





SPECIALISED FOUNDATION PROGRAMME

Academic Foundation Lead Dr Athanasios Konstantinidis Foundation Programme Director Year 1





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 consultantled 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 90 F1 and 78 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, twilights 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 structure of the teaching sessions vary from lecture-based learning to small group workshops and simulation 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

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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 Foundation doctors have exposure to teaching/training opportunities.

Academic Posts

All academic posts are linked with Lancaster University as the Higher Education Institute (HEI). All Specialised Foundation Doctors (SFD) can apply for honorary researcher status at Lancaster University to have access to the University facilities and library privileges. All SFDs will have access to the Lancaster University's portfolio, which includes a range of research, education and leadership projects and opportunities in collaboration with university-based clinical and/or 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 available opportunities for involvement in teaching and appraising undergraduate students at the University of Central Lancashire. Research opportunities with the UCLAN are also available and the student will be signposted to these opportunities depending on availability at the time of post commencement. The trainee can apply for professional or educational/study leave to attend such activities in line with the Trust's and HEE's professional/study/educational leave guidance.

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 per working 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. Dr Athanasios Konstantinidis, Foundation Programme Director Year 1 will be responsible overall for the Specialised Foundation Programme and ensuring that the academic trainees are achieving their learning objectives. The academic blocks are generally fixed in each of these tracks and changes will only be considered in exceptional circumstances and after discussion with the SFP Lead.

 Track 3: F1: Emergency Medicine / General Medicine (Gastro) / Breast Surgery F2: Neonatal / O&G / GP Academic focus: Leadership and Management, Supervisor: Miss Suzanne Gawne
 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)

F1: Breast Surgery / General Psychiatry / General Medicine (Cardio) F2: Emergency Medicine / GP / Gen Medicine (endocrine) Academic focus: Medical Education, Supervisor: Dr Athanasios Konstantinidis

*Please note that your rotation order may differ from the above. Please contact the Foundation Programme Coordinator for East Lancashire Hospitals NHS Trust, Rocio Martin via <u>FoundationDoctors@elht.nhs.uk</u> for further information.





Detailed Post Descriptions

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Leadership and Management Academic (Track 3)

Lead: Miss Suzanne Gawne, Consultant Oncoplastic Breast Surgeon & Deputy Medical Director, East Lancashire NHS Trust

Email: <u>Suzanne.Gawne@elht.nhs.uk</u>

Track 3 (2xFP 1xAFP) LEADERSHIP	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)

Miss Gawne is the designated supervisor for this track. The personal development goals and expected outcomes will be agreed with the trainee through formal supervision and regular appraisals. Opportunities for involvement are listed below.

- a. 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:
 - Managing Change
 - Promoting Effective Team working with Belbin
 - Negotiating skills
 - Resilience
 - How to present
 - Mindfulness
 - Presenting with Confidence
 - Introduction to Teaching and Course Design
 - o Facilitation Skills
 - Coaching Conversations
 - o Mentorship training via https://mentoring.nwacademy.nhs.uk/
 - Advanced Communication Skills

This module is funded by HEE. For information about enrolment and funding streams please contact the Foundation team at ELHT directly.

- b. Leadership opportunities
 - Year Rep for F1 and F2 and attendance at the regular Foundation Operational meetings and Forums.
- Lessons Learnt Lead with appropriate training and subsequently leading Lessons Learnt Lessons
- and other activities such as Poster Day event lead and careers events lead.
- Attendance at departmental morbidity and mortality meetings
- Acting as subject matter experts in clinical incident investigations
- Attendance at Trust Management meetings
- Shadowing leaders in the workplace
- Supporting Foundation Doctors in developing Leadership Skills.

Research relevant to field

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

Quality Improvement

- Undertake a QI project (departmental/Trust Wide/Regional) with a focus on Leadership







Clinical Research Academic (Track 4)

Lead: Prof Anton Krige, Perioperative Medicine Lead, Clinical Lead Enhanced Recovery Programs East Lancashire, Consultant in Intensive Care & Anaesthesia. Email: <u>Anton.Krige@elht.nhs.uk</u>

Track 4 (2xFP 1xAFP) RESEARCH	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)

Prof Krige supervises a Clinical Research Fellow to deliver local research projects in anaesthesia and critical care. There are also NIHR research nurses who deliver multiple NIHR multicentre studies in anaesthesia and critical care. Prof Krige is local PI for some of those studies. The research academic foundation doctor could become part of that team if their academic interest were in anaesthesia or critical care either assisting with on-going projects, developing their own projects, contributing to the multi-centre studies with the possibility of becoming an NIHR Associate PI for once of them. Experience has demonstrated that it is challenging for an AFY to develop, deliver and complete a prospective clinical research study in their 2 years and better to participate in multiple on-going studies at different stages to gain experience of the full research pathway of high-quality studies. Alongside that they could undertake a systematic review as their own project which is a more realistic route to a successful publication as 1st author during the two years. There is some departmental expertise in systematic review & library support.

If their academic interests and long-term career interest are in another speciality Prof Krige can sign post them & introduce them to academic colleagues in that speciality. That colleague would then be their research supervisor for the specific project with Prof Krige remaining their overall AFY Academic Supervisor with placement meetings to discuss progress and needs from the academic perspective recorded & submitted on the Horus System.

If their interest is in surgical research that department at ELHT has a very strong group known as BRIDGES with ongoing projects and multiple surgeons with an academic interest.

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
 - Data collection
 - Analysis of data
 - Research Ethics and NHS permission application process
 - 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
 - Dissemination of results including manuscript preparation, meeting abstract and poster preparation and presentation
- Liaise with the R&D department and gain insight into their role
- 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.
- All new AFY's are given a research induction to undertake in their 1st month's academic sessions.

Medical Education Academic (Track 6)

Lead: Dr Athanasios Konstantinidis, Foundation Year 1 Training Program Director, Consultant in Paediatrics at Royal Blackburn Hospital and Honorary Lecturer, School of Medicine, University of Central Lancashire

Email: <u>Athanasios.Konstantinidis@elht.nhs.uk</u>

Track 6 (2xFP 1xAFP) 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)

Dr Konstantinidis is the Academic Supervisor for this track. He has completed a Master's Degree in Oncology Research. He also has multiple undergraduate and postgraduate medical educator roles and plenty of experience in supervising postgraduate trainees.

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) <u>https://www.edgehill.ac.uk/courses/teaching-and-learning-in-clinical-practice/tab/modules/</u>
- Undertake relevant Modules from the ELHT Learning Hub such as:
 - Resilience
 - Introduction to Teaching and Course Design
 - Coaching Conversations
 - \circ How to present
 - Negotiating skills
 - o Mindfulness
 - Presenting with Confidence
 - Facilitation Skills
 - o Mentorship training via https://mentoring.nwacademy.nhs.uk/
 - o Advanced Communication Skills
 - o Managing Change
 - Promoting Effective Team working with Belbin





This module is funded by HEE. For information on enrolment and funding streams please contact HEE or the Foundation team directly.

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.)
- The trainee can apply for activities such as OSCE examiner courses, OSCE exams at UCLAN/Lancaster University

Curriculum Understanding/Development

- Developing intended learning outcomes and curriculum mapping for teaching sessions delivered by you
- Undergraduate curriculum development opportunities with UCLan & Lancaster

Assessment

- Undertake training as OSCE examiner with UCLan and take part in undergraduate OSCE examinations

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 a trainee-initiated research project in Trust or taken from portfolio with Lancaster University





Foundation Programme Job Descriptions

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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)

Post:

FY1 Intensive Care Medicine

The department:

- There are 18 Intensive Care Consultants, and 32 doctors/ACCPs from a mix of backgrounds covering the resident on-call rota.
- There are 32 Critical Care beds, across 3 different areas (Sides A, B and C)
- The department has approximately 1600 admissions per year, which is a mix of medical, surgical and tertiary surgical patients

Main duties of the post:

- Critical Care based teamwork for the majority of the 4-month post, with a secondment into theatres at the end of the attachment on request
- Hand-over ward round starts at 8am in the Anaesthetic Seminar Room, with Consultants & trainees in attendance
- The workload is then allocated between staff, with on-site Consultant Supervision of all FY1 activities including:
 - Daily review of all patients, history & examination
 - Procedural skills
- Daily Teaching Ward rounds usually commence mid-morning
- Lunchtime tutorials on Tuesdays, with F1s expected to contribute on a pre-arranged schedule
- Wednesday lunchtime MDT & Share to Care meeting
- Thursday afternoon weekly consultant led Critical Care tutorials
- Afternoon activities include practical procedures on patients as required, completion of ward round jobs and clerking in post-operative patients
- Multiple opportunities to contribute to Audit and QI projects
- Opportunity to pursue projects of interest by individuals is supported & encouraged
- Additional opportunities include:
 - Shadowing the on-call, bleep holding, resident doctor
 - Shadowing the Acute Care Team
 - Anaesthetic experience by attended elective and/or emergency operating lists

Typical working pattern in this post

See Work Schedule

- No Unsupervised activity at any time by Foundation Doctor
- No out-of-hours work
- Annual & Study leave to be signed by Educational Supervisor

Any absences must be informed to Mariam Khan, Anaesthetic Secretary on 01282 804 644 as soon as is possible.

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:

- Critical Care based teamwork for the majority of the 4-month post, with a secondment into theatres at the end of the attachment on request
- Hand-over ward round starts at 8am in the Anaesthetic Seminar Room, with Consultants & trainees in attendance
- The workload is then allocated between staff, with on-site Consultant Supervision of all FY1 activities including:
- Daily review of all patients, history & examination
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- Daily Teaching Ward rounds usually commence mid-morning
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- Wednesday lunchtime MDT & Share to Care meeting
- Thursday afternoon weekly consultant led Critical Care tutorials
- Afternoon activities include practical procedures on patients as required, completion of ward round jobs and clerking in post-operative patients
- Multiple opportunities to contribute to Audit and QI projects
- · Opportunity to pursue projects of interest by individuals is supported & encouraged
- Additional opportunities include:
- Shadowing the on-call, bleep holding, resident doctor
- Shadowing the Acute Care Team
- Anaesthetic experience by attended elective and/or emergency operating lists





FY1 Breast Surgery

The Department:

The breast surgery unit comprises 4 Consultant breast surgeons all of whom do breast reconstruction. The department also provides a breast screening service for the same population served by East Lancashire NHS Trust. There is 1 Specialist Breast Surgeon, 1 Junior Clinical Fellow, 1 ST trainee, 1 FY2 and 2 FY1s trainees in the unit. We also have 2 breast ACPs and 2 trainee ACPs.

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
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Mon	am Theatre
	pm Theatre
Tues	am Ward cover/MDT prep
	pm MDT
Wed	am OSC
	pm Review clinic
Thurs	am OSC
	pm FY1 Teaching
Fri	am Review clinic
	pm SDT
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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 Christina Yip, Mr Inder Kumar, Miss Victoria Rusius

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





FY1 Cardiology

The Department:

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.

Main duties of the post:

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.

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

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Mon:	am Ward round Dr RK Singh & 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
	-

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 J McDonald, Dr K Balachandram, Dr S Banypersad, Dr S Chadaide & Dr T Bragadeesh

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





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 fulfil 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: Dr Rafeeq Sulaiman, Dr Sean Lee and Dr Sukhbir Bhullar



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 1st 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, online, 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

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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 wouldweek 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 Abdelrehman Farag, Dr Charles Grimley, Dr Georgios Marinopoulos, Dr Ioannis Gkikas, Dr Joseph Collum, Dr Khurram Raees, Dr Mostafa Afifi, Dr Venkat Mahesh and Prof Damien Lynch

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





Placement:

Psychiatry F1

The Department:

Old Age Psychiatry. Hurstwood Ward, HillView, Royal Blackburn Hospital

The type of work to expect and learning opportunities:

The F1 doctor will become familiar with a range of severe mental disorders including psychoses, affective disorders, organic disease (including dementia and delirium) and personality disorders. This will involve assessments and investigations, treatments and related legal considerations (MHA and MCA).

The clinical work includes spending 1:1 time with patients as well as routine jobs such as clerking in patients, arranging investigations, writing discharge summaries and participating in weekly MDT meetings, daily huddles (handover with nursing staff) and attending patient's CPA meetings. The F1 doctor is expected to participate as part of the team with other junior doctors, a Physician Associate and nursing staff to manage physical health complaints and refer to other secondary care teams for more complex problems. There is an expectation for the F1 doctors to manage the admission pathway of patients and lead on the monitoring of cardiometabolic risk factors and antipsychotic monitoring.

There are ample learning opportunities including significant time spent with the Consultant. There are opportunities discussed with the doctor to arrange community-based time (either in Memory Assessment Services with the ward Consultants) or there are plenty of other opportunities identified on the Community Menu which is shared with all doctors in training.

The F1 doctor will participate in the weekly academic programme in the department and SDT time is allocated. Time and opportunities are available to develop teaching, audit, quality improvement and leadership skills during the post

Where the placement is based:

Based at Hurstwood Ward, HillView, Royal Blackburn Hospital.

Clinical Supervisor(s) for the placement:

Dr Chris Linton (named CS) & Dr Deo Gurung, Consultant Psychiatrists for Older Adults.

Main duties of the placement:

- Ward work
- Multidisciplinary Team meetings
- Physical Health assessment/ referral
- Admission pathway management
- Antipsychotic monitoring
- Discharge letters

Typical working pattern in this placement:

Typical working pattern in this post

<u> Morning (9-1):</u>

Mon: Weekly MDT – Dr Gurung

- Tues: Huddle, ward work
- Wed: Huddle, ward work, CPA meeting, 1 hour supervision weekly meeting



Thurs:	Huddle, ward work, CPA meeting
Fri:	Huddle, ward work, CPA meeting

Afternoon (1-5)

- Mon: Weekly MDT Dr Linton
- Tues: Huddle, ward work, medical students
- Wed: Psychiatry academic programme (LAP)
- Thurs: F1 teaching programme
- Fri: Huddle, ward work, CPA meeting

On call requirements: No on call

Employer information: ELHT

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 Outcomes 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)

- The Foundation Doctor will have extensive opportunities to develop their capabilities with regard to professional relationships through carrying out assessments and intervention plans with patients and families on the wards and/or community-based clinics. They will be taking part in multidisciplinary meetings. They will have opportunities to offer consultation to other colleagues in the team and be part of team discussions. The doctor in training will be taught these aspects of professionalism through supervision and feedback as well as from formative feedback from observations of their practise.
- The Foundation Doctor will develop skills in prioritising and time management through their day jobs as well as make appropriate use of the medical secretary for administrative tasks. Discharge / clinic letters and other written communication such as referrals to other specialities, will be expected to be produced in a timely fashion and discussed within supervision.
- The doctor in training will be guided to use supervision appropriately as a place for reflective practice. Effective communication with patients and relatives of patients are key components of this post.
- The trainee will complete formative workplace-based assessments including reflection to demonstrate their developing skills in psychiatric assessment, formulation and person-centred holistic management. This will be conducted in supervision, through direct assessments with patients and in team meetings.
- There will be ongoing clinical supervision and discussion of complex cases throughout the trainee's
 placement. There are also daily / weekly MDT meetings, CPAs and complex case meetings where complex
 issues are discussed.
- The trainee will be assessed through carrying out case-based discussions where complexity and uncertainty will be discussed and assessed on a formative level. This will include consideration of self-awareness of the trainee's limitations.
- The Foundation Doctor will gain clinical experiences which will prompt consideration of whether a legal framework would be required to manage patients in light of risks and develop an awareness of the use of Mental Health and Mental Capacity Acts to safeguard the patient and others and to protect human rights. A capacity assessment of the patient's ability to consent to treatment is a mandatory process of clerking of a new patient and is completed on the RiO patient records. Further capacity assessments may be undertaken during in-patient admissions or community clinics, depending on the clinical need. All such experiences will be appropriately supervised and discussed in protected weekly supervision time.
- The trainee will provide health education and health promotion for patients as part of their routine clinical practice in discussing healthy eating and sleep habits, healthy balance of exercise, use of alcohol, cigarettes and other substances and use of social media. They will develop an age appropriate and non-judgemental communication approach to this. The trainee will reflect on the effect of social deprivation, ageing, impact of physical health issues and bereavement on mental health. The trainee will have training around equality and diversity and will be encouraged and supported to challenge any stigma or discrimination they encounter.
- The trainee will have opportunities to provide leadership within the team by leading on quality improvement projects, chairing team meetings and providing clinical support to the nursing team and other allied health professionals. They will be encouraged to reflect on their role within the team and how they and others can





demonstrate leadership skills in different clinical and non-clinical situations. Leadership styles will be discussed within supervision.

- In addition, they will be offered the opportunity to take on a Trainee Representative role which will, in addition to supporting fellow trainees, will involve direct discussions with the Service Leads, The Associate Medical Directors for Adult and Older Adult and with the College Tutors. They may also lead to representing this area in the Trust wide Junior Doctor Forum.
- The trainee will be encouraged to take part in quality improvement activities and in audits. They will be aware of the use of trust wide safety monitoring systems and the reason for registering any safety concerns to build up a wider picture and improve practise.
- Considering any concerns around safeguarding will be included as a routine part of any assessment and formulation including risk formulation. The trainee will have opportunities to discuss safeguarding concerns with the MDT.
- The Foundation Doctor can be offered opportunities to take part in delivering teaching for undergraduate medical students from Lancaster/ Liverpool and Manchester medical schools, Physician Associates and for non-medical colleagues.
- There is a weekly discussion of research methodologies and papers as part of the weekly academic
 programme. The trainee will be encouraged to take an active part in this including presenting a paper.
 LSCFT has an active research forum, and the trainee will be encouraged and supported to develop their
 interest and experience of research. When considering intervention plans, the trainee will be encouraged
 to look at current evidence and best practise and consider how clinical questions could be addressed
 through research.





FY1 Trauma & Orthopaedics

The department

- Large department with 20 consultants and 30 junior grade medical staff members.
- Multidisciplinary set up with close cooperation with Ortho geriatricians, 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 Aamir Zubairy, Mr Andrew Sloan, Mr Dinesh Alexander, Mr H Marynissen, Mr Kevin Sharpe, Mr Randeep Mohil and Mr Yosef Hamed





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) 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; D1 and D3.

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 Monday at which there is the opportunity to present cases.

Where the post is based: Blackburn Royal Hospital

Clinical Supervisor(s) for the placement: Any of the endocrinology consultants (Dr Ramtoola, Dr Raza, Dr Mahawish, Dr Nizamuddin, Dr Hywel, Dr Al-Dalla Ali)

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 (i.e. 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: Dr Aamir Soohail and Dr Rajendra Garlapati

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 fulfil 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 record 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, online, 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





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 wherever 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 afternoonTues:am morning surgery
pm afternoon surgeryWed:am morning surgery
pm afternoon off





Thurs:am Foundation Teaching at RBH
pm late afternoon surgery finishing 6.30pmFri:am Tutorials at practice
pm afternoon surgeryGenerally daily home visits at lunch time
No out of hours work during this placement.

Where the post is based: Individual Details provided

Clinical Supervisor(s) for the post: Individual details provided

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 regard 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





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

<u>STU Role:</u> 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: Mr Rami Obedaillah, Miss Ambareen Kausar, Mr Darren Subar, Mr Georgios Sgourakis, Mr Mooyad Ahmed, Mr Rami Ahmad & Ms Asma Sultana

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.

Safe Personal Effective





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 lifesaving 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 III neonatal unit admits over 500 babies per year. There are 9 consultant neonatologists, 10 middle grade doctors and 16 junior posts. The department works closely with the busy Paediatric Department based at the sister site, the Royal Blackburn Hospital. Neonatal outpatient services are provided in Burnley. 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 at Lancashire Women and Newborn Centre, Burnley.

Clinical Supervisor(s) for the placement:

Dr R Seethamraju, Dr A Cox, Dr J Murali, Dr A Paria, Dr A Sur, Dr A Bhulani, Dr A Brooks- Moizer, Dr Ene



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

Attendance and involvement in the regular teachings within the unit

- Monday: Cranial Ultrasound meetings, Simulations
- Tuesday: Weekly case + topic presentation
- Wednesdays: Microbiology meeting, External teachings
- Thursday: Fy2 regular teaching
- Friday: Monthly Share to care

Regular mortality meetings, PMRT, Audit meetings

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

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





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 ensuite 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 29 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 daytime 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 9. 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 Postnatal Ward from 08.30-09.30

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				

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

Where the post is based: LWNC, Burnley General Hospital

Clinical Supervisor(s) for the post: Mr J Shanks, 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 gynae/ 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





Job Title	FOUNDATION YEAR 2 TRAINEE DOCTOR IN PSYCHIATRY (FY2)				
Clinical Supervisor	Dr Ranji Thomas				
Hospital Address	PENDLEVIEW, ROYAL, BLACKBURN HOSPITAL, HASLINGDEN ROAD, BLACKBURN, BB2 3HH				
Trust	LANCASHIRE CARE NHS FOUNDATION TRUST				
Speciality	OLDER ADULT PSYCHIATRY Sub Speciality N/A				

Description of Placement

Liaison Psychiatry (Mental Health Liaison Team – MHLT), Royal Blackburn Hospital

The FY2 Trainee Doctor is placed in Mental Health Liaison Team/John Hewitt Suite, opposite the entrance to the A&E Department, Royal Blackburn Hospital, Blackburn. The doctor will have access the junior doctors' facilities within the Pendleview Mental Health Unit, Royal Blackburn Hospital.

The Liaison Psychiatry Department (Mental Health Liaison Team – MHLT), a part of The Pendleview Mental Health Unit, Blackburn, provides a very important interface between psychiatry and other branches of medicine and surgery in East Lancashire (acute sites). The acute sites are the Royal Blackburn Hospital and Burney General Hospital. In addition, the MHLT also provide input into satellite community wards such as Pendle Community Hospital and Clitheroe Community Hospital. East Lancashire, with a population of over half a million people, is generally a socially deprived area of Lancashire with high physical and psychiatric morbidity. There is a significant cohort of people from ethnically diverse communities.

The Mental Health Liaison Team has a Consultant Psychiatrist, medical secretary, 2 Speciality Doctors, a Manager, Clinical Psychologist, Senior Nurses (Band 6 & 7), Health Care Assistants (Band 3) and Reception staff. The team provides a service 24 hours a day throughout the year.

Roles and Responsibilities of the Trainee

Good clinical Care

- New and follow-up assessments for patients referred to and in contact with the MHLT in the Emergency Department (ED), the wards at Royal Blackburn Hospital (RBH), the wards at Burnley General Hospital (BGH), and the satellite community wards.
- Prescribe psychotropic medication to patients, including in acute presentations.
- Involvement in decisions relating to use of the Mental Health Act 1983 to detain patients for assessment and/or treatment.
- Attend daily MDT meetings to plan for contact with and care of patients referred to MHLT.
- Involvement in complex care planning of MHLT patients under supervision of Consultant Psychiatrist.
- GP correspondence and discharge summaries for patients discharged from MHLT and liaison with other agencies e.g. acute hospital trust, primary care physicians, Local Authority.
- Close working with the MHLT Multi-Disciplinary team including attendance at daily activity planning meetings
- Mental Health assessment of MHLT patients in the ED and the wards at RBH, BGH and other satellite sites
- Clarifying aspects of history through reviewing notes, speaking with other members of staff, family and regular reviews of patients as indicated
- Completing the Access Assessment Tool (initial clerking), risk assessments, and daily record entries in the electronic care record (RIO)
- Involvement in MDT reviews
- Teaching medical students
- Attending ward clinical meetings and leading if appropriate
- Involvement in Audit/Quality Improvement work
- Provide brief and focussed psychological interventions under supervision of the Clinical Psychologist



Maintaining Good Medical Practice

The post offers ample opportunities to work collaboratively with patients and families in a variety of acute settings. The Trainee will be able to liaise with medical/surgical colleagues in thinking about the patient in a holistic and patient centred manner with flexibility, initiative and leadership. The Trainee will be able to use supervision to reflect also on related issues such as wellbeing, workload, organisational dynamics, limitations, emotional impact of work and diversity characteristics of patients and staff. The Trainee will have ample opportunity to demonstrate advanced communication and interpersonal skills, learn about how patient values and perspectives may differ in physical health settings, explain a range of psychological therapies to patients, carers and other professionals (as appropriate), demonstrate skills in supporting those in whom English is not their first language and demonstrate proficiency in formulating and communicating clinical information associated with the overlap of physical and mental health.

Relationship with patients and communication

The Trainee 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 Trainee'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

The Trainee will have ample opportunities to assess patients on busy wards and the Emergency Department, while respecting patient dignity and confidentiality. These assessments will pose unique challenges. The assessments will include reading up physical health care records and psychiatric records to develop a systematic chronology, taking a careful focussed history, conducting a competent mental state examination and formulating differential diagnoses for consideration of appropriate management options (both pharmacological and non-pharmacological). The Trainee will develop an appropriate awareness of variations in presentations across ages and cultures, a flexible approach in assessment, taking into account the patient's physical health status, and an ability to correctly interpret results of investigations as well as the interplay between physical and psychiatric health. The Trainee will become familiar and adept with terminology used in physical healthcare settings.

The very nature of Liaison Psychiatry has complexity and uncertainty often built into clinical presentations. These constructs sometimes cause unconscious processes to influence relationships between people. In physical healthcare settings these can be manifest between patient and psychiatrist, non-psychiatric healthcare professionals and the psychiatrist, etc. The Trainee will be able to develop proficiency managing conflicts between patients, professionals, teams and systems using psychotherapeutic skills. It is not uncommon for the Trainee to have to demonstrate skills in applying the principles of crisis intervention in emergency situations, managing divergent views and maintaining professionalism.

Teaching and Training

The Trainee is expected to attend the FY2 training on Thursday mornings and the local academic teaching programme in psychiatry on Wednesday afternoons. During the local teaching programme, the doctor is expected to present a clinical 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 Trainee is also expected to read theoretical psychiatry on a regular basis and participate constructively in ward rounds (in the acute site), which has a large teaching component.

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

Medical Students from Lancaster are posted as per a schedule to the Mental Health Liaison Team. The FY2 Trainee is expected to participate along with the other psychiatric doctors in Pendleview Unit in medical student teaching.

The Trainee will be able to participate in ELHT training programmes, and this will foster better understanding of Psychiatry in the acute settings. The Trainee will be responsible for his/her PDP during the posting and will have to do the necessary SLEs to achieve the goals set out in the PDP.



Acute care

In addition to the uncertainty and complexity in the field of Liaison Psychiatry, one often has to deal with urgent and acute clinical presentations, particularly in the Accident & Emergency. Department, Royal Blackburn Hospital. The Trainee will get ample opportunities to assess and initiate treatment plans (under supervision) of acutely unwell patients with psychiatric symptoms who are brought to the Accident & Emergency Department. In addition, the Trainee will also be able to gain experience in dealing with acute psychiatric presentations in inpatients that are admitted in other wards of the acute site, Royal Blackburn Hospital.

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 Mental Health Liaison Team induction. For further details please see Roles & Responsibilities of the Trainee above.

The doctor is also on the on-call rota for psychiatry. The doctor is expected to attend weekly Balint Group Therapy sessions in psychotherapy which are also a part of training in psychiatry

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 Mental Health Liaison Team 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 (Educational/Clinical supervisor) secretary.

<u>On Call</u>

The FY2 doctor works on shifts of a 1 in 10 pattern. The FY2 doctor does resident first tier on-call at Royal Blackburn Hospital. Whilst on-call he/she attends to calls from the Pendleview Unit as well as all departments/wards in the acute site at the Royal Blackburn Hospital. 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 Thursday morning and the local academic teaching programme in psychiatry on Wednesday afternoons. During the local teaching programme, the doctor is expected to present a clinical 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 Trainee is also expected to read theoretical psychiatry on a regular basis and participate constructively in ward rounds in the acute site Royal Blackburn Hospital, which has a large teaching component.

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

Medical Students from Lancaster are regularly posted as per a schedule to the Pendleview Unit. The FY2 Trainee is expected to participate along with the other psychiatric doctors in Pendleview Unit in medical student teaching.

The Trainee will be able to participate in ELHT training programmes, and this will foster better understanding of Psychiatry in the acute settings. The Trainee will be responsible for his/her PDP during the posting and will have to do the necessary SLEs to achieve the goals set out in the PDP.

Facilities

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





Supervision Arrangements

The Trainee is expected to attend weekly supervision meetings, lasting 1 hour, with the clinical supervisor. The Trainee has access to/can seek advice from senior colleagues, including the clinical supervisor, during his/her working time. In addition, senior members of the Mental Health Liaison Team are also a valuable source of support.

Teaching/Academic Experience

The Trainee is expected to attend the FY2 training on Thursday mornings 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 clinical case or the journal well in advance and discuss it constructively with his/her clinical supervisor before presenting it on the day under supervision. The Trainee is also expected to read theoretical psychiatry on a regular basis and participate constructively in ward rounds, which has a large teaching component.

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Audit/Research Opportunities

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

Management Opportunities

The FY2 Trainee is expected to vicariously learn management skills through observation of the Consultant Psychiatrist and other senior doctors in the team. The FY2 Trainee is then encouraged, depending on his/her confidence levels and skill set, to chair such meetings, under supervision.

Other/Additional Experience

The FY2 Trainee will have the opportunity to attend Mental Health Liaison Team Governance Meetings which are held once a month. In addition, the Mental Health Liaison Team has periodic meetings with relevant departments/colleagues from the acute site, Royal Blackburn Hospital and the trainee doctor will be able to attend these meetings.

Description of Special Interest Opportunities

The FY2 Trainee will have the opportunity to see patients in the in-patient wards at Pendleview Mental Health Unit of Royal Blackburn Hospital. This will give the trainee doctor an opportunity to see how acutely unwell psychiatric patients are assessed and treated in psychiatric wards.