30-11:30 Ward round or  
postnatal examinations  
11:30-16:30 Ward work  
16:30 – 17:00 handover

In addition

Mon: Attendance at paediatric clinic arranged ad hoc  
Wed: 11:30-12:45 Grand Round  
Thurs: 08:00- 12:00 Foundation Teaching  
Fri: 12:45-14:00 Share to Care Meetings

1 Week built into rota for paediatric experience at Royal Blackburn Hospital comprising outpatient clinics, clerking patients in children's observation and assessment unit, ward rounds and ward work on children's ward and high dependency unit

*On call requirements:* 10-person full shift pattern. Out-of hours trainee carries emergency bleep

**There may or may not be out of hours work included.**

*It is important to note that this description is a typical example of your placement and may be subject to change.*

**Specific learning objectives for this post:**

The post presents opportunities for the trainee to:

- Take a history, collate information from medical notes and examine a patient
- Diagnose and manage patients
- Take part in newborn resuscitation and in assessing and stabilizing the acutely ill/collapsed patient)
- Reassess patients after initiating treatment
- Seek senior help appropriately
- Prescribe safely
- Ensure good basic nutritional care
- Practical skills such as venepuncture, cannulation, IM injections
- Keep an accurate and relevant medical record
- Manage time and clinical priorities effectively
- Handover to other members of the team and highlight priorities
- Communicate effectively with parents, families and colleagues, including sharing bad news
- Use evidence, guidelines and audit to benefit patient care
- Ensure and promote patient safety
- Act in a professional manner at all times
- Manage issues of consent
- Learn about ethical and legal issues which occur during the management of difficult patients including discussion of end-of-life decisions
- Plan for discharge
- Educate parents effectively
- Reduce the risk of cross-infection
- Become life-long learners and teachers, have the opportunity to present cases for discussion
- Understand and apply the basis of maintaining good quality care
- Develop good team working skills and liaison between disciplines
- Understand child protection issues and procedures

**Post:**

FY2 Obstetrics and Gynaecology

**The Department:**

The Lancashire Women and Newborn Centre is the culmination of more than five years' work and brings together all of East Lancashire's Women's and Newborn services, enabling the delivery of the best possible care. The state-of-the-art building located on the Burnley General Hospital site includes:

- A Central Birth Suite providing hi-tech facilities for complex births.
- An adjoining midwife-led Birth Centre which offers a relaxed environment where healthy women can go through labour naturally and at their own pace in comfortable rooms with en-suite facilities.
- A Neonatal Intensive Care Unit caring for premature newborns from across North and East Lancashire and providing high level care including whole-body cooling treatments for the most poorly babies.
- A purpose-built Gynaecology Unit incorporating separate areas for services such as oncology, urogynaecology, fertility treatment and termination of

There are 15 Consultants, ST trainees, GPSTs, 2 FY2s and 2 FY1s. This post provides ample opportunity to work within the multidisciplinary team.

**Main duties of the post:**

The typical working day will involve either outpatient clinics or theatre morning and afternoon sessions or day time cover of the birth suite and or assessment units for maternity or Gynae patients.

F2 doctors in the dept. attend outpatient clinics, theatre lists and deal with both obstetrics and gynaecology emergencies. They will participate in the on call rota on a full shift basis 1 in 8. There is protected teaching time for the foundation teaching program, and O&G teaching sessions running every Friday with opportunity to be involved and present cases.

There are specialist clinics in fertility, urogynaecology, oncology and medical antenatal clinics.

**Typical working pattern in this post e.g ward rounds, clinics, theatre sessions:**

The timetable is produced in house and varies from week to week.

We are divided into teams to carry out ward rounds every morning on the gynae ward from 08.30-09.00

Mon: am LSCS  
pm On call  
Tues: am AN/PN ward  
pm Antenatal clinic  
Wed: am Antenatal clinic  
pm GAU  
Thurs: am Foundation Teaching  
pm Theatre  
Fri: am Gynae OP clinic  
pm Obs & Gynae Teaching

**There may or may not be out of hours work included.**

**Where the post is based:** LWNC, Burnley General Hospital

**Clinical Supervisor(s) for the post:** Mrs F Hamer, Mr M Aty, Mrs K Bhatia and Miss Fiona Clarke

*It is important to note that this description is a typical example of your placement and may be subject to change.*

### Specific Learning Objectives for this Post

- To meet the members of the obstetric and gynaecological team and understand their individual roles and how each contributes to the care of patients
- Gain a greater understanding of the day to day activity of an obstetrician/gynaecologist and trainees
- Assess new and follow up patients in clinics and acutely
  - Know the criteria for referral of patients on a 2 week rule and further management
  - Know how to assess a patient with gynaecological/ pregnancy- related symptoms
  - Antenatal care
- Take part in review clinics where results are given to patients and treatment options are discussed along with routine follow up patients
- Understand the importance of communication skills in difficult situations
- Observe breaking bad news
- Observe the importance of patient understanding in decision making when there is more than one option available to patients
- Observe how management plans for gynaecological cancer are individualised to take in to account the patient's needs and wishes
- Be part of the theatre team and scrub in to assist surgical procedures using aseptic technique
- Observes patients being consented for surgery and obtains valid consent after appropriate training
- Appreciate the importance of patient safety checks in theatre
- Suturing (+/- any other procedural skills)
- Take part in ward rounds reviewing the post-operative patients and enable discharge
- Maintain accurate patient notes, produce discharge summaries in a timely efficient manner and dictate letters when in the OPD
- Takes part in the discharge planning process
- Participate in an audit project and present it at the audit meeting

<b>Job Title</b>	FOUNDATION YEAR 2 TRAINEE DOCTOR IN PSYCHIATRY (FY2)		
<b>Clinical Supervisor</b>	Dr Judith Ngowi		
<b>Hospital Address</b>	Hill View Royal Blackburn Hospital		
<b>Trust</b>	LANCASHIRE CARE NHS FOUNDATION TRUST		
<b>Speciality</b>	OLDER ADULT PSYCHIATRY	<b>Sub Speciality</b>	N/A

**Description of Placement**

Older Adult Inpatient Unit – Hurstwood Ward. It is a mixed ward (male and female and consists of 18 beds. The unit serves patients over 65 with functional illnesses; psychotic and affective illnesses, personality disorders. It also caters for patients with mild to moderate organic problems (Delirium, Dementia, Parkinson’s Disease and Lewy Body Dementia).

The ward has 2-Consultant; 1-Consultant covers the inpatients (7 patients) and currently holds the role of DMD/CCIO for 2 ½ sessions The other Consultant has 11 patients and has 2 sessions with the Hospital Liaison Team which covers Royal Blackburn Hospital, and the 4-Community Hospitals within East Lancashire.

We also have GP CT trainees and core trainees in psychiatry in addition to the Trust Doctor and the FY1 Trainee.

We have a Psychologist attached to the ward and the MDT consists of Occupational Therapists, and the medical and nursing teams.

**Roles and Responsibilities of the Trainee**

**Good clinical Care**

I expect the trainees to treat patients as the ‘centre of care’ within any consultation. This being a ward which admits very vulnerable and frail older patients; trainees are expected to be able to prioritise patients’ needs, treat them with respect, dignity and privacy. They are encouraged to give them autonomy and confidentiality.

Clinical work includes spending 1:1 time with patients as well as routine jobs such as arranging investigations, writing discharge summaries. FY2 doctors are expected to present in MDT reviews and weekly huddles. Attend patient CPA Meetings (Care Plan Approach) and also to give feedback of patients’ progress in the ward. FY2 is expected to participate as part of the team including the visiting GP to manage physical health issues and refer to other secondary care teams for more complex problems. They are also expected to give a hand over every evening before they leave the ward and also in the morning.

Trainees will also be expected to recognise when patients safety is at risk and be able to inform the team to order to address how to reduce any risk posed to the patients.

The trainees are constantly supervised and encouraged to seek any advice or help from their Clinical Supervisor and there are ample learning opportunities with a significant amount of time spent with the Consultant.

Trainees are also supported by the core trainees (GP, psychiatry core trainee & also the Trust doctor who is attached to the ward).

**Maintaining Good Medical Practice**

Trainees are expected to develop good communication skills with the patients; team members and relative effectively in relation to patient’s needs.

Trainees during their induction course are taught how to use the ECR and encouraged to record any contacts with the patients, clinical discussions and also record as a ‘note’ if there has been any discussion with a relative, or any team member.

Trainees are also encouraged to complete a discharge summary and transfer letters in a timely manner.

### **Relationship with patients and communication**

The doctor will have abundant opportunity to interact with acutely unwell patients and their families. He/she will have the opportunity to observe clinical interviews with the patients and their families conducted by the clinical supervisor and learn on a regular basis. The doctor's communication skills and interactions are also supervised. He/she will also have opportunities to learn about these issues in the local teaching session.

### **Working with colleagues**

Trainees are encouraged to constantly interact with their colleagues within the ward and also within the unit itself. They have also to cover each other during leave and absences; they are encouraged to work within a MDT setting and also respect other team members and contribute in any discussion.

As part of their appraisal they are encouraged to request formal feedback from the team.

### **Teaching and Training**

The doctor is expected to attend the FY2 training on Tuesday afternoons and the local academic teaching programme in psychiatry on Wednesday afternoons. During the local teaching programme the doctor is expected to present a case conference a journal/a specific topic as per the timetable. He/she is expected to prepare well in advance and discuss it constructively with his/her clinical supervisor before presenting it on the day under supervision. The doctor is also expected to read theoretical psychiatry on a regular basis and participate constructively in ward rounds, which has a large teaching component.

As the clinical supervisor is also a recognised educational supervisor for a FY2 Track, he is periodically requested to teach FY1 doctors. The FY2 doctor participates actively in this teaching exercise.

We also periodically get medical students from the American University of the Caribbean. The FY2 doctor is expected to participate along with the other psychiatric doctors from Hurstwood Ward in medical student teaching.

### **Acute care**

The Older Adult Inpatient Unit is for acutely ill older patients. Patients with severe depression are often prescribed ECT hence the trainees are expected to be involved during their recovery period and also assessing them during the acute phase.

Trainees also encounter patients who are having transient ischaemic attacks or even heart attack within our unit and trainees as part of the induction are to attend ILS and are encouraged to be involved in any cardiopulmonary resuscitation should this happen within our unit.

FY2 are usually the 1<sup>st</sup> on-call and therefore have an opportunity to encounter psychiatric emergencies including; self-harm, alcohol intoxication and also sometimes personality disorder as their on-call involves adult patients also.

### **Core Clinical Work**

Before the doctor starts regular clinical work he/she undergoes a one day local induction meeting and a one day Trust induction meeting. He/she also has a ward level induction. The doctor's main duties involve clerking in all the patient's admitted to the ward, conducting physical examinations and appropriate investigations, reviewing/monitoring mental state and medications of patients regularly, meeting carers/family members, completing discharge summaries in a timely manner as per LCFT protocol and participating constructively in MDT reviews and the departmental teaching programme. The doctor is also on the on-call rota for psychiatry. The doctor cross covers colleagues in their absence. The doctor also is on a rota for giving ECT.

The doctor is expected to attend weekly supervision meetings, lasting 1 hour, with the clinical supervisor. The doctor has access to/can seek advice from senior colleagues, including the clinical supervisor, during his/her working time. In addition senior members of the multi-disciplinary team at Hurstwood Ward are also a valuable source of support.

The doctor has access to a well-stocked library and the internet. The doctor also has the support of the consultant's (clinical supervisor) secretary.

### **On Call**

The FY2 doctor works on shifts of a 1 in 10 pattern. The FY2 doctor does resident first tier on-call at Burnley General Hospital. Whilst on-call he/she attends to calls from Hodder Ward, Edisford Ward and Dunsop and Stockbeck which is a PICU. The FY2 doctor has the support of a second tier on-call doctor who is either a Specialist Trainee Year 4-6 in Psychiatry or a Staff Grade Doctor in Psychiatry and a third tier on-call doctor who is a Consultant Psychiatrist.

### **Academic Activities**

The doctor is expected to attend the FY2 training on Tuesday afternoons and the local academic teaching programme in psychiatry on Wednesday afternoons. During the local teaching programme the doctor is expected to present a case, a journal /a specific topic as per the timetable. He/she is expected to prepare well in advance and discuss it constructively with his/her clinical supervisor before presenting it on the day under supervision. The doctor is also expected to read theoretical psychiatry on a regular basis and participate constructively in ward rounds, which has a large teaching component.

As the clinical supervisor is also a recognised educational supervisor for a FY2 Track, he is periodically requested to teach FY1 doctors. The FY2 doctor participates actively in this teaching exercise.

We also periodically get medical students from the American University of the Caribbean. The FY2 doctor is expected to participate along with the other psychiatric doctors in Hurstwood Ward in medical student teaching.

### **Facilities**

The doctor has access to a well-stocked library and the internet. The doctor also has the support of the consultant's (clinical supervisor) secretary. The doctor will also have access to a room which is specially allocated to trainee doctors where they can do their administrative and clinical work.

### **Supervision Arrangements**

The doctor is expected to attend weekly supervision meetings, lasting 1 hour, with the clinical supervisor. The doctor has access to/can seek advice from senior colleagues, including the clinical supervisor, during his/her working time. In addition senior members of the multi-disciplinary team at Pendleview are also a valuable source of support.

### **Teaching/Academic Experience**

The doctor is expected to attend the FY2 training on Tuesday afternoons and the local academic teaching programme in psychiatry on Wednesday afternoons. During the local teaching programme the doctor is expected to present a journal/a specific topic as per the timetable. He/she is expected to prepare the case conference or the journal well in advance and discuss it constructively with his/her clinical supervisor before presenting it on the day under supervision. The doctor is also expected to read theoretical psychiatry on a regular basis and participate constructively in ward rounds, which has a large teaching component.

As the clinical supervisor is also a recognised educational supervisor for a FY2 Track, he is periodically requested to teach FY1 doctors. The FY2 doctor participates actively in this teaching exercise.

We also periodically get medical students from the American University of the Caribbean. The FY2 doctor is expected to participate along with the other psychiatric doctors in Pendleview Unit in medical student teaching.

### **Audit/Research Opportunities**

The FY2 doctor is expected to complete an audit project during the course of his/her FY2 training year. In addition during the doctor's posting in Psychiatry the doctor has the opportunity to participate in local audit projects/surveys that the clinical supervisor and other doctors in his team are involved in. These projects are in general psychiatry and liaison psychiatry

***Management Opportunities***

The FY2 doctor is expected to vicariously learn management skills through observation of the Consultant Psychiatrist and other senior doctors in the team when they chair ward rounds, Care Programme Approach Meetings and MDT Meetings. The FY2 doctor is then encouraged, depending on his/her confidence levels and skill set, to chair such meetings, under supervision.

***Other/Additional Experience***

The FY2 doctor will have the opportunity to attend In-Patient Governance Meetings which are held once a month

***Description of Special Interest Opportunities***

The FY2 doctor will have the opportunity to see patients in the acute site of Burnley General Hospital that are referred for psychiatric consultations. Such type of patients are generally seen by the Liaison Psychiatric Team. The Consultant Psychiatrist (Clinical/Educational Supervisor) of this FY2 doctor is also a Liaison Psychiatrist.