Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F1/005

POST 28

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - UPPER GI / BREAST

DEPARTMENT

General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

The job of an FY1 on a daily basis is predominately administrative and being extremely organised is the key to being successful.

Pre-operative clinical assessments, Peri-operative theatre exposure i.e. scrubbing in and assisting the surgeon in theatre, post-operative patient care-Ward work, On-call surgical rota with a larger exposure to other surgical disciplines with acute surgical admission and emergencies. MDT preparation and presentation weekly.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Mr Riccardo Bonomi

MAIN DUTIES OF THE PLACEMENT

- Having an updated inpatient list for ward rounds and other members of the team. This should include, reason for patients admission, diagnosis, investigation results and plan. There should also be a column for any further jobs that may need implementing
- To ensure jobs that may arise during ward round are completed and results chased up.
- If a review from another speciality has been requested, it is important you act upon their recommendations if appropriate.
- You are the first port of call for any patient on the ward, therefore if a patient becomes
 acutely unwell you will be contacted first. It is important to be aware that there is help
 available from your other team members and you should always ask for it if you feel you are
 not able to cope.
- Also, you may be asked to speak to family members about the patient's condition.
- At Worthing hospital, you are required to conduct pre-assessment clinics for elective operations. Here, you assess the fitness for surgery for each patient and to discuss any

uncertainties with the anaesthetist. This is an effective learning environment if you get complicated patients.

• You are expected to do one on-call ever 3-4weeks, probably the best learning opportunity available to practice history taking, examination and procedural skills. Again, whilst on-call you are expected to attend to patients who have been admitted under your take if they become acutely unwell and also attend to any new incoming patients

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM:

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Sat: AM:

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Sun: AM:

PM:

On call requirements: 1 in 6

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To do this, we put the interests of our patients first and foremost, and are underpinned by our values:

Compassion

- Communication
- Teamwork
- Respect
- Professionalism
- Inclusion

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F1/004

POST 27

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - UPPER GI

DEPARTMENT

General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

The job of an FY1 on a daily basis is predominately administrative and being extremely organised is the key to being successful.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Mr Mazin Sayegh

MAIN DUTIES OF THE PLACEMENT

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- Having an updated inpatient list for ward rounds and other members of the team. This should include reason for patient's admission, diagnosis, investigation results and plan. There should also be a column for any further jobs that may need implementing
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Weds: AM:

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On call requirements: 1 in 6

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F1/002 - POST 26

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PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - COLORECTAL

DEPARTMENT

General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Ward jobs (taking bloods, filling in request forms, referral letters, prescribing fluids, note writing), clerking patients in pre-assessment clinic, preparing cases and presenting them at MDT and M&M meetings (MDT held once a week, M&M once a month).

Learning opportunities: you will get to see a variety of surgical cases, acute and elective admissions, post-op complications, types of surgeries, managing drains, placing catheters, NG tubes..., wound management

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Mr Khurrum Baig / Ms Pauline Whitehouse

MAIN DUTIES OF THE PLACEMENT

Ward jobs (taking bloods, filling in request forms, referral letters, prescribing fluids, note writing), clerking patients in pre-assessment clinic, preparing cases and presenting them at MDT and M&M meetings (MDT held once a week, M&M once a month).

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

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On call requirements: 1 in 6

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F1/001

POST 25

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - COLORECTAL

DEPARTMENT

General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Ward jobs (taking bloods, filling in request forms, referral letters, prescribing fluids, note writing), clerking patients in pre-assessment clinic, preparing cases and presenting them at MDT and M&M meetings (MDT held once a week, M&M once a month).

Learning opportunities: you will get to see a variety of surgical cases, acute and elective admissions, post-op complications, types of surgeries, managing drains, placing catheters, NG tubes..., wound management.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

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MAIN DUTIES OF THE PLACEMENT

Ward jobs (taking bloods, filling in request forms, referral letters, prescribing fluids, note writing), clerking patients in pre-assessment clinic, preparing cases and presenting them at MDT and M&M meetings (MDT held once a week, M&M once a month).

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On call requirements: 1 in 6

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F1/010

POST 24

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care. Multidisciplinary working. Teaching at lunchtimes available 3 times a week.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

MAIN DUTIES OF THE PLACEMENT

Acute admissions and inpatient care of inpatients - frail elderly patients with multiple comorbidities, and when on call, this includes stroke/TIA admissions of all ages, including acute thrombolysis.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

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Tues: AM:

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Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

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Sat: AM:

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Sun: AM:

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Foundation Programme
Individual Placement Descriptor*

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

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KSS/RYR18/011/F1/009

POST 23

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care. Multidisciplinary working. Teaching at lunchtimes available 3 times a week.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

MAIN DUTIES OF THE PLACEMENT

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KSS/RYR18/011/F1/008

POST 22

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

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POST 21

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PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care. Multidisciplinary working. Teaching at lunchtimes available 3 times a week.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

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POST 20

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

MAIN DUTIES OF THE PLACEMENT

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TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

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PM: Protected foundation teaching

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On call requirements: 1 in 6

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POST 19

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care. Multidisciplinary working. Teaching at lunchtimes available 3 times a week.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

MAIN DUTIES OF THE PLACEMENT

Acute admissions and inpatient care of inpatients - frail elderly patients with multiple comorbidities, and when on call, this includes stroke/TIA admissions of all ages, including acute thrombolysis.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM:

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements: 1 in 6

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

University Hospitals Sussex NHS Foundation Trust (UHSussex) is an NHS foundation trust which provides clinical services to people in Brighton and Hove, parts of East Sussex and West Sussex. We run seven hospitals across Brighton & Hove and West Sussex. The mission of University Hospitals Sussex – what we are striving to achieve – is to provide 'excellent care every time'. Please note, the information in this IPD relates to Foundation training at the following site:

Worthing Hospital

For further details on our sites, please see: https://www.uhsussex.nhs.uk/hospitals/ We are also the largest university teaching hospital in Kent, Surrey and Sussex. We provide high quality medical education and expertise in a wide range of specialties. We pride ourselves in being able to offer our Foundation doctors in training a diverse and rewarding experience during their time with us.

We're proud to be at the heart of the NHS. As one of the UK's largest acute Trusts, we're a leading example of the excellence, the ambition and the values that have embodied the NHS for over 70 years.

To do this, we put the interests of our patients first and foremost, and are underpinned by our values:

- Compassion
- Communication
- Teamwork
- Respect
- Professionalism
- Inclusion

These values were selected by our staff, patients and public when we defined the sort of organisation we want University Hospitals Sussex to be. Please visit the UHSussex public website for further information the Trust, our history and development, teams and services, and working here: https://www.uhsussex.nhs.uk/

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

Foundation Programme Individual Placement Descriptor* University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F1/004

POST 18

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care. These patients may be general, hip fracture or stroke. Multidisciplinary working. Teaching at lunchtimes available 3 times a week.

WHERE THE PLACEMENT IS BASED

Becket/Botolphs/Buckingham/Broadwater/Barrow/Ditchling/Durrington ward, at Worthing Hospital

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Patel/Tozer/Yeo/Thompson/Sengupta/Saunders

MAIN DUTIES OF THE PLACEMENT

Acute admissions and inpatient care of inpatients - frail elderly patients with multiple comorbidities, and when on call, this includes Stroke/TIA admissions of all ages, including acute thrombolysis.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round

PM: Ward work

Tues: AM: Ward round / Multidisciplinary team discharge planning meeting

PM: Ward work AM: Ward round

PM: Protected foundation teaching

Thurs: AM: Ward round

PM: Ward work AM: Ward round

PM: Ward work

Sat: AM:

Weds:

Fri:

PM:

Sun: AM:

PM:

On call requirements: 1 in 6

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/035/F1/010

POST 17

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - ACUTE CARE

DEPARTMENT

General Internal Medicine / Geriatrics / General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

4/12 placement with rotations through all aspects of Acute Care including Acute Frailty, Acute Medicine and Acute Surgery. Initial assessment and management of acute surgical, medical and elderly care patients. Clerking, initial treatment, prescription-writing, on-going management of patients up to 72hrs. Liaising with other specialties including Radiology and working within a multi-disciplinary team. Broad exposure to medical and surgical presentations, opportunity to gain competencies in basic procedures and access to advanced procedures including lumbar puncture, pleural drains and ascitic drains. Presentation skills and team working and many other aspects of general training from curriculum are met within this placement. Post-take ward rounds, bed-side teaching, daily meetings, case-presentations, departmental teaching. Trainees will also all work on Ambulatory Care.

WHERE THE PLACEMENT IS BASED

Emergency Floor

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Roger Duckitt / Dr Joe Wileman / Dr Simon Murphy / Dr Adrian Richardson /

MAIN DUTIES OF THE PLACEMENT

- Initial clerking and treatment of patients
- Managing on-going care of patients on the unit
- Co-ordinating investigations and treatment plans
- Maintain safe, up-to-date list of ward-patients.
- Take part in post-take ward rounds
- Preparing discharge letters
- Ensure post-take jobs are completed.
- Liaising with other specialties and departments
- Review patients when required
- Learn lots of Medicine and have fun!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Tues: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Weds: AM: PTWR / Jobs / Clerking / Reviews

PM: Protected foundation teaching

Thurs: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews / Departmental teaching 1:15-2pm

Fri: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Sat: AM: On-call rota

Sun:

PM: On-call rota
AM: On-call rota

PM: On-call rota

On call requirements: F1 rota designed around a 1:10 frequency, which includes long days and late shifts (predominantly clerking new admissions) and weekends (3 weekends in 10 weeks).

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A member of: Association of UK University Hospitals



Foundation Programme – Year 1 Individual Placement Descriptor

Job Title: Foundation Year 1

Directorate: SOAMHS, AAW

Supervisor: Dr Richard Braithwaite

Base: Forget Me Not Unit, Swandean, Worthing

Hours of Work: 40 Hours

Guardian of Safe Working: Dr Sarah James

National Post Number: TBC

Handover: As required by the scheme

INTRODUCTION

Sussex Partnership NHS Foundation Trust consists of some 4,500 passionate and dedicated clinicians and support staff, working hand in hand with partners in the community to care for and support vulnerable people. We provide NHS care and treatment for people living in Brighton and Hove, East and West Sussex and Hampshire. We also provide a range of specialist services across south east England.

We are one of the largest providers of children and young people's mental health services in England, delivering community services in Sussex and Hampshire. We provide services in places including hospital (we have about 650 inpatients beds), people's homes, community centres, GP practices and prison. Our services in Sussex care for people with mental health problems, learning disabilities and an addiction to drugs or alcohol.

We are one of the few mental health organisations to have been granted university status by the Association of UK University Hospitals. This recognises our achievements in bringing research, teaching and clinical care more closely together for the benefit of patients.

As a teaching trust of Brighton and Sussex Medical School we have a national reputation for leading-edge research. During 2013-14 our research activity generated £1.6 million income. We are now one of the most influential, effective and well-respected mental health trusts in the country, and, as a teaching trust of Brighton and Sussex Medical School: We started as Sussex Partnership NHS trust in April 2006 and became a Foundation Trust with teaching status in August 2008.

JOB CONTENT

Job outline:	This is a 4-month placement, as part of the Year 1 South Thames Foundation
	School training programme.

This FY1 post is based four days per week at the Forget Me Not Unit, which comprises three 10-bedded specialist dementia inpatient wards.

The majority of people with dementia can live within the community. A very small proportion will have more complex care needs which require specialist care in a dedicated setting. Specialist dementia wards support people with dementia to allow them to safely move to a community-based environment, such as their own home or, more commonly, a care home. The FY1 doctor is tasked with monitoring and managing the physical and mental health of these patients, managing complex and

	often unmet needs of these patient in a holistic way as part of a multidisciplinary team with support from Specialty Doctors and a Consultant Old Age Psychiatrist.
	One day per week is spent working on the Emergency Floor at Worthing Hospital.
Clinical Responsibilities:	The trainee will be given Trust and local induction and after a period of shadowing with other members of the team will work as outlined above, including attending multidisciplinary team meetings and ward rounds, management of acute and chronic disease, observing Mental health Act assessments and liaising with GPs and secondary care clinicians, all under the supervision of a consultant psychiatrist.
Clinical Supervision:	The trainee will always have direct access to an appropriate senior colleague for advice in any clinical situation. In most situations between 9:00-17:00 this will be the Specialty Doctor. The consultant will also act as the Clinical Supervisor for training and quality assurance purposes and will offer on average one hour per week direct face-to-face clinical supervision .
Teaching and competences expected to be	This post is conducive to developing the vast majority of the generic competencies required by the Foundation Programme Curriculum.
achieved:	The placement is designed to help the trainee experience and develop Good Clinical Care in the management of acute mental disorder and self-harm management of patients with long-term mental health disorder and disabilities, including safe prescribing, record-keeping and correspondence, interface with other professionals.
	There is a formal educational program organised by the Trust most Wednesday afternoons. If allowed by the programme, the trainee will also have the opportunity to take part in case presentations, journal clubs and Balint Groups of psychotherapy with other trainees. The postholder will have the flexibility to attend other Foundation programme teaching activities with his/her peer group at Worthing Hospital with prior agreement.
Education and Training:	 Active in-house teaching under the supervision of College Tutor, which includes case presentations, critical review of papers and audit presentations. Attendance at in-house postgraduate teaching is essential (Wednesday p.m.) Weekly one-hour supervision with Clinical Supervisor. Trainee forum, psychodynamic psychotherapy seminars and supervision Appraisal. Attendance to Balint Group, which forms part of the in-house postgraduate
Booosek and	teaching.
Research and Quality Improvement:	Clinical audit is encouraged and opportunities may be available and tailored to individual trainee needs.
Emergencies:	The postholder accepts that he/she will also perform duties in occasional emergencies and unforeseen circumstance at the request of the appropriate consultant in consultation. The job description includes cover of normal annual and study leave of colleagues
	for whom the practitioner is expected to deputise during normal run of duties.

Indicative Timetable

Curricula and guidance Royal College of Psychiatrists 2019

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	Ward Work	EF day release	Ward Work	Ward Work	Ward Work / supervision
p.m.	Ward Work	EF day release	Academic Programme	Ward Review	Clinical admin

Clinical Supervisor Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	ECT	Ward Work / admin	SPA	ECT	Ward Work / supervision
p.m.	rTMS clinic	Ward Work / SPA	Academic Programme	Ward Review	Ward Work/ admin

Supervision:	Expectations for supervision:
	This job description briefly describes the training placement and outlines a timetable which includes an identified time for one hour per week one-to-one supervision but may be delivered in a group with other trainees that your supervisor is responsible for.
	Ad hoc supervision about clinical matters happens outside of this, i.e. discussing a patient.
	Please contact your locality tutor if supervision is not happening as per the guidelines above

Incorporated within the above work schedule will be 1 hour per week non-clinical Professional Development Time (PDT), as mandated by The Foundation School. The PDT time is to be used for self-directed learning, e-learning (this does not include trusts mandatory e-learning, i.e. Induction or annual update), meetings with ES's and CS's, portfolio work.

Foundation Programme Curriculum 2016 – Placement Matrix

The following table provides an indication as to what extent the Foundation Programme Curriculum 2016 syllabus areas may be met during a specific placement.

None of the syllabus areas should be expected to be met in this placement

To some extent/limited opportunity (positive or negative e.g. positive in that you may be able to experience this outcome)

To a great extent/ample opportunities

	Syllabus	Syllabus details	Expect to achieve
1: Knowledge, skills and performance	Professional behaviour	F2 Acts in accordance with GMC guidance in all interactions with patients, relatives/carers and colleagues	
		Acts as a role model for medical students, other doctors and healthcare workers	
		Acts as a responsible employee and complies with local and national requirements e.g.	
		 Completing mandatory training Ensuring immunisation against communicable diseases Engaging in appraisal and assessment Taking responsibility for ensuring appropriate cover during leave Adhering to local sickness and return to work policies 	
	Personal organisation	F2 Supervise, support and organise other team members to ensure appropriate prioritisation, timely delivery of care and completion of work	
	Personal responsibility	F2 Takes personal responsibility for clinical decision and is able to justify actions	
		Takes personal responsibility for revalidation	
		Accepts responsibility for any personal errors and takes suitable action including: seeking senior advice, apologising, making appropriate records and notifications	
2: Delivers patient centred care	Patient centred care	F2 Works with patients and colleagues to develop individual care plans	
an maintains trust		Respects patients 'right to refuse treatment and/or to decline involvement in research projects	
	Trust	F2 Discusses management options with patients and responds to their ideas, concerns and expectations	

		<u> </u>	
		Encourages patients to make informed decisions, recognises patients' expertise and helps them to acquire knowledge of their condition	
	Consent	F2	
		Obtains consent for an increasing range of procedures	
		Obtains valid consent by giving each patient the information they 'want', or 'need' in a way they can understand *including 'material risks' and reasonable alternative or variant treatments	
		Recognises when consent or refusal is invalid due to lack of capacity and applies principles of 'best interests' and 'least restriction'	
		Demonstrates understanding of the principle of involving the child in the decision making process when they are able to understand and consider the options	
3: Behaves in	Ethical and legal requirements	F1 & F2	
accordance with ethical and legal		Practices in accordance with guidance from the GMC, relevant legislation and national and local guidelines	
requirements	Confidentiality	F1 & F2	
roquiromonio	,	Describes and applies the principles of confidentiality in accordance with GMC guidance	
		Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically	
		Complies with information governance standards regarding confidential personal information	
		Follows GMC guidance on the use of social media	
		Describes when confidential information may be shared with appropriate third parties e.g. Police and DVLA	
	Statutory documentation	F1 & F2 Completes statutory documentation correctly e.g. • Death certificates • Statement for fitness to work • Cremation forms	

	1	,	
	Mental capacity	F1 & F2 Performs mental state examination and assessment of cognition and capacity	
		Uses and documents the 'best interests checklist' when an individual lacks capacity for a specific decision	
		Demonstrates awareness of the principles of capacity and incapacity as set out in the Mental Capacity Act 2005	
		Demonstrates understanding that there are situations when it is appropriate for others to make decisions on their behalf of patients (e.g. lasting power of attorney, and guardianship)	
		Demonstrates understanding that treatment may be provided against a patients expressed wishes in certain defined circumstances	
4:	Self-directed	F1 & F2	
Keeps	learning	Acts to keep abreast of educational/training requirements	
practice up to date through learning and		Maintains a comtemporaneous e-portfolio which meets training programme requirements	
teaching		Demonstrates change and improvement in practice as a result of reflection on personal experience, multi-source feedback (MSF) and feedback from SLEs	
		Identifies and addresses personal learning needs	
	Teaching and assessment	F2 Demonstrates improvement in teaching skills as a result of seeking, accepting and reflecting on feedback from learners and supervisors	
		Assesses medical students and other healthcare professionals and provides constructive feedback	
5:		F1 & F2	
Demonstrates engagement in career planning		Discusses how to achieve career ambitions with educational supervisor	
		Maintains an e-portfolio record of evidence demonstrating realistic career goals based on	
		career guidance, self-awareness, information gathering, selection processes and discussion with colleagues	
		Maintains an e-portfolio record of activities demonstrating exploration of possible specialty career options e.g. completion of taster period and reflection on the experience	

	I	T	
	0	F2	
6: Communicate	Communication with		
s clearly in a variety of	patients/relatives/ carers	Provides the necessary / desired information	
settings		Communicates increasingly complex information	
		Checks patients' understanding of options and supports patients in interpreting information and evidence relevant to their condition	
		Ensures that patients are able to express concerns and preferences, ask questions and make personal choices	
		Responds to patients' queries or concerns	
		Teaches communication skills to students and colleagues	
	Communication in challenging	F2	
	circumstances	Manages consultation/communication in time limited environments e.g. outpatients, emergency departments	
		Manages consultation/communication when English is not a patient's first language, including the appropriate use of an interpreter	
		Manages three-way consultations e.g. with an interpreter, using sign language, or with a child patient and their family/carers	
	Complaints	F2	
		Acts to prevent/mitigate and minimise distress in situations which might lead to complaint or dissatisfaction	
		Deals appropriately with angry/distressed/dissatisfied patients/carers and seeks assistance as appropriate	
	Patient records	F1 & F2	
		Maintains accurate, legible and contemporaneous patient records and ensures that entries are signed and dated in compliance with "Standards for the structure and content of patient records Health and Social Care Information Centre / Academy of Medical Royal Colleges (AoMRC) 2013"	
	Interface with	F2	
	other healthcare professionals	Demonstrates ability to make referrals across boundaries / through networks of care (primary, secondary, tertiary)	
		Writes accurate, timely, succinct and structured clinic letters and clinical summaries	
7:	Continuity of care	F2	
Works effectively as		Allocates and prioritises tasks during handover.	
a team member		Anticipates and identifies problems for the next clinical team/shift and takes pre-emptive action where required	

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	Interaction with colleagues	F2	
	. .	Demonstrates initiative e.g. by recognising work pressures on	
		others, providing support and organising / allocating work to optimise effectiveness within the clinical team	
8:	Leadership	F2	
Demonstrates leadership		Demonstrates extended leadership role within the team by	
skills		making decisions and taking responsibility for managing	
		increasingly complex situations across a greater range of clinical and non-clinical situations	
		Supervises and supports team members, e.g. supervising F1 doctors, delegating tasks appropriately, directing patient review, organising handover	
9:	Recognition of	F1 & F2	
Recognises, assesses and	acute illness	Responds promptly to notification of deterioration or concern	
initiates		regarding a patient's condition e.g. change in National Early	
management of the acutely		Warning Score (NEWS)	
ill patient		Prioritises tasks according to clinical urgency and reviews	
		patients in a timely manner	
		Recognises, manages and reports transfusion reactions, according to local and national guidelines	
	Assessment of the acutely unwell	F2	
	patient	Performs rapid, focused assessment of illness severity including	
		physiological monitoring and also considering mental health aspects	
		Performs prompt, rapid, focused assessment of the patient who	
		presents an acute risk to themselves or to others in the context of mental disorder, incapacity or incompetence	
	Immediate management of	F2	
	the acutely unwell	Reassesses acutely ill patients to monitor efficacy of	
	patient	interventions, including those aimed at managing acute mental illness and maintaining patient safety and the safety of others	
		Recognises when a patient should be moved to a higher level of	
		care and seeks appropriate assistance with review and management	
		Communicates with relatives/friends/carers in acute situations and offers support	
10:	Management of	F2	
Recognises, assesses and manages	long term conditions in the unwell patient	Performs primary review of new referrals within the hospital or outpatient clinic	
patients with long term conditions		Cares for patients with long-term diseases during their in-patient stay, as outpatients and in the community	

	T		
		Reviews long-term drug regime and, with senior advice, considers modifying dosage, timing and treatment.	
		Assesses and manages the impact of long term mental disorder on the presentation and course of acute physical illness, and vice versa	
	The frail patient	F2	
		Prescribes with an understanding of the impact of increasing age, weight loss and frailty on drug pharmacokinetics and pharmacodynamics	
		Performs a comprehensive geriatric assessment (CGA) including consideration of dementia	
		Describes the impact of activities of daily living on long-term conditions (e.g. impact of a notifiable condition on driving) and provides information / discusses these with the patients and carers	
	Support for patients with long	F2	
	term conditions	Encourages and assists patients to make realistic decisions about their care and helps them to construct and review advance/long-term care plans	
		Arranges appropriate assessment for specialist rehabilitation, care home placement and respite care	
	Nutrition	F2	
		Works with other healthcare professionals to address nutritional needs and communicate these during care planning	
		Recognises eating disorders, seeks senior input and refers to local specialist service	
		Formulates a plan for investigation and management of weight loss or weight gain	
11:	History	F2	
Obtains history, performs		Obtains relevant history, including mental health and collateral history, in time limited and sometimes difficult circumstances	
clinical examination,	Physical and	F2	
formulates differential diagnosis	mental state examination	Performs focused physical/mental state examination in time limited environments e.g. outpatients/general practice/emergency department	
and management plan	Diagnosis	F2	
		Performs primary review of new referrals within the hospital or outpatient clinic	
		Reviews initial diagnoses and plans appropriate strategies for further investigation	

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	Clinical management	F2	
	management	Refines problem lists and management plans and develops	
		appropriate strategies for further investigation and management	
	Clinical review	F2	
		Reprioritises problems and refines strategies for investigation and management and leads regular review of treatment response to oversee patients' progress	
	Discharge planning	F2	
	p.cg	Anticipates clinical evolution and starts planning discharge and on-going care from the time of admission	
		Liaises and communicates with the patient, family and carers and supporting teams to arrange appropriate follow up	
		Recognises and records when patients are medically, including mentally, fit for discharge	
	Discharge summaries	F1 &F2	
		Prescribes discharge medication in a timely fashion	
		Produces a clear, timely, legible discharge summary that identifies principle diagnoses, including mental health, key treatments/interventions, discharge medication and follow-up arrangements	
12:	Investigations	F2	
i .		· =	
Requests, relevant investigation s and acts	, and the second	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations	
Requests, relevant investigation	J	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed	
Requests, relevant investigation s and acts	Interpretation of	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and	
Requests, relevant investigation s and acts	_	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent	
Requests, relevant investigation s and acts	Interpretation of	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent F2 Increases the range and complexity of investigations which they can interpret and helps colleagues to interpret appropriate tests	
Requests, relevant investigation s and acts upon results	Interpretation of investigations	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent F2 Increases the range and complexity of investigations which they can interpret and helps colleagues to interpret appropriate tests and investigations	
Requests, relevant investigation s and acts upon results 13: Prescribes	Interpretation of investigations Correct	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent F2 Increases the range and complexity of investigations which they can interpret and helps colleagues to interpret appropriate tests and investigations F1 & F2 Prescribes medicines, blood products and fluids correctly, accurately and unambiguously in accordance with GMC and other guidance using correct documentation to ensure that patients receive the correct drug via the correct route at the	
Requests, relevant investigation s and acts upon results 13: Prescribes	Interpretation of investigations Correct	Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent F2 Increases the range and complexity of investigations which they can interpret and helps colleagues to interpret appropriate tests and investigations F1 & F2 Prescribes medicines, blood products and fluids correctly, accurately and unambiguously in accordance with GMC and other guidance using correct documentation to ensure that patients receive the correct drug via the correct route at the correct frequency and at the correct time Demonstrates understanding of responsibilities and restrictions with regard to prescribing high risk medicines including	

	Reviews previous prescriptions and transfers/transcribes accurately and appropriately	
	Describes the potential hazards related to different routes of drug administration (e.g. oral, intramuscular, intravenous, intrathecal)	
	Follows the guidance in Good Medical Practice in relation to self- prescribing and prescribing for friends and family	
	Within the hospital, prescribes controlled drugs using appropriate legal framework and describes the management and prescribing of controlled drugs in the community	
	Describes the importance of security issues in respect of prescription	
Clinically effective	F1 & F2	
prescription	Prescribes and administers for common important indications including medicines required urgently in the management of medical emergencies e.g. sepsis, exacerbation of chronic obstructive pulmonary disease, pulmonary oedema, congestive cardiac failure, pain, thromboprophylaxis	
	Prescribes safely for different patient groups including frail elderly, children, women of child-bearing potential, pregnant women and those with hepato-renal dysfunction	
	Prescribes and administers oxygen, fluids and antimicrobials as appropriate e.g. in accordance with NICE guidance on antimicrobial and intravenous fluid therapy	
	Chooses appropriate intravenous fluids as vehicles for intravenous drugs and calculates the correct volume and flow rate	
	Assesses the need for fluid replacement therapy and chooses and prescribes appropriate intravenous fluids and calculates the correct volume and flow rates	
	Prescribes and administers blood products safely in accordance with guidelines/protocols on safe cross matching and the use of blood and blood products	
Discussion of	F1 & F2	
medication with patients	Discusses drug treatment and administration with patients/carers, including duration of treatment, unwanted effects and interactions	
	Obtains an accurate drug history, including allergy, self- medication, use of complementary healthcare products and enquiry about allergic and other adverse reactions	
Guidance on	F1 & F2	
prescription		
	Prescribes using all available support including local and	
	national formularies, pharmacists and more experienced prescribers to ensure accurate, safe and effective error-free	

		prescribing, whilst recognising that legal responsibility remains with the prescriber	
		Prescribes according to relevant national and local guidance on antimicrobial therapy, recognising the link between antimicrobial prescribing and the development of antimicrobial resistance	
	Review of prescriptions	F1 & F2	
		Reviews prescriptions regularly for effectiveness and safety taking account of patient response, adverse reactions and drug level monitoring	
		Recognises and initiates action for common adverse effects of drugs and communicates these to patients, including potential effects on work and driving	
14: Performs	Core procedures	F2	
procedures safely		Maintains and improves skills in the core procedures and develops skills in more challenging circumstances e.g. reliably able to perform venous cannulation in the majority of patients including during resuscitation	
	Other procedures	F2	
		Teaches other healthcare workers procedures when skilled and sanctioned to do this	
		Increases the range of procedures they can perform relevant to specific clinical placements	
15:		F2	
Is trained and manages cardiac and respiratory arrest		Demonstrates the initiation and performance of advanced life support including cardiopulmonary resuscitation, manual defibrillation and management of life threatening arrhythmias and is able to lead the resuscitation team where necessary	
		Demonstrates understanding of the ethics of transplantation and identifies potential donors to senior medical staff	
	Do not attempt cardiopulmonary	F2	
	resuscitation orders	Discusses DNACPR with the multidisciplinary team, the patient, long-term carers (both medical and non-medical) and relatives and then records the outcome of that discussion	
16:		F1 & F2	
Demonstrates understandin g of the principles of		Explains to patients the possible effects of lifestyle, including the effects of diet, nutrition, inactivity, smoking, alcohol and substance abuse	
health promotion and illness prevention		Recognises the impact of wider determinants of health and advises on preventative measures with reference to local and national guidelines including:	
		 Smoking cessation and supportive measures Appropriate alcohol intake levels or drinking cessation Illicit drug use and referral to support services 	

		 Biohazards Risks of UV and ionising radiation especially the harmful effects of sunlight Lack of exercise and physical/mental activity Weight management Employment Vaccination programmes Cancer screening e.g. breast, cervical, bowel Recommends well man/women clinics 	
17: Manages palliative and end of life care	End of Life Care	Participates in discussions regarding personalised care planning including symptom management and advance care plans with patients, family and carers	
		Discusses the patients' needs and preferences regarding care in the last days of life, including preferred place of care and death, treatment escalation plans, do not attempt cardiopulmonary resuscitation (DNACPR) decisions	
	Care after death	F1 & F2	
		Confirms death by conducting appropriate physical examination, documenting findings in the patient record	
		Behaves professionally and compassionately when confirming and pronouncing death	
		Follows the law and statutory codes of practice governing completion of Medical Certificate of Cause of Death (MCCD) and cremation certificates.	
		Completes MCCD when trained to do so and notes details reported on the MCCD in the patient record	
		Demonstrates understanding of circumstances requiring reporting death to coroner/procurator fiscal.	
		Reports death to coroner/procurator fiscal after discussion with a senior colleague	
		Discusses the benefits of post mortem examination and explains the process to relatives/carers	
		Completes relevant sections of cremation forms when trained to do this	
18:	Personal	F1 & F2	
Recognises and works within limits	competence	Recognises and works within limits of competency	
of personal competence		Calls for senior help and advice in a timely manner and communicates concerns/expected response clearly.	
		Uses clinical guidelines and protocols, care pathways and bundles	
L	•		

		Taken part in activities to maintain and dayalan competence a a	
		Takes part in activities to maintain and develop competence e.g. seeking opportunities to do SLES and attending simulation training	
		Demonstrates evidence of reflection on practice and how this has led to personal development	
19:	Patient safety	F2	
Makes patient safety a priority in		Describes the mechanisms to report:	
clinical practice		Device related adverse eventsAdverse drug reactions	
		to appropriate national centre and completes reports as required	
		Participates in/undertakes a project related to a patient safety issue (e.g. Quality Improvement), with recommendations for improving the reliability of care and, with senior support, takes steps to institute these	
		Discusses risk reduction strategies and principles of significant event analysis and contributes to the discussion/analysis of adverse events, including potential to identify and prevent systematic error	
	Causes of	F2	
	impaired performance,	Describes the role of human factors in medical errors and takes	
	error or suboptimal	steps to minimise these	
	patient care	Describes ways of identifying poor performance in colleagues and how to support them	
	Patient identification	F1 & F2	
		Ensures patient safety by positive identification of the patient:	
		At each encounterIn case notes	
		 When prescribing/administering drugs On collecting specimens and when requesting and reviewing investigations Before consent for surgery/procedures 	
		Uses appropriate 2 or 3 point checks (e.g.name, date of birth, hospital number, address) in accordance with local protocols and national guidance	
		Crosschecks identification immediately before procedures/administration of blood products/IV drugs	
		Usage of medical devices and information technology (IT) (n.b. this excludes implantable devices	
	Usage of medical devices and	F1 & F2	

	information		
	technology (IT)	Demonstrates ability to operate common medical devices and interpret non-invasive monitoring correctly and safely after appropriate training	
		Accesses and uses IT systems including local computing systems appropriately	
		Demonstrates good information governance in use of electronic records	
	Infection control	F1 & F2	
		Demonstrates consistently high standard of practice in infection control techniques in patient contact and treatment including hand hygiene and use of personal protective equipment (PPE)	
		Demonstrates safe aseptic technique and correctly disposes of sharps and clinical waste	
		Demonstrates adherence to local guidelines/protocols for antibiotic prescribing	
		Requests screening for any disorder which could put other patients or staff at risk by cross contamination, e.g. Clostridium.Difficile	
		Takes an active role in outbreak management within healthcare settings (e.g. diarrhoea on a ward) and complies with procedures instituted by the infection control team	
		Informs the competent authority of notifiable diseases	
		Challenges and corrects poor practice in others who are not observing best practice in infection control	
		Recognises the need for immunisations and ensures own are up to date in accordance with local/national policy	
		Takes appropriate microbiological specimens in a timely fashion with safe technique	
		Recognises the risks to patients from transmission of blood- borne infection	
20:	Quality	F2	
Contributes to quality improvement	improvement	Contributes significantly to at least one quality improvement project including:	
		 Data collection Analysis and/or presentation of findings Implementation of recommendations 	
		Makes quality improvement link to learning/professional development in e-portfolio	

Healthcare	F1 & F2	
resource		
management	Demonstrates understanding of the organisational structure of	
	the NHS and independent sector and their role in the wider	
	health and social care landscape	
	Describes hospital and departmental management structure	
	Describes the processes of commissioning and funding, and that	
	all healthcare professionals have a responsibility for stewardship	
	of healthcare resources	
	Describes accountability of the NHS in its context as a publicly	
	funded body, and the need to ensure the most effective and	
	sustainable use of finite resources	
	Recognises the resource implications of personal actions and	
	minimises unnecessary/wasteful use of resources e.g. repeat	
	investigations, delayed discharge	
	Describes cost implications of common treatments in terms of	
	money, equipment and human resources (e.g. generic	
	prescribing, intravenous v oral antibiotics)	
Information	F1 & F2	
management		
	Seeks, finds, appraises and acts on information related to	
	medical practice including primary research evidence, reviews,	
	guidelines and care bundles	
	Critically reviews research and, where appropriate, presents	
	finding (e.g. journal club)	
	innania (org. Journal oldo)	

Foundation Programme Individual Placement Descriptor*

TRUST
University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)
SITE
Worthing
TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)
KSS/RYR18/035/F1/009 POST 16
PLACEMENT DETAILS (i.e. the specialty and sub-specialty)
F1 – ACUTE CARE
DEPARTMENT
General Internal Medicine / Geriatrics / General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

4/12 placement with rotations through all aspects of Acute Care including Acute Frailty, Acute Medicine and Acute Surgery. Initial assessment and management of acute surgical, medical and elderly care patients. Clerking, initial treatment, prescription-writing, on-going management of patients up to 72hrs. Liaising with other specialties including Radiology and working within a multi-disciplinary team. Broad exposure to medical and surgical presentations, opportunity to gain competencies in basic procedures and access to advanced procedures including lumbar puncture, pleural drains and ascitic drains. Presentation skills and team working and many other aspects of general training from curriculum are met within this placement. Post-take ward rounds, bed-side teaching, daily meetings, case-presentations, departmental teaching. Trainees will also all work on Ambulatory Care.

WHERE THE PLACEMENT IS BASED

Emergency Floor

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

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MAIN DUTIES OF THE PLACEMENT

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- Review patients when required
- Learn lots of Medicine and have fun!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: PTWR / Jobs / Clerking / Reviews

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Sat: AM: On-call rota

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On call requirements: F1 rota designed around a 1:10 frequency, which includes long days and late shifts (predominantly clerking new admissions) and weekends (3 weekends in 10 weeks).

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KSS/RYR18/035/F1/008

POST 15

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - ACUTE CARE

DEPARTMENT

General Internal Medicine / Geriatrics / General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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POST 14

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

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DEPARTMENT

General Internal Medicine / Geriatrics / General Surgery

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POST 13

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KSS/RYR18/035/F1/005

POST 12

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

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POST 11

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 – ACUTE CARE

DEPARTMENT

General Internal Medicine / Geriatrics / General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

4/12 placement with rotations through all aspects of Acute Care including Acute Frailty, Acute Medicine and Acute Surgery. Initial assessment and management of acute surgical, medical and elderly care patients. Clerking, initial treatment, prescription-writing, on-going management of patients up to 72hrs. Liaising with other specialties including Radiology and working within a multi-disciplinary team. Broad exposure to medical and surgical presentations, opportunity to gain competencies in basic procedures and access to advanced procedures including lumbar puncture,

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pleural drains and ascitic drains. Presentation skills and team working and many other aspects of general training from curriculum are met within this placement. Post-take ward rounds, bed-side teaching, daily meetings, case-presentations, departmental teaching. Trainees will also all work on Ambulatory Care.

WHERE THE PLACEMENT IS BASED

Emergency Floor

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Roger Duckitt / Dr Joe Wileman / Dr Simon Murphy / Dr Adrian Richardson /

MAIN DUTIES OF THE PLACEMENT

- Initial clerking and treatment of patients
- Managing on-going care of patients on the unit
- Co-ordinating investigations and treatment plans
- Maintain safe, up-to-date list of ward-patients.
- Take part in post-take ward rounds
- Preparing discharge letters
- Ensure post-take jobs are completed.
- Liaising with other specialties and departments
- Review patients when required
- Learn lots of Medicine and have fun!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Tues: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Weds: AM: PTWR / Jobs / Clerking / Reviews

PM: Protected foundation teaching

Thurs: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews / Departmental teaching 1:15-2pm

Fri: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Sat: AM: On-call rota

PM: On-call rota

Sun: AM: On-call rota

PM: On-call rota

On call requirements: F1 rota designed around a 1:10 frequency, which includes long days and late shifts (predominantly clerking new admissions) and weekends (3 weekends in 10 weeks).

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

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Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/017/F1/003

POST 05

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - Cardiology

DEPARTMENT

Cadiology

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Ward based acute medical care, situated learning in workplace and PGME.

WHERE THE PLACEMENT IS BASED

Becket Ward

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Sujay Chandran

MAIN DUTIES OF THE PLACEMENT

Ward based acute medical care.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round

PM: Ward work

Tues: AM: Ward round

PM: Ward work

Weds: AM: Ward round

PM: Protected foundation teaching

Thurs: AM: Ward round

Fri:

PM: Ward work

AM: Ward round

PM: Ward work

Sat: AM: Acute admissions

PM: Acute admissions

Sun: AM: Acute admissions

PM: Acute admissions

On call requirements: As per rota

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KSS/RYR18/015/F1/001

POST 04

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - RENAL

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

There are 2 F1s, 2 SHOs and 2 registrars, plus 2 consultants who alternate with working 1 month on the ward and 1 month on ITU. With such a lot of senior support there are opportunities to learn both clinical knowledge (e.g. causes of acute kidney injury, regimens during initiation of renal replacement therapy) and skills (e.g. pleural taps, lumbar punctures).

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Patrick Carr

MAIN DUTIES OF THE PLACEMENT

The main duties are: daily ward round and the jobs that these generate, including practical procedures, writing referral letters and organising investigations. At the end of the day you assess blood test and other results and based on these make plans for the management of the patients overnight. There are opportunities to shadow in ITU, but it is usually very busy.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM:

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

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KSS/RYR18/035/F1/003

POST 10

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 – ACUTE CARE

DEPARTMENT

General Internal Medicine / Geriatrics / General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

4/12 placement with rotations through all aspects of Acute Care including Acute Frailty, Acute Medicine and Acute Surgery. Initial assessment and management of acute surgical, medical and elderly care patients. Clerking, initial treatment, prescription-writing, on-going management of patients up to 72hrs. Liaising with other specialties including Radiology and working within a multi-disciplinary team. Broad exposure to medical and surgical presentations, opportunity to gain competencies in basic procedures and access to advanced procedures including lumbar puncture, pleural drains and ascitic drains. Presentation skills and team working and many other aspects of general training from curriculum are met within this placement. Post-take ward rounds, bed-side teaching, daily meetings, case-presentations, departmental teaching. Trainees will also all work on Ambulatory Care.

WHERE THE PLACEMENT IS BASED

Emergency Floor

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Roger Duckitt / Dr Joe Wileman / Dr Simon Murphy / Dr Adrian Richardson /

MAIN DUTIES OF THE PLACEMENT

- Initial clerking and treatment of patients
- Managing on-going care of patients on the unit
- Co-ordinating investigations and treatment plans
- Maintain safe, up-to-date list of ward-patients.
- Take part in post-take ward rounds
- Preparing discharge letters
- Ensure post-take jobs are completed.
- Liaising with other specialties and departments
- · Review patients when required
- Learn lots of Medicine and have fun!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Tues: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Weds: AM: PTWR / Jobs / Clerking / Reviews

PM: Protected foundation teaching

Thurs: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews / Departmental teaching 1:15-2pm

Fri: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Sat: AM: On-call rota

PM: On-call rota

Sun: AM: On-call rota

PM: On-call rota

On call requirements: F1 rota designed around a 1:10 frequency, which includes long days and late shifts (predominantly clerking new admissions) and weekends (3 weekends in 10 weeks).

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KSS/RYR18/018/F1/002

POST 03

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - GASTROENTEROLOGY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

The care of in patients with general medical and gastroenterological disease

WHERE THE PLACEMENT IS BASED

Eastbrook

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Anna Roskilly

MAIN DUTIES OF THE PLACEMENT

Participate in the care of patients under the supervision of the Gastroenterology consultants. Participate in the acute medical take. Opportunities to observe endoscopy sessions, clinics and specialist clinical meetings.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Consultant ward round

PM:

Tues: AM: Consultant ward round

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM: Consultant ward round

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

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POST 09

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - ACUTE CARE

DEPARTMENT

General Internal Medicine / Geriatrics / General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

4/12 placement with rotations through all aspects of Acute Care including Acute Frailty, Acute Medicine and Acute Surgery. Initial assessment and management of acute surgical, medical and elderly care patients. Clerking, initial treatment, prescription-writing, on-going management of patients up to 72hrs. Liaising with other specialties including Radiology and working within a multi-disciplinary team. Broad exposure to medical and surgical presentations, opportunity to gain competencies in basic procedures and access to advanced procedures including lumbar puncture, pleural drains and ascitic drains. Presentation skills and team working and many other aspects of general training from curriculum are met within this placement. Post-take ward rounds, bed-side teaching, daily meetings, case-presentations, departmental teaching. Trainees will also all work on Ambulatory Care.

WHERE THE PLACEMENT IS BASED

Emergency Floor

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Roger Duckitt / Dr Joe Wileman / Dr Simon Murphy / Dr Adrian Richardson /

MAIN DUTIES OF THE PLACEMENT

- Initial clerking and treatment of patients
- Managing on-going care of patients on the unit
- Co-ordinating investigations and treatment plans
- Maintain safe, up-to-date list of ward-patients.
- Take part in post-take ward rounds
- Preparing discharge letters
- Ensure post-take jobs are completed.
- Liaising with other specialties and departments
- Review patients when required
- Learn lots of Medicine and have fun!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Tues: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Weds: AM: PTWR / Jobs / Clerking / Reviews

PM: Protected foundation teaching

Thurs: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Fri: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Sat: AM: On-call rota

PM: On-call rota
AM: On-call rota

Sun: AM: On-call rota

PM: On-call rota

On call requirements:

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KSS/RYR18/004/F1/004

POST 02

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - RESPIRATORY

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DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

There are learning opportunities for many procedures including pleural taps and aspirates, as well as the chance to do ward round independently.

WHERE THE PLACEMENT IS BASED

NEED WARD/LOCATION DETAILS

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Nick Adams

MAIN DUTIES OF THE PLACEMENT

Each day comprises a ward round from 09:00 to about 12:30 where every patient is reviewed. After a 30min lunch break the afternoon is spent doing jobs generated from the ward round such as making referrals to other specialties, requesting scans, chasing test results, taking bloods and doing cannulas, sorting out patients who become acutely unwell. There are consultant ward rounds twice per week.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM:

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

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POST 08

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - ACUTE CARE

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

4/12 placement with rotations through all aspects of Acute Care including Acute Frailty, Acute Medicine and Acute Surgery. Initial assessment and management of acute surgical, medical and elderly care patients. Clerking, initial treatment, prescription-writing, on-going management of patients up to 72hrs. Liaising with other specialties including Radiology and working within a multi-disciplinary team. Broad exposure to medical and surgical presentations, opportunity to gain competencies in basic procedures and access to advanced procedures including lumbar puncture, pleural drains and ascitic drains. Presentation skills and team working and many other aspects of general training from curriculum are met within this placement. Post-take ward rounds, bed-side teaching, daily meetings, case-presentations, departmental teaching. Trainees will also all work on Ambulatory Care.

WHERE THE PLACEMENT IS BASED

Emergency Floor

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Roger Duckitt / Dr Joe Wileman / Dr Simon Murphy / Dr Adrian Richardson /

MAIN DUTIES OF THE PLACEMENT

- Initial clerking and treatment of patients
- Managing on-going care of patients on the unit
- Co-ordinating investigations and treatment plans
- Maintain safe, up-to-date list of ward-patients.
- Take part in post-take ward rounds
- Preparing discharge letters
- Ensure post-take jobs are completed.
- Liaising with other specialties and departments
- Review patients when required
- Learn lots of Medicine and have fun!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Tues: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Weds: AM: PTWR / Jobs / Clerking / Reviews

PM: Protected foundation teaching

Thurs: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Fri: AM: PTWR / Jobs / Clerking / Reviews

PM: PTWR / Jobs / Clerking / Reviews

Sat: AM: On-call rota

PM: On-call rota

Sun: AM: On-call rota

PM: On-call rota

On call requirements:

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SITE

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KSS/RYR18/091/F1/001

POST 01

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - ANAESTHETICS

DEPARTMENT

Anaesthesia & Intensive Care

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

NEED SUMMARY

WHERE THE PLACEMENT IS BASED

Operating Theatre & Intensive Care

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Howard Wakeling

MAIN DUTIES OF THE PLACEMENT

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Supernumerary learning position in anaesthesia and intensive care. First 2 months in anaesthesia moving through all areas of DGH anaesthetics gaining knowledge and various skills, particularly relating to the airway and vascular access. Second 2 months spent in intensive care to consolidate skills learned in anaesthetics and gain others including the recognition and early management of the acutely unwell patient, advanced vascular access, cardiac output monitoring, peri-arrest cooling, blood gas interpretation etc.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs:

AM: PM:

Fri: AM:

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

University Hospitals Sussex NHS Foundation Trust (UHSussex) is an NHS foundation trust which provides clinical services to people in Brighton and Hove, parts of East Sussex and West Sussex. We run seven hospitals across Brighton & Hove and West Sussex. The mission of University Hospitals Sussex – what we are striving to achieve – is to provide 'excellent care every time'. Please note, the information in this IPD relates to Foundation training at the following site:

Worthing Hospital

For further details on our sites, please see: https://www.uhsussex.nhs.uk/hospitals/We are also the largest university teaching hospital in Kent, Surrey and Sussex. We provide high quality medical education and expertise in a wide range of specialties. We pride ourselves in being able to offer our Foundation doctors in training a diverse and rewarding experience during their time with us.

We're proud to be at the heart of the NHS. As one of the UK's largest acute Trusts, we're a leading example of the excellence, the ambition and the values that have embodied the NHS for over 70 years.

To do this, we put the interests of our patients first and foremost, and are underpinned by our values:

- Compassion
- Communication

- Teamwork
- Respect
- Professionalism
- Inclusion

These values were selected by our staff, patients and public when we defined the sort of organisation we want University Hospitals Sussex to be. Please visit the UHSussex public website for further information the Trust, our history and development, teams and services, and working here: https://www.uhsussex.nhs.uk/

Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

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

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/073/F1/002

POST 07

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - HAEMATOLOGY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Mainly ward based-gaining experience in managing in-patient haematology patients giving exposure to haematological emergencies such as hypercalcaemia, cord compression and neutropenic sepsis. There is also exposure to inpatient haematology chemotherapy and managing those with severe immunosuppression and well as end of life care. The post also covers MDCU and exposure to outpatient complications of chemotherapy

WHERE THE PLACEMENT IS BASED

Balcombe Ward and MDCU

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr George Double

MAIN DUTIES OF THE PLACEMENT

To look after inpatient haematology patients and outpatient oncology patietns on MDCU. There is opportunity to gain exposure to out-patient haematology clinics if desired

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM:

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements: As dictated by rota

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KSS/RYR18/007/F1/002

POST 06

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F1 - CARDIOLOGY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

The rotation comprises of mainly cardiology patients very rarely do we get any general medical patients. There is a great deal of teaching from the seniors. There is a Friday list for cardioversion which the juniors run. There are opportunities to go to clinic. There is also the rapid access chest pain clinic on Thursday's which is run by the junior's. During the placement it could be possible to perform pleural taps and drains but depends on the patients you get. In terms of learning your management of ACS, AF, Heart block, Valvular disease will improve greatly. When on call you could be able to manage cardiology cases competently.

WHERE THE PLACEMENT IS BASED

Eartham

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Kathy Webb-Peploe

MAIN DUTIES OF THE PLACEMENT

The job mainly involves ward rounds in the morning that start 8:30 am and finish by 11:00am. After this you do all the jobs that need doing. Typical job's would be organising tests, making sure patients are ready for angiogram or pacemaker, chasing up colleagues for patient transfer, usual bloods, cannula and ABG's. The F1s are not scheduled to go to clinic but if you are eager then you can go. There are also opportunities in the cath lab to see angiograms, PCI's, temporary wire and

pacemaker insertion. If you are really lucky you may be able to have a go at getting central access (Femoral, subclavian or auxiliary).

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round

PM: Ward work

Tues: AM: Ward round

PM: Ward work

Weds: AM: Ward round

PM: Protected foundation teaching

Thurs: AM: Ward round

PM: Ward work plus rapid access chest pain clinic

Fri: AM: Ward round

PM: Ward work

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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A member of: Association of UK University Hospitals



Foundation Programme – Year 1 Individual Placement Descriptor

Job Title: Foundation Year 1

Directorate: Acute Mental Health Services

Supervisor: Dr Claire Jones

Base: Mental Health Liaison Team, Worthing General

Hospital

Hours of Work: 40 Hours with full shift rota pattern

Guardian of Safe Working: Dr Sarah James

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

National Post Number: TBC

Handover: As required by the scheme

INTRODUCTION

Sussex Partnership NHS Foundation Trust consists of some 4,500 passionate and dedicated clinicians and support staff, working hand in hand with partners in the community to care for and support vulnerable people. We provide NHS care and treatment for people living in Brighton and Hove, East and West Sussex and Hampshire. We also provide a range of specialist services across south east England.

We are one of the largest providers of children and young people's mental health services in England, delivering community services in Sussex and Hampshire. We provide services in places including hospital (we have about 650 inpatients beds), people's homes, community centres, GP practices and prison. Our services in Sussex care for people with mental health problems, learning disabilities and an addiction to drugs or alcohol.

We are one of the few mental health organisations to have been granted university status by the Association of UK University Hospitals. This recognises our achievements in bringing research, teaching and clinical care more closely together for the benefit of patients.

As a teaching trust of Brighton and Sussex Medical School we have a national reputation for leading-edge research. During 2013-14 our research activity generated £1.6 million income. We are now one of the most influential, effective and well-respected mental health trusts in the country, and, as a teaching trust of Brighton and Sussex Medical School: We started as Sussex Partnership NHS Trust in April 2006 and became a Foundation Trust with teaching status in August 2008.

JOB CONTENT

Job outline:

This is a FY1 post based at Worthing General Hospital in the Mental Health Liaison Team. This service provides urgent mental health assessments for patients who are referred to us within Worthing Hospital, from the A&E department and hospital wards. The FY1 doctor will learn how to assess patients presenting with a wide range of mental illness, including psychiatric history taking, mental state examination, risk assessment and formulating management plans. They will learn about the overlap between physical and mental illness and how to complete holistic assessments, and will be able to develop more advanced communication skills.

This placement is with the 'working age' Mental Health Liaison Team, seeing patients aged 17-65, but there will be opportunity to assess older adults aged over 65 (and child and adolescent services if the postholder is interested).

One day a week will be spent working with the acute medical team on the Emergency Floor at Worthing General Hospital, to ensure the FY1 doctor gains necessary medical experience and skills as part of their training.

This is a **4 month placement**, as part of the **Year 1** South Thames Foundation School training programme.

Clinical Responsibilities:

The FY1 trainee will be given Trust and local induction, and after a period of shadowing with other members of the Mental Health Liaison Team, will be given the opportunity to jointly assess and formulate initial management plans for patients presenting with a wide range of mental illness within the general hospital - including anxiety and depression, self harm and suicide, mania, psychosis, delirium and dementia, trauma/PTSD, medically unexplained symptoms and neuropsychiatric conditions. As they develop their experience and skill, they will be able to complete these assessments on their own, with supervision and advice from senior colleagues.

The FY1 doctor will support in reviewing medical investigations and prescribing where needed/appropriate.

The FY1 doctor will develop their skills in assessing Mental Capacity and understand the interface between MCA and MHA. There will be opportunity to shadow Mental Health Act Assessments.

A large part of the role is communicating and liaising with colleagues/services both within the general hospital, and outside the hospital including GPs, community mental health teams, social services and voluntary sector organisations, in order to form a safe discharge plan for the patient. The FY1 doctor will learn about other urgent care mental health services including the Crisis Team and Street Triage, and to understand the organisation and stepped care model within community mental health services.

There are no on call responsibilities/duties associated with this post.

The usual annual leave and study leave processes will be in place; periods of leave will be covered by colleagues/other training grade doctors in the team and should be agreed in advance.

Clinical Supervision:

The trainee will always have direct access to an appropriate senior colleague for advice in any clinical situation. In most situations between 9:00-17:00 this will be the Consultant Liaison Psychiatrist, Dr Claire Jones, who will also act as the clinical supervisor for training and quality assurance purposes and will offer on average **one hour per week direct face to face clinical supervision**. There are also other trainee psychiatrists, a team lead and clinical nurse specialist available to give clinical advice and supervision where appropriate.

Teaching and competences expected to be achieved:

This post is conducive to developing the vast majority of the generic competencies required by the Foundation Programme Curriculum.

The placement is designed to help the trainee experience and develop Good Clinical Care in the management of acute mental illness and psychiatric emergencies, as well as chronic mental health conditions and disabilities, including assessment and diagnosis, safe prescribing, risk management, record keeping and correspondence, and communication/liaison with other professionals. The trainee will also be able to develop more generic skills relating to Good Medical Practice.

HLO 1. An accountable, capable and compassionate doctor

The FY1 doctor will have ample opportunity to develop skills in clinical assessment and holistic care. The liaison team is an urgent care service and works with

unscheduled care, giving the trainee good experience in clinical prioritisation and in ensuring continuity of care. Working in acute mental health services will enable them to develop advanced communication skills.

HLO 2. A valuable member of the healthcare workforce

The FY1 doctor will be quickly integrated into our multidisciplinary/multiprofessioanls team and will learn to work closely and communicate clearly with a wide range of colleagues in different services. There will be ample opportunity to design and complete audits and quality improvement projects and the trainee will be encouraged to take part in this. They will also have the opportunity to regularly teach medical students on placement in the liaison team, and to present at the local academic programme. The trainee's wellbeing and fitness to practice will be regularly reviewed in supervision and they will be offered support and guidance wherever needed, with close liaison with their educational supervisor.

HLO 3. A professional responsible for their own practice and portfolio development

The FY1 trainee will have regular clincial supervision and will be encouraged and supported to engage with continuing professional development including keeping up with portfolio development. There will be opportunity to discuss career planning and to gain further experience through shadowing opportunities and personal development days.

There is a formal educational program organised by the Trust most Wednesday afternoons at Meadowfield Hospital, Worthing. The trainee will have the opportunity to take part in case presentations, journal clubs and Balint Groups (group reflective practice) with other trainees. The post holder will have the flexibility to attend other Foundation programme teaching activities with their peer group at the local Acute Hospital.

Education and Training:

- Daily clinical supervision and training whilst working with the Mental Health Liaison Team
- Weekly one hour supervision with Clinical Supervisor
- Educational Supervision 1-2 times per placement
- Attendance at in-house psychiatric postgraduate teaching/academic programme on Wednesday afternoons
- Attendance at weekly Foundation programme academic teaching
- Attendance at weekly Balint group (group reflective practice) and monthly group supervision within the Mental Health Liaison Team
- Access to the hospital and university libraries for independent study
- Access to online journals and resources

Quality Improvement:

Audit and involvement in quality improvement projects is encouraged and opportunities may be available and tailored to individual trainee needs.

There will be opportunity ranging from gathering data for national and local audits which are already established, to working with colleagues on a Quality Improvement Project within our service/the hospital, to designing and leading on an audit or QIP of the trainee's own choosing/interest.

Research and

Emergencies:	The post holder accepts that he/she will also perform duties in occasional emergencies and unforeseen circumstances but that there will always be appropriate clinical supervision and senior advice available.

Indicative Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	MH assessments, supervision and Balint	Day Release EF Worthing	MH assessment	MH assessment	MH assessment
p.m.	MH assessments	Day Release EF Worthing	Academic Teaching	MH assessment	MH assessment

Clinical Supervisor Timetable

	Monday	Tuesday	Wednesday	Thursday	Friday
a.m.	MH assessment, supervision	Day Release EF Worthing	MH assessment	MH assessment	MH assessment
p.m.	MH assessment	Day Release EF Worthing	Teaching	MH assessment	MH assessment

Incorporated within the above work schedule will be 1 hour per week non-clinical Professional Development Time (PDT), as mandated by The Foundation School. The PDT time is to be used for self-directed learning, e-learning (this does not include trusts mandatory e-learning, i.e. Induction or annual update), meetings with ES's and CS's, portfolio work.

Supervision:	Expectations for supervision:
	This job description briefly describes the training placement and outlines an indicative timetable (subject to change) which includes an identified time for one hour per week one-to-one supervision but may be delivered in a group with other trainees that your supervisor is responsible for.
	Ad hoc supervision about clinical matters happens outside of this, i.e. discussing a patient.
	Please contact your locality tutor if supervision is not happening as per the guidelines above

Foundation Programme Curriculum 2016 – Placement Matrix

The following table provides an indication as to what extent the Foundation Programme Curriculum 2016 syllabus areas may be met during a specific placement.

To some extent/limited opportunity (positive or negative e.g. positive in that you may be able to experience this outcome)

To a great extent/ample opportunities

	Syllabus	Syllabus details	Expect to achieve
1: Knowledge, skills and performance	Professional behaviour	F2 Acts in accordance with GMC guidance in all interactions with patients, relatives/carers and colleagues Acts as a role model for medical students, other doctors and healthcare workers Acts as a responsible employee and complies with local and national requirements e.g. Completing mandatory training Ensuring immunisation against communicable diseases Engaging in appraisal and assessment Taking responsibility for ensuring appropriate cover during leave Adhering to local sickness and return to work policies	
	Personal organisation	F2 Supervise, support and organise other team members to ensure appropriate prioritisation, timely delivery of care and completion of work	
	Personal responsibility	F2 Takes personal responsibility for clinical decision and is able to justify actions Takes personal responsibility for revalidation Accepts responsibility for any personal errors and takes suitable action including: seeking senior advice, apologising, making appropriate records and notifications	
2: Delivers patient centred care an maintains trust	Patient centred care	F2 Works with patients and colleagues to develop individual care plans Respects patients 'right to refuse treatment and/or to decline involvement in research projects	
	Trust	F2 Discusses management options with patients and responds to their ideas, concerns and expectations	

		Encourages patients to make informed decisions, recognises patients' expertise and helps them to acquire knowledge of their condition	
	Consent	F2	
		Obtains consent for an increasing range of procedures	
		Obtains valid consent by giving each patient the information they 'want', or 'need' in a way they can understand *including 'material risks' and reasonable alternative or variant treatments	
		Recognises when consent or refusal is invalid due to lack of capacity and applies principles of 'best interests' and 'least restriction'	
		Demonstrates understanding of the principle of involving the child in the decision making process when they are able to understand and consider the options	
3: Behaves in	Ethical and legal requirements	F1 & F2	
accordance with ethical and legal	1	Practices in accordance with guidance from the GMC, relevant legislation and national and local guidelines	
requirements	Confidentiality	F1 & F2	
		Describes and applies the principles of confidentiality in	
		Describes and applies the principles of confidentiality in accordance with GMC guidance	
		accordance with GMC guidance Ensures the patient's rights of confidentiality when clinical details	
		Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically Complies with information governance standards regarding	
		Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically Complies with information governance standards regarding confidential personal information	
	Statutory	Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically Complies with information governance standards regarding confidential personal information Follows GMC guidance on the use of social media Describes when confidential information may be shared with	
	Statutory documentation	Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically Complies with information governance standards regarding confidential personal information Follows GMC guidance on the use of social media Describes when confidential information may be shared with appropriate third parties e.g. Police and DVLA	
		Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically Complies with information governance standards regarding confidential personal information Follows GMC guidance on the use of social media Describes when confidential information may be shared with appropriate third parties e.g. Police and DVLA F1 & F2 Completes statutory documentation correctly e.g.	
		Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically Complies with information governance standards regarding confidential personal information Follows GMC guidance on the use of social media Describes when confidential information may be shared with appropriate third parties e.g. Police and DVLA F1 & F2 Completes statutory documentation correctly e.g. Death certificates	
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	Mental capacity	F1 & F2 Performs mental state examination and assessment of cognition and capacity	
		Uses and documents the 'best interests checklist' when an individual lacks capacity for a specific decision	
		Demonstrates awareness of the principles of capacity and incapacity as set out in the Mental Capacity Act 2005	
		Demonstrates understanding that there are situations when it is appropriate for others to make decisions on their behalf of patients (e.g. lasting power of attorney, and guardianship)	
		Demonstrates understanding that treatment may be provided against a patients expressed wishes in certain defined circumstances	
4:	Self-directed	F1 & F2	
Keeps	learning	Acts to keep abreast of educational/training requirements	
practice up to	J	Maintains a contemporaneous e-portfolio which meets training	
date through		programme requirements	
learning and		, ,	
teaching		Demonstrates change and improvement in practice as a result of reflection on personal experience, multi-source feedback (MSF) and feedback from SLEs	
		Identifies and addresses personal learning needs	
		F2	
	Teaching and assessment	Demonstrates improvement in teaching skills as a result of seeking, accepting and reflecting on feedback from learners and supervisors	
		Assesses medical students and other healthcare professionals and provides constructive feedback	
5:		F1 & F2	
Demonstrates			
engagement		Discusses how to achieve career ambitions with educational	
in career		supervisor	
planning		Maintains an e-portfolio record of evidence demonstrating realistic career goals based on	
		career guidance, self-awareness, information gathering, selection processes and discussion with colleagues	
		Maintains an e-portfolio record of activities demonstrating exploration of possible specialty career options e.g. completion of taster period and reflection on the experience	

Communicate sclearly in a variety of settings Communicates clearly in a variety of settings Checks patients' understanding of options and supports patients in interpreting information and evidence relevant to their condition Checks patients understanding of options and supports patients in interpreting information and evidence relevant to their condition Ensures that patients are able to express concerns and preferences, ask questions and make personal choices Responds to patients' queries or concerns Teaches communication skills to students and colleagues Communication in challenging circumstances F2 Manages consultation/communication in time limited environments e.g. outpatients, emergency departments Manages consultation/communication when English is not a patient's first language, including the appropriate use of an interpreter Manages three-way consultations e.g. with an interpreter, using sign language, or with a child patient and their family/carers Complaints F2 Acts to prevent/mitigate and minimise distress in situations which might lead to complaint or dissatisfied patients force and early a print transport a
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patients/carers and seeks assistance as appropriate
Patient records F1 & F2
Maintains accurate, legible and contemporaneous patient records and ensures that entries are signed and dated in compliance with "Standards for the structure and content of patient records Health and Social Care Information Centre / Academy of Medical Royal Colleges (AoMRC) 2013"
Interface with F2 other healthcare
professionals Demonstrates ability to make referrals across boundaries / through networks of care (primary, secondary, tertiary)
Writes accurate, timely, succinct and structured clinic letters and clinical summaries
7: Continuity of care F2
Works effectively as a team Allocates and prioritises tasks during handover.
member Anticipates and identifies problems for the next clinical team/shift and takes pre-emptive action where required

	T	T	
	Interaction with colleagues	F2	
	oomouguoo	Demonstrates initiative e.g. by recognising work pressures on	
		others, providing support and organising / allocating work to optimise effectiveness within the clinical team	
8:	Leadership	F2	
Demonstrates		Demonstrates extended leadership role within the team by	
leadership skills		making decisions and taking responsibility for managing	
		increasingly complex situations across a greater range of clinical	
		and non-clinical situations	
		Supervises and supports team members, e.g. supervising F1	
		doctors, delegating tasks appropriately, directing patient review, organising handover	
9:	Recognition of	F1 & F2	
Recognises,	acute illness		
assesses and initiates		Responds promptly to notification of deterioration or concern regarding a patient's condition e.g. change in National Early	
management		Warning Score (NEWS)	
of the acutely ill patient		Prioritises tasks according to clinical urgency and reviews	
panem		patients in a timely manner	
		Recognises, manages and reports transfusion reactions, according to local and national guidelines	
	Assessment of	F2	
	the acutely unwell patient	Performs rapid, focused assessment of illness severity including	
	pation	physiological monitoring and also considering mental health	
		aspects	
		Performs prompt, rapid, focused assessment of the patient who	
		presents an acute risk to themselves or to others in the context	
	Immediate	of mental disorder, incapacity or incompetence F2	
	management of		
	the acutely unwell patient	Reassesses acutely ill patients to monitor efficacy of interventions, including those aimed at managing acute mental	
	panem	illness and maintaining patient safety and the safety of others	
		Pagagniago whom a nationt about the moved to a higher level of	
		Recognises when a patient should be moved to a higher level of care and seeks appropriate assistance with review and	
		management	
		Communicates with relatives/friends/carers in acute situations	
		and offers support	
10:	Management of long term	F2	
Recognises, assesses and	conditions in the	Performs primary review of new referrals within the hospital or	
manages	unwell patient	outpatient clinic .	
patients with long term		Cares for patients with long-term diseases during their in-patient	
conditions		stay, as outpatients and in the community	

	ı		
		Reviews long-term drug regime and, with senior advice, considers modifying dosage, timing and treatment.	
		Assesses and manages the impact of long term mental disorder on the presentation and course of acute physical illness, and vice versa	
	The frail patient	F2	
		Prescribes with an understanding of the impact of increasing age, weight loss and frailty on drug pharmacokinetics and pharmacodynamics	
		Performs a comprehensive geriatric assessment (CGA) including consideration of dementia	
		Describes the impact of activities of daily living on long-term conditions (e.g. impact of a notifiable condition on driving) and provides information / discusses these with the patients and carers	
	Support for patients with long	F2	
	term conditions	Encourages and assists patients to make realistic decisions about their care and helps them to construct and review advance/long-term care plans	
		Arranges appropriate assessment for specialist rehabilitation, care home placement and respite care	
	Nutrition	F2	
		Works with other healthcare professionals to address nutritional needs and communicate these during care planning	
		Recognises eating disorders, seeks senior input and refers to local specialist service	
		Formulates a plan for investigation and management of weight loss or weight gain	
11: Obtains	History	F2	
history, performs		Obtains relevant history, including mental health and collateral history, in time limited and sometimes difficult circumstances	
clinical examination,	Physical and	F2	
formulates differential diagnosis	mental state examination	Performs focused physical/mental state examination in time limited environments e.g. outpatients/general practice/emergency department	
and management plan	Diagnosis	F2	
		Performs primary review of new referrals within the hospital or outpatient clinic	
		Reviews initial diagnoses and plans appropriate strategies for further investigation	

	Oliminal		
	Clinical management	F2	
	managomoni	Refines problem lists and management plans and develops	
		appropriate strategies for further investigation and management	
	Clinical review	F2	
		Reprioritises problems and refines strategies for investigation and management and leads regular review of treatment response to oversee patients' progress	
	Discharge planning	F2	
	promise grant gran	Anticipates clinical evolution and starts planning discharge and on-going care from the time of admission	
		Liaises and communicates with the patient, family and carers and supporting teams to arrange appropriate follow up	
		Recognises and records when patients are medically, including mentally, fit for discharge	
	Discharge summaries	F1 &F2	
		Prescribes discharge medication in a timely fashion	
		Produces a clear, timely, legible discharge summary that identifies principle diagnoses, including mental health, key treatments/interventions, discharge medication and follow-up	
		arrangements	
12:	Investigations	F2	
Requests, relevant investigation s and acts upon results		Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations	
apon rodato		Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent	
	Interpretation of investigations	F2	
	J	Increases the range and complexity of investigations which they can interpret and helps colleagues to interpret appropriate tests and investigations	
13:	Correct	F1 & F2	
Prescribes safely	prescription	Prescribes medicines, blood products and fluids correctly, accurately and unambiguously in accordance with GMC and other guidance using correct documentation to ensure that patients receive the correct drug via the correct route at the correct frequency and at the correct time	
		Demonstrates understanding of responsibilities and restrictions with regard to prescribing high risk medicines including anticoagulation, insulin, chemotherapy and immunotherapy	
		Performs dosage calculations accurately and verifies that the dose calculated is of the right order	

	Reviews previous prescriptions and transfers/transcribes accurately and appropriately	
	Describes the potential hazards related to different routes of drug administration (e.g. oral, intramuscular, intravenous, intrathecal)	
	Follows the guidance in Good Medical Practice in relation to self- prescribing and prescribing for friends and family	
	Within the hospital, prescribes controlled drugs using appropriate legal framework and describes the management and prescribing of controlled drugs in the community	
	Describes the importance of security issues in respect of prescription	
Clinically effective	F1 & F2	
prescription	Prescribes and administers for common important indications including medicines required urgently in the management of medical emergencies e.g. sepsis, exacerbation of chronic obstructive pulmonary disease, pulmonary oedema, congestive cardiac failure, pain, thromboprophylaxis	
	Prescribes safely for different patient groups including frail elderly, children, women of child-bearing potential, pregnant women and those with hepato-renal dysfunction	
	Prescribes and administers oxygen, fluids and antimicrobials as appropriate e.g. in accordance with NICE guidance on antimicrobial and intravenous fluid therapy	
	Chooses appropriate intravenous fluids as vehicles for intravenous drugs and calculates the correct volume and flow rate	
	Assesses the need for fluid replacement therapy and chooses and prescribes appropriate intravenous fluids and calculates the correct volume and flow rates	
	Prescribes and administers blood products safely in accordance with guidelines/protocols on safe cross matching and the use of blood and blood products	
Discussion of	F1 & F2	
medication with patients	Discusses drug treatment and administration with patients/carers, including duration of treatment, unwanted effects and interactions	
	Obtains an accurate drug history, including allergy, self- medication, use of complementary healthcare products and enquiry about allergic and other adverse reactions	
Guidance on	F1 & F2	
prescription		
	Prescribes using all available support including local and national formularies, pharmacists and more experienced	
	prescribers to ensure accurate, safe and effective error-free	

		prescribing, whilst recognising that legal responsibility remains with the prescriber	
		Prescribes according to relevant national and local guidance on antimicrobial therapy, recognising the link between antimicrobial prescribing and the development of antimicrobial resistance	
	Review of prescriptions	F1 & F2	
	, , , , , , , , , , , , , , , , , , ,	Reviews prescriptions regularly for effectiveness and safety taking account of patient response, adverse reactions and drug level monitoring	
		Recognises and initiates action for common adverse effects of drugs and communicates these to patients, including potential effects on work and driving	
14: Performs	Core procedures	F2	
procedures safely		Maintains and improves skills in the core procedures and develops skills in more challenging circumstances e.g. reliably able to perform venous cannulation in the majority of patients including during resuscitation	
	Other procedures	F2	
		Teaches other healthcare workers procedures when skilled and sanctioned to do this	
		Increases the range of procedures they can perform relevant to specific clinical placements	
15: Is trained and		F2	
manages cardiac and respiratory arrest		Demonstrates the initiation and performance of advanced life support including cardiopulmonary resuscitation, manual defibrillation and management of life threatening arrhythmias and is able to lead the resuscitation team where necessary	
		Demonstrates understanding of the ethics of transplantation and identifies potential donors to senior medical staff	
	Do not attempt cardiopulmonary	F2	
	resuscitation orders	Discusses DNACPR with the multidisciplinary team, the patient, long-term carers (both medical and non-medical) and relatives and then records the outcome of that discussion	
16:		F1 & F2	
Demonstrates understandin g of the principles of health		Explains to patients the possible effects of lifestyle, including the effects of diet, nutrition, inactivity, smoking, alcohol and substance abuse	
promotion and illness prevention		Recognises the impact of wider determinants of health and advises on preventative measures with reference to local and national guidelines including:	
		Smoking cessation and supportive measures	

		 Appropriate alcohol intake levels or drinking cessation Illicit drug use and referral to support services Biohazards Risks of UV and ionising radiation especially the harmful effects of sunlight Lack of exercise and physical/mental activity Weight management Employment Vaccination programmes Cancer screening e.g. breast, cervical, bowel Recommends well man/women clinics 	
17: Manages palliative and end of life care	End of Life Care	Participates in discussions regarding personalised care planning including symptom management and advance care plans with patients, family and carers Discusses the patients' needs and preferences regarding care in the last days of life, including preferred place of care and death, treatment escalation plans, do not attempt cardiopulmonary resuscitation (DNACPR) decisions	
	Care after death	Confirms death by conducting appropriate physical examination, documenting findings in the patient record Behaves professionally and compassionately when confirming and pronouncing death Follows the law and statutory codes of practice governing completion of Medical Certificate of Cause of Death (MCCD) and cremation certificates. Completes MCCD when trained to do so and notes details reported on the MCCD in the patient record Demonstrates understanding of circumstances requiring reporting death to coroner/procurator fiscal. Reports death to coroner/procurator fiscal after discussion with a senior colleague Discusses the benefits of post mortem examination and explains the process to relatives/carers Completes relevant sections of cremation forms when trained to do this	
18: Recognises and works within limits of personal competence	Personal competence	F1 & F2 Recognises and works within limits of competency Calls for senior help and advice in a timely manner and communicates concerns/expected response clearly.	

		Uses clinical guidelines and protocols, care pathways and bundles	
		Takes part in activities to maintain and develop competence e.g. seeking opportunities to do SLES and attending simulation training	
		Demonstrates evidence of reflection on practice and how this has led to personal development	
19:	Patient safety	F2	
Makes patient safety a		Describes the mechanisms to report:	
priority in clinical		Device related adverse events	
practice		Adverse drug reactions	
		That order aray reactions	
		to appropriate national centre and completes reports as required	
		Participates in/undertakes a project related to a patient safety issue (e.g. Quality Improvement), with recommendations for improving the reliability of care and, with senior support, takes steps to institute these	
		Discusses risk reduction strategies and principles of significant event analysis and contributes to the discussion/analysis of adverse events, including potential to identify and prevent systematic error	
	Causes of	F2	
	impaired		
	performance, error or	Describes the role of human factors in medical errors and takes steps to minimise these	
	suboptimal	ctope to minimize a loco	
	patient care	Describes ways of identifying poor performance in colleagues and how to support them	
	Patient identification	F1 & F2	
		Ensures patient safety by positive identification of the patient:	
		At each encounterIn case notes	
		 When prescribing/administering drugs On collecting specimens and when requesting and reviewing investigations Before consent for surgery/procedures 	
		Uses appropriate 2 or 3 point checks (e.g.name, date of birth, hospital number, address) in accordance with local protocols and national guidance	
		Crosschecks identification immediately before procedures/administration of blood products/IV drugs	
		Usage of medical devices and information technology (IT) (n.b. this excludes implantable devices	

devices and information technology (IT) Demonstrates ability to operate common medical devices and interpret non-invasive monitoring correctly and safety after appropriate training Accesses and uses IT systems including local computing systems appropriately			T	
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Implementation of recommendations				
Makes quality improvement link to learning/professional development in e-portfolio			Makes quality improvement link to learning/professional	

Healthcare resource	F1 & F2	
management	Demonstrates understanding of the organisational structure of the NHS and independent sector and their role in the wider health and social care landscape	
	Describes hospital and departmental management structure	
	Describes the processes of commissioning and funding, and that all healthcare professionals have a responsibility for stewardship of healthcare resources	
	Describes accountability of the NHS in its context as a publicly funded body, and the need to ensure the most effective and sustainable use of finite resources	
	Recognises the resource implications of personal actions and minimises unnecessary/wasteful use of resources e.g. repeat investigations, delayed discharge	
	Describes cost implications of common treatments in terms of money, equipment and human resources (e.g. generic prescribing, intravenous v oral antibiotics)	
Information management	F1 & F2	
g	Seeks, finds, appraises and acts on information related to medical practice including primary research evidence, reviews, guidelines and care bundles	
	Critically reviews research and, where appropriate, presents	
	finding (e.g. journal club)	

Competences expected to be achieved:

This post is conducive to developing the vast majority of the generic competencies required by the Foundation Programme Curriculum (2016), e.g.

Section 1: Professional behaviour and trust

Section 2: Communication, team-working and leadership

Section 3: Clinical Care

Section 4: Safety & Quality

Also the placement is designed to help the trainee experience and develop **Good Clinical**Care in the management of acute mental disorder and self-harm, management of
patients with long-term mental health disorder and disability, including safe prescribing,
record-keeping and correspondence, interface with other professionals.

The trainee by the end of the placement is anticipated to be able to:

• Elicit a basic clinical history for a common psychiatric disorder

- Perform a mental state examination for a common psychiatric disorder
- Perform a cognitive screening assessment
- Perform a risk assessment
- Make a concise case presentation and initial management plan for a common psychiatric disorder
- Write an accurate and concise report, assessment or referral

Supervised Learning Events expected to be achieved:

It is expected that the following assessments will take place:

- 1x Mini-PAT [per year]: This is a Peer Assessment Tool and involves feedback from a range of Healthcare Professionals
- 2x Mini-CEX: This involves the evaluation of an observed clinical encounter with immediate feedback from the observer
- 2x CBD: Structured case-based discussions to allow decision-making and reasoning regarding the management of a case in detail
- 1x Assessment of teaching

Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/024/F2/003

POST 28

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - TRAUMA & ORTHOPAEDICS

DEPARTMENT

Trauma & Orthopaedics

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Ward based and theatre based learning and structured teaching.

WHERE THE PLACEMENT IS BASED

Coombes Ward

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Mr Aneel Ansari / Mr Kush Narang / Mr Nirav Shah

MAIN DUTIES OF THE PLACEMENT

Clerk patients, manage traumatic conditions of musculoskeletal system, perform minor procedures. Participate in on call rota as initial investigation and management of trauma admissions.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward work/theatre

PM: Ward work/theatre

Tues: AM: Ward work/theatre

PM: Ward work/theatre

Weds: AM: Ward work/theatre

PM: Protected foundation teaching

Thurs: AM: Ward work/theatre

PM: Ward work/theatre

Fri: AM: Ward work/theatre

PM: Ward work/theatre

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements: 4 long days (0800-2100) or 3 long days (0800-2100 fri, sat, sun) and nights (2030-0900) 4 long days or 3 long days. Night on calls cover general surgery, T and O and Urology. EWTD compliant frequency

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

University Hospitals Sussex NHS Foundation Trust (UHSussex) is an NHS foundation trust which provides clinical services to people in Brighton and Hove, parts of East Sussex and West Sussex. We run seven hospitals across Brighton & Hove and West Sussex. The mission of University Hospitals Sussex – what we are striving to achieve – is to provide 'excellent care every time'. Please note, the information in this IPD relates to Foundation training at the following site:

Worthing Hospital

For further details on our sites, please see: https://www.uhsussex.nhs.uk/hospitals/We are also the largest university teaching hospital in Kent, Surrey and Sussex. We provide high quality medical education and expertise in a wide range of specialties. We pride ourselves in being able to offer our Foundation doctors in training a diverse and rewarding experience during their time with us.

We're proud to be at the heart of the NHS. As one of the UK's largest acute Trusts, we're a leading example of the excellence, the ambition and the values that have embodied the NHS for over 70 years.

To do this, we put the interests of our patients first and foremost, and are underpinned by our values:

- Compassion
- Communication
- Teamwork
- Respect
- Professionalism
- Inclusion

These values were selected by our staff, patients and public when we defined the sort of organisation we want University Hospitals Sussex to be. Please visit the UHSussex public website for further information the Trust, our history and development, teams and services, and working here: https://www.uhsussex.nhs.uk/

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

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POST 27

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - TRAUMA & ORTHOPAEDICS

DEPARTMENT

Trauma & Orthopaedics

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KSS/RYR18/024/F2/001

POST 26

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - TRAUMA & ORTHOPAEDICS

DEPARTMENT

Trauma & Orthopaedics

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TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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WHERE THE PLACEMENT IS BASED

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TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward work/theatre

PM: Ward work/theatre

Tues: AM: Ward work/theatre

PM: Ward work/theatre

Weds: AM: Ward work/theatre

PM: Protected foundation teaching

Thurs: AM: Ward work/theatre

PM: Ward work/theatre

Fri: AM: Ward work/theatre

PM: Ward work/theatre

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements: 4 long days (0800-2100) or 3 long days (0800-2100 fri, sat, sun) and nights (2030-0900) 4 long days or 3 long days. Night on calls cover general surgery, T and O and Urology. EWTD compliant frequency

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

University Hospitals Sussex NHS Foundation Trust (UHSussex) is an NHS foundation trust which provides clinical services to people in Brighton and Hove, parts of East Sussex and West Sussex. We run seven hospitals across Brighton & Hove and West Sussex. The mission of University Hospitals Sussex – what we are striving to achieve – is to provide 'excellent care every time'. Please note, the information in this IPD relates to Foundation training at the following site:

Worthing Hospital

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- Teamwork
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- Inclusion

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F2/001

POST 25

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - Upper GI / Colorectal

DEPARTMENT

General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Foundation doctors are mainly responsible for the management of in-patients both emergency and elective, in addition ample opportunities are available to attend out-patient clinics, theatre and endoscopy sessions.

They are expected to do daily ward rounds under supervision and will be responsible for the day to day management under the guidance of their senior colleagues.

WHERE THE PLACEMENT IS BASED

Chiltington / Clapham

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Miss Pauline Whitehouse/Mr Malcolm McFall/Mr Marco Mlotshwa/Mr Valerio Di Nicola/Mr Bipul Kanri/Mr Anupam Dixit

MAIN DUTIES OF THE PLACEMENT

Managing in hospital patients under my care under strict supervision. Regular pre-assessment clinics. Optional theatre, endoscopy and OPD.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward/pre-assessment/endoscopy

PM: Ward/pre-assessment/endoscopy

Tues: AM: Ward/pre-assessment/endoscopy/teaching

PM: Protected foundation teaching

Weds: AM: Ward/endoscopy

PM: Ward/endoscopy

Thurs: AM: Ward/clinic

PM: Ward/clinic

Fri: AM: Ward

PM: Ward

Sat: AM: Ward

PM: Ward

Sun: AM: Ward

PM: Ward

On call requirements: 1 in 8 Long days, 1 in 8 nights (surgical ward cover with a 2^{nd} SHO grade

admitting patients)

Encouragement to attend theatre and clinic

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F2/007

POST 24

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - Upper GI / Colorectal

DEPARTMENT

General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Foundation doctors are mainly responsible for the management of in-patients both emergency and elective, in addition ample opportunities are available to attend out-patient clinics, theatre and endoscopy sessions.

They are expected to do daily ward rounds under supervision and will be responsible for the day to day management under the guidance of their senior colleagues.

WHERE THE PLACEMENT IS BASED

Chiltington / Clapham

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Miss Pauline Whitehouse/Mr Malcolm McFall/Mr Marco Mlotshwa/Mr Valerio Di Nicola/Mr Bipul Kanri/Mr Anupam Dixit

MAIN DUTIES OF THE PLACEMENT

Managing in hospital patients under my care under strict supervision. Regular pre-assessment clinics. Optional theatre, endoscopy and OPD.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward/pre-assessment/endoscopy

PM: Ward/pre-assessment/endoscopy

Tues: AM: Ward/pre-assessment/endoscopy/teaching

PM: Protected foundation teaching

Weds: AM: Ward/endoscopy

PM: Ward/endoscopy

Thurs: AM: Ward/clinic

PM: Ward/clinic

Fri: AM: Ward

PM: Ward

Sat: AM: Ward

PM: Ward

Sun: AM: Ward

PM: Ward

On call requirements: 1 in 8 Long days, 1 in 8 nights (surgical ward cover with a 2nd SHO grade admitting patients)

Encouragement to attend theatre and clinic

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/021/F2/008

POST 23

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - Upper GI / Colorectal

DEPARTMENT

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General Surgery

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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They are expected to do daily ward rounds under supervision and will be responsible for the day to day management under the guidance of their senior colleagues.

WHERE THE PLACEMENT IS BASED

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CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

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MAIN DUTIES OF THE PLACEMENT

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TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward/pre-assessment/endoscopy

PM: Ward/pre-assessment/endoscopy

Tues: AM: Ward/pre-assessment/endoscopy/teaching

PM: Protected foundation teaching

Weds: AM: Ward/endoscopy

PM: Ward/endoscopy

Thurs: AM: Ward/clinic

PM: Ward/clinic

Fri: AM: Ward

PM: Ward

Sat: AM: Ward

PM: Ward

Sun: AM: Ward

PM: Ward

On call requirements: 1 in 8 Long days, 1 in 8 nights (surgical ward cover with a 2nd SHO grade admitting patients)

Encouragement to attend theatre and clinic

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/002/F2/001

POST 22

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - PAEDIATRICS

DEPARTMENT

Women's & Children

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Exposure to children and newborn babies.

Opportunities to see and learn disease conditions children admitted to secondary care plus care of newborn relevant to paediatric trainees and those wishing to be General Practitioners.

Attend OPD clinics and see patients on their own with adequate supervision from consultants and registrars.

Multidisciplinary morning handover Monday – Friday with clinical and educational discussion.

Weekly dedicated protected teaching. Paediatric simulations.

WHERE THE PLACEMENT IS BASED

Children's Centre

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Edward Yates

MAIN DUTIES OF THE PLACEMENT

Review of children acutely referred to hospital by GPs, self-presenting to A&E. Clerking of patients, management plans presentation and discussion at multidisciplinary joint handover every morning. Examination of newborn, normal.

Participate in departmental teaching and take part in audit.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Tues: AM: Ward round/ward jobs/teaching

PM: Ward round/ward jobs/teaching

Weds: AM: Ward round/ward jobs

PM: Protected foundation teaching / Optional clinics in the afternoon

Thurs: AM: Ward round/ward jobs

PM: Ward round/ward jobs AM: Ward round/ward jobs

PM: Ward round/ward jobs

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Usually one weekend a month and one night a week. During the placement you'll usually do one week and one weekend of night shifts.

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/040/F2/002

POST 21

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - OBSTETRIC & GYNAECOLOGY

DEPARTMENT

Women's & Children

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Typical working pattern in this post e.g. ward rounds, clinics, theatre sessions Daily/weekly/monthly (if applicable).

Variable work schedule including a week covering ward patients, a week covering the gynae emergency unit and attendance in theatre, clinics and delivery suite. Weekly bleep free tutorial on Friday followed by full a teaching afternoon

WHERE THE PLACEMENT IS BASED

Worthing Hospital: Delivery suite (DS), Bramber ward, Early pregnancy Assessment Unit (EPAU), Gynae Day unit (GDU), Antenatal Clinic, Fetal Day Assessment Unit (FDAU), Outpatients, Operating theatres

Southlands Hospital: Outpatients, Day surgical unit

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Mr Shahzad Salim / Dr Rahila Khan / Dr Sam Alsammoua

MAIN DUTIES OF THE PLACEMENT

Attendance in outpatients and theatres – opportunities to assist with operations and clerk patients in clinic.

Care of Obstetric and Gynaecology inpatients.

Assessment of emergency admissions through ED, GDU, EPAU, FDAU and DS.

Work on DS looking after labouring women and assisting in deliveries.

Weekly multidisciplinary team meetings with opportunities to present cases and be involved in discussions. Encouraged to participate in clinical governance and risk management.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM:

PM:

Tues: AM:

PM:

Weds: AM:

PM: Protected foundation teaching

Thurs: AM:

PM:

Fri: AM:

PM:

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/040/F2/001

POST 20

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - OBSTETRIC & GYNAECOLOGY

DEPARTMENT

Women's & Children

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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

Daily/weekly/monthly (if applicable).

Variable work schedule including a week covering ward patients, a week covering the gynaecology emergency unit and attendance in theatre, clinics and delivery suite. Weekly bleep free tutorial on Friday followed by full a teaching afternoon.

WHERE THE PLACEMENT IS BASED

Worthing Hospital: Delivery suite (DS), Bramber ward, Early pregnancy Assessment Unit (EPAU), Gynae Day unit (GDU), Antenatal Clinic, Fetal Day Assessment Unit (FDAU), Outpatients, Operating theatres

Southlands Hospital: Outpatients, Day surgical unit

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Mr Shahzad Salim / Dr Rahila Khan / Dr Sam Alsammoua

MAIN DUTIES OF THE PLACEMENT

Attendance in outpatients and theatres – opportunities to assist with operations and clerk patients in clinic.

Care of Obstetric and Gynaecology inpatients.

Assessment of emergency admissions through ED, GDU, EPAU, FDAU and DS.

Work on DS looking after labouring women and assisting in deliveries.

Weekly multidisciplinary team meetings with opportunities to present cases and be involved in discussions. Encouraged to participate in clinical governance and risk management.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon:	AM:	
	PM:	
Tues:	AM:	
	PM:	
Weds:	AM:	
	PM:	Protected foundation teaching
Thurs:	AM:	
	PM:	
Fri:	AM:	
	PM:	
Sat:	AM:	
	PM:	
Sun:	AM:	
	PM:	
On call re	quiren	nents: As timetabled on rota

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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TRUST

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/800/F2/006

POST 19

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GENERAL PRACTICE

DEPARTMENT

General Practice

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Clinical aspects of primary care including MDT working; weekly tutorial with myself and weekly tutorial with local Community Educational Supervisor (CES). Workplace-based assessments as per F2 ePortfolio requirements

WHERE THE PLACEMENT IS BASED

GP Surgery within the Worthing and Adur area

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

General Practitioner within Placement Practice

MAIN DUTIES OF THE PLACEMENT

Day-to-day GP, lots of patient contact and clinical work, following patients up, requesting and reviewing investigations, referring for further care

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: All day surgery/clinics

PM: All day surgery/clinics

Tues: AM: All day surgery/clinics

PM: All day surgery/clinics

Weds: AM: Dedicated GP teaching

PM: Protected foundation teaching

Thurs: AM: All day surgery/clinics

PM: All day surgery/clinics

Fri: AM: All day surgery/clinics

PM: All day surgery/clinics

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

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POST 18

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GENERAL PRACTICE

DEPARTMENT

General Practice

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Clinical aspects of primary care including MDT working; weekly tutorial with myself and weekly tutorial with local Community Educational Supervisor (CES). Workplace-based assessments as per F2 ePortfolio requirements

WHERE THE PLACEMENT IS BASED

GP Surgery within the Worthing and Adur area

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

General Practitioner within Placement Practice

MAIN DUTIES OF THE PLACEMENT

Day-to-day GP, lots of patient contact and clinical work, following patients up, requesting and reviewing investigations, referring for further care

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: All day surgery/clinics

PM: All day surgery/clinics

Tues: AM: All day surgery/clinics

PM: All day surgery/clinics

Weds: AM: Dedicated GP teaching

PM: Protected foundation teaching

Thurs: AM: All day surgery/clinics

PM: All day surgery/clinics

Fri: AM: All day surgery/clinics

PM: All day surgery/clinics

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements:

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KSS/RYR18/800/F2/004

POST 17

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 – GENERAL PRACTICE

DEPARTMENT

General Practice

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Clinical aspects of primary care including MDT working; weekly tutorial with myself and weekly tutorial with local Community Educational Supervisor (CES). Workplace-based assessments as per F2 ePortfolio requirements

WHERE THE PLACEMENT IS BASED

GP Surgery within the Worthing and Adur area

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

General Practitioner within Placement Practice

MAIN DUTIES OF THE PLACEMENT

Day-to-day GP, lots of patient contact and clinical work, following patients up, requesting and reviewing investigations, referring for further care

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: All day surgery/clinics

PM: All day surgery/clinics

Tues: AM: All day surgery/clinics

PM: All day surgery/clinics

Weds: AM: Dedicated GP teaching

PM: Protected foundation teaching

Thurs: AM: All day surgery/clinics

PM: All day surgery/clinics

Fri: AM: All day surgery/clinics

PM: All day surgery/clinics

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements: None

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

University Hospitals Sussex NHS Foundation Trust (UHSussex) is an NHS foundation trust which provides clinical services to people in Brighton and Hove, parts of East Sussex and West Sussex. We run seven hospitals across Brighton & Hove and West Sussex. The mission of University Hospitals Sussex – what we are striving to achieve – is to provide 'excellent care every time'. Please note, the information in this IPD relates to Foundation training at the following site:

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offer our Foundation doctors in training a diverse and rewarding experience during their time with us.

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To do this, we put the interests of our patients first and foremost, and are underpinned by our values:

- Compassion
- Communication
- Teamwork
- Respect
- Professionalism
- Inclusion

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/800/F2/003

POST 16

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GENERAL PRACTICE

DEPARTMENT

General Practice

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Clinical aspects of primary care including MDT working; weekly tutorial with myself and weekly tutorial with local Community Educational Supervisor (CES). Workplace-based assessments as per F2 ePortfolio requirements

WHERE THE PLACEMENT IS BASED

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	PM:
Sun:	AM:
	PM:
On call re	equirements: None

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POST 15

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 – GENERAL PRACTICE

DEPARTMENT

General Practice

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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On call requirements:

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Foundation Training Programme Individual Placement Descriptor

Job Title: Foundation Year 2 Trainee

Directorate: Children and Young People's Services / General Adult Mental

Health Services

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Clinical Supervisor: Dr Jayanta Chatterjee

Responsible to: Dr Rick Fraser, Chief Medical Officer

Base: Arun House, 16 Liverpool Gardens, Worthing BN11 1RY

Hours of Work: 40 Hours with full shift rota pattern

Guardian of Safe Working: Dr Sarah James

National Post Number: TBC

Hours of Work: 40 hours with full shift pattern

Handover: As required by the scheme

INTRODUCTION

Sussex Partnership NHS Foundation Trust consists of some 4,500 passionate and dedicated clinicians and support staff, working hand in hand with partners in the community to care for and support vulnerable people. We provide NHS care and treatment for people living in Brighton and Hove, East and West Sussex and Hampshire. We also provide a range of specialist services across south east England.

We are one of the largest providers of children and young people's mental health services in England, delivering community services in Sussex and Hampshire. We provide services in places including hospital (we have about 650 inpatients beds), people's homes, community centres, GP practices and prison. Our services in Sussex care for people with mental health problems, learning disabilities and an addiction to drugs or alcohol.

We are one of the few mental health organisations to have been granted university status by the Association of UK University Hospitals. This recognises our achievements in bringing research, teaching and clinical care more closely together for the benefit of patients.

As a teaching trust of Brighton and Sussex Medical School we have a national reputation for leading-edge research. During 2013-14 our research activity generated £1.6 million income. We are now one of the most influential, effective and well-respected mental health trusts in the country, and, as a teaching trust of Brighton and Sussex Medical School: We started as Sussex Partnership NHS trust in April 2006 and became a Foundation Trust with teaching status in August 2008.

JOB CONTENT

Job outline:	The post will be based at Arun House, 16 Liverpool Gardens, Worthing
	BN111RY.

The post holder will provide psychiatric and physical healthcare input to patients with psychosis spectrum disorders and wide comorbidities across the age range 14 to 65. The opportunity to develop skills in multi-disciplinary working is excellent and the working environment is very friendly.

The Early Intervention team for Psychosis in Worthing manages an active caseload of around 80 clients with early psychosis aged up to 65. The service has a primary youth mental health focus and collaborates widely with relevant locality third sector organisations.

The team comprises lead practitioners of mixed professional training, a team manager, senior clinical psychologist, pharmacist, vocational support worker, administrative staff, and 0.6 of an adult psychiatry consultant.

Training Opportunities:

This post provides a wide range of training opportunities that can be flexibly incorporated into the program of each trainee depending on their needs, as detailed below. There is a specific focus on effective team working, consultative practice and risk assessment within this team.

Community psychiatry: Whilst management of first presentation psychosis is a primary focus, the team commonly manages a wide range of comorbidity and those presenting with diagnostic uncertainty require a high standard of skills in assessment.

Inpatient in-reach: A key component to consistency of patient care.

Youth mental health: This is an important element of the work of an EIP team, being mindful of developmental issues of the patient and with clear focus on flexible service engagement.

Understanding of the Mental Health Act For admissions and those on community orders.

Psychopharmacology:

Effective, safe and collaborative use of medications is a particular focus of this placement with specialist supervision from team pharmacist Nik Nikolis and Dr Chatterjee. Critical analysis of existing literature in this field is integral.

Psychotherapy:

Involvement with psychoeducation, engagement and collaborative working, family work and group therapy is available on top of the usual individual therapy exposure provided at locality level.

Research and applied audit:

The team has an active interest and experience in audit and research. Opportunities will be available to contribute to this or develop new projects.

Teaching:

Dissemination of information regarding psychosis to medical disciplines, the public and our service users and families, is a key role of EIP. Opportunities will be available for the trainee to participate in delivering such education. This team also has nursing and psychology students, and attracts regular BSMS undergraduates with whom the trainee will be encouraged to lead teaching.

Management / Leadership:

Supervised opportunities are available within the context of team operations.

Objectives of Placement:

Core Skills:

- Examinations and initiation of all necessary investigation for patients, keeping full clinical notes and ensuring the medical records information is updated according to local guidelines
- Mental State Examination
- Extended Cognitive Examination
- Physical health Examination
- Inpatient risk assessment/observations decisions
- Interviewing relatives and carers of patients
- Arranging appropriate referral to other disciplines
- Discharge summaries
- Communication and team-working skills
- Engagement with multi-disciplinary team
- Regular presentation of full psychiatric cases either in the ward round or to Clinical Supervisor
- Participation in out-or-hours assessments

Educational objectives for Grade:

- This post begins shadowing senior consultants and doctors on unit with the expectation for the responsibilities to gradually increase based on training, confidence, exposure, and interest
- Learn skills in assessment, diagnosis and management of common psychiatric disorders.
- Gain experience about risk assessment.
- Learn basic psychopharmacology and gain experience in using common psychotropic drugs.
- Learn how to work with a multi-disciplinary team and in time management.
- Participate in ward rounds and nursing handovers, direct patient care opportunities, and ancillary assessments.
- Learning opportunities available to work with the more complex and challenging cases, including treatment resistance, comorbid personality disorders and high risk patients.
- Gain experience in report writing, summaries and letters.
- Legal aspects will be addressed with regard to Mental Health Act, Mental Capacity Act, tribunals, sectioning, and leave.
- Develop competence in the use of the Mental Health Act.
- Gain experience in managing acute psychiatric emergencies.

Education and Training	 Active in-house teaching under the supervision of college tutor which includes case presentations, critical review of papers and audit presentations. Attendance at in-house postgraduate teaching is essential (Wednesday p.m.) Weekly one hour supervision with Clinical Supervisor. Study leave within HE KSS guidelines. Trainee forum, psychodynamic psychotherapy seminars and supervision Attendance to Balint Group, which forms part of the in-house postgraduate teaching. Short Case CBT relevant to level of training. Curricula and guidance Royal College of Psychiatrists 2019
Research and Quality Improvement:	Research and audit is encouraged and opportunities may be available and tailored to individual trainee needs.
Emergencies:	The post holder accepts that he/she will also perform duties in occasional emergencies and unforeseen circumstance at the request of the appropriate consultant in consultation. The job description includes cover of normal annual and study leave of colleagues for whom the practitioner is expected to deputise during normal run of duties.

Indicative Timetable – subject to change

	Monday	Tuesday	Wednesday	Thursday	Friday
am	0930-1030: EIS zoning MDT 1030-1300- EIS clinical activity (remotely or at Arun House) 1300-1400: flexible lunch break	0930-1100: EIS clinical MDT at Arun House 1100-1230- EIS patient reviews 1230-1300: flexible lunch break	0930-1030: EIS zoning MDT at Arun House 1030-1300: EIS home visits/ depot clinics with team LP/ Clinical audit/ research	0930-1230: EIS patient reviews at Arun House or training with local placement supervision group (e.g. in-reach work at Meadowfield Hospital, shadowing CRHT or MHLT at WGH, etc.)	0930-1030: EIS zoning MDT at Arun House 1030-1230: EIS clinical activity

			1300-1330: flexible lunch break	1230-1300: flexible lunch break	1230-1300: flexible lunch break
pm	1400-1500: Balint group participation 1500-1700: Clinical Admin	1300-1400: EIS case formulation, team reflective space 1400-1700: clinical admin/audit	1400-1600: local or trust-wide Academic Programme 1600-1700: self- directed learning/ reflective space	Clinical admin	1300-1400: weekly supervision 1400-1500: group learning/ teaching session with University students 1500-1700: self-directed learning/ audit/ admin

Incorporated within the above work schedule will be 2 hours per week non-clinical Professional Development Time (PDT), as mandated by The Foundation School. The PDT time is to be used for self-directed learning, e-learning (this does not include trusts mandatory e-learning, i.e. Induction or annual update), meetings with ES's and CS's, portfolio work.

Placement Matrix

The following provides an indication as to what extent the core training syllabus areas may be met during a specific placement

None of the syllabus areas should be expected to be met in this placement
To some extent/limited opportunity (positive or negative e.g. positive in that you may be able to experience this outcome)
To a great extent/ample opportunities

Good Medical Practice Domain	Intended Learning Outcomes (ILOs)	Specific Opportunities	Expect to achieve
Domain 1:	ILO1:		
Knowledge, skills and performance	Be able to perform specialist assessment of patients and document relevant history and	On call assessments including;	
	examination on culturally diverse patient to include:	Inpatient admissions	
	Presenting or main complaintHistory of present illness	Inpatient reviews	
	Past medical and psychiatric historySystemic history	Mental Health Act assessments	
	Socio-cultural history Family history	e	

Developmental history	Reviewed in supervision and	
a. Clinical history	assessed by WPBA including CBD	
b. Patient examination		
ILO2: Demonstrate the ability to construct formulations of patients problems that include appropriate	On call assessments including	
differential diagnoses a. Diagnosis	Inpatient admissions	
b. Formulation	Inpatient reviews	
	Mental health Act assessments	
ILO3:		
Demonstrate the ability to recommend relevant investigation and treatment in the context of the	On call assessments including	
clinical management plan. This will include the ability to develop and document an investigation	Inpatient admissions	
plan including appropriate medical, laboratory, radiological and psychological investigations and then to construct a comprehensive treatment	Inpatient reviews	
plan addressing biological, psychological and socio-cultural domains	Mental health Act assessments	
a. Individual considerationb. Investigationc. Treatment planningd. Substance misuse	Reviewed in supervision and assessed by WPBA including CBD	
ILO4:		
Based on a comprehensive psychiatric assessment, demonstrate the ability to	On call assessments including	
comprehensively assess and document	Inpatient admissions	
patient's potential for self-harm or harm to others. This will be displayed whenever	Inpatient reviews	
appropriate, including in emergencies	Mental health Act assessments	
a. All clinical situations	Reviewed in supervision and	
b. Psychiatric emergencies for all specialties c. Mental health legislation	assessed by WPBA including CBD	
d. Broader legal framework	assessed by WF bh illidually CBD	
	Discussed at team meetings, academic meetings and Balint Group	
ILO5:		

T	T	
Based on the full psychiatric assessment,	On call assessments including	
demonstrate the ability to conduct therapeutic interviews; that is to collect and use clinically		
relevant material. The doctor will also	Inpatient admissions	
demonstrate the ability to conduct a range of individual, group and family therapies using standard accepted models and to integrate these	Inpatient reviews	
psychotherapies into everyday treatment, including biological and socio-cultural interventions.	Mental health Act assessments	
interventions.	Reviewed in supervision and assessed by WPBA including CBD	
	Interaction with the team psychologist as team meeting and for ad hoc discussions	
	Observing senior clinician interviews in clinic or ward rounds	
ILO6: Demonstrate the ability to concisely, accurately and legibly record appropriate aspects of the clinical assessment and management plan.	Clinical recording keeping in the form of system one entries	
	Letters/communications to GPs and other agencies	
	Reviewed in supervision and assessed by WPBA including CBD	
ILO7: Develop the ability to carry out specialist assessment and treatment of patients with chronic and severe mental disorders and to demonstrate effective management of these	On call assessments including Inpatient admissions	
disease states.	Inpatient reviews	
	Mental health Act assessments	
	Reviewed in supervision and assessed by WPBA including CBD	
ILO8: To develop an understanding of research methodology and critical appraisal of thee research literature, research techniques	Opportunity to engage in weekly journal club	

		T	
	Evaluation and critical appraisal of research literature a. Research techniques	Attend MRCPscych course (if applicable) Research opportunities available	
	b. Evaluation and critical appraisal of research	through supervisor or research department	
		Attend Annual Trust Research Day	
	ILO9: To develop the habits of lifelong learning	Register for NHS Athens	
	a. Maintaining good medical practiceb. Lifelong learningc. Relevance of outside bodies	Make use of Library services (in person or online)	
		Read journal, attend academic programme and use CPD appropriately (e.g. attend conferences)	
Domain 2: Safety and Quality	ILO10: Develop the ability to conduct and complete audit in clinical practice	Opportunity to complete an audit facilitated by supervisor	
	ILO11: To develop an understanding of the implementation of clinical governance	Attend governance meetings such as QAG, MAC, acute care forum, LFG IEB	
	ILO12: To develop reflective practice including self-	Active engagement in portfolio	
	reflection as an essential element of safe and effective psychiatric clinical practice a. Reflective practice	Reflecting on complaints of SI	
	b. Complaints c. Personal health	Declaring any health issues Reviewed in supervision	
Domain 3: Communication, partnership and	ILO13: Use effective communication with patients,	On call assessments including Inpatient admissions	
teamwork	relatives and colleagues. This includes the ability to conduct interview in a manner that facilitates information gathering and the formation of	Inpatient reviews	
	therapeutic alliances	Mental health Act assessments	

	T	1	
		Reviewed in supervision	
	IL014: Demonstrate the ability to work effectively with colleagues, including team working	Reviewed in supervision and through multi-source feedback	
	ILO15: Develop appropriate leadership skills	Opportunity to take on leadership project and complete LEADER form Reviewed in supervision	
		Kevieweu iii supervision	
	ILO16: Demonstrate the knowledge, skills and behaviours to manage time and problems	Agree schedule with supervisor at start of placement	
	effectively	Maintain a dairy	
	a. Time management b. Communication with colleagues c. Decision making	Prioritise workload	
	d. Continuity of care	Report working in excess of hours through exit reporting	
		Reviewed in supervision	
	ILO17: To develop the ability to teach, assess and appraise a. The skills, attitudes, behaviours and practices	Opportunities to teach medical students, junior trainees and multi-disciplinary teaching within team	
	of a competent teacher b. Assessment c. Appraisal	Participation at the weekly academic meetings	
		Assessed through Assessment of Teaching WPBA	
Domain 4:			
Maintaining trust	To ensure that the doctor is able to inform and educate patients effectively	Inpatient reviews Supervisor observed assessments	
	 a. Educating patients about illness and its treatment b. Environmental and lifestyle factors 	Reviewed in supervision	
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ILO19
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O19:

To ensure that the doctor acts in a professional manner at all times

- a. Doctor patient relationship
- b. Valuing diversity
- c. Confidentiality
- d. Consent
- e. Recognise own limitation
- f. Probity

All clinical activity

Reviewed in supervision

Assessment through multi-source feedback and supervision

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POST 14

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GENERAL PRACTICE

DEPARTMENT

General Practice

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Clinical aspects of primary care including MDT working; weekly tutorial with myself and weekly tutorial with local Community Educational Supervisor (CES). Workplace-based assessments as per F2 ePortfolio requirements

WHERE THE PLACEMENT IS BASED

GP Surgery within the Worthing and Adur area

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

General Practitioner based at Practice

MAIN DUTIES OF THE PLACEMENT

Day-to-day GP, lots of patient contact and clinical work, following patients up, requesting and reviewing investigations, referring for further care

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Fri:

PM:

Sun: AM:

PM:

On call requirements: None

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POST 13

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - DIABETES & ENDOCRINOLOGY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Mainly ward work, sometimes possible to attend one endocrine clinic a week

WHERE THE PLACEMENT IS BASED

Beacon / Castle Ward, Worthing Hospital

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Eleni Karathanasi / Dr Andrew Ghabbour

MAIN DUTIES OF THE PLACEMENT

Management of general medical inpatients, with a flavour of diabetes!

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Tues: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Weds: AM: Ward round/ward jobs

PM: Protected Foundation Teaching / Optional clinics

Thurs: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Fri: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Sat: AM:

PM:

Sun: AM:

PM:

On call requirements: Usually one weekend a month and one night a week. During the placement you'll usually do one week and one weekend of night shifts.

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POST 12

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GASTROENTEROLOGY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

The care of in patients with general medical and gastroenterological disease

WHERE THE PLACEMENT IS BASED

Eastbrook

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Anna Roskilly

MAIN DUTIES OF THE PLACEMENT

Participate in the care of patients under the supervision of the Gastroenterology consultants. Participate in the acute medical take. Opportunities to observe endoscopy sessions, clinics and specialist clinical meetings.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Tues: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Weds: AM: Ward round/ward jobs

PM: Protected Foundation Teaching / Optional clinics

Thurs: AM: Ward round/ward jobs

PM: Ward round/ward jobs

AM: Ward round/ward jobs PM: Ward round/ward jobs

Sat: AM:

Fri:

PM:

Sun:	AM

PM:

On call requirements: Usually one weekend a month and one night a week. During the placement you'll usually do one week and one weekend of night shifts.

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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- Teamwork
- Respect
- Professionalism
- Inclusion

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/007/F2/001

POST 11

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - CARDIOLOGY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

There is always something interesting to do on the ward such as ascetic drains, pleural taps, LPs and the cases are varied.

WHERE THE PLACEMENT IS BASED

Courtlands ward, CCU and Eartham ward (latter for heart failure)

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Kathy Webb-Peploe / Dr Sujay Chandran

MAIN DUTIES OF THE PLACEMENT

It is largely ward based with around 15 patients on Courtlands/CCU and around 6 heart failure patients on Eartham. Courtlands also sometimes has renal outliers who are looked after by the renal team. Patients on Courtlands/CCU consist of those who have had elective angio/PCI as well as general medical patients. Duties include taking part in ward rounds, arranging investigations, monitoring bloods, managing acutely unwell patients, liaising with other medical teams as required, clerking patients admitted directly to CCU. Every other Friday there is a cardioversion list which you will be allowed to do also. Every Wednesday afternoon Dr Dissanayake has an outpatient clinic which you are encouraged to attend and see patients. You are always welcome in the cath lab and all of the consultants are happy to do teaching.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Tues: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Weds: AM: Ward round/ward jobs

PM: Protected Foundation Teaching / Optional clinics

Thurs: AM: Ward round/ward jobs

PM: Ward round/ward jobs

AM: Ward round/ward jobs

PM: Ward round/ward jobs, (every other week PM – cardioversion list)

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Usually one weekend a month and two evenings every fortnight. During the placement you'll usually do one week and one weekend of night shifts.

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University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/004/F2/001

POST 10

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - RESPIRATORY

DEPARTMENT

General Internal Medicine

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

The respiratory team comprises two firms looking after around 30-35 patients. As an F2 you will be expected to provide day to day care of around half of these patients with the help of the core trainees. We are supported also by 2 respiratory specialist trainee registrars. You will get experience in a wide range of common respiratory problems including infection, respiratory failure, lung oncology, interstitial lung disease and pleural disease. You will have opportunity to undertake pleural procedures, attend bronchoscopy, and attend general respiratory, respiratory oncology and airways disease clinics and CPET clinics. We have a regular 'in-house' weekly foundation focused teaching session on a Friday morning which everyone attends. There are a range of lunchtime learning opportunities based on lectures that happen in the WHEC during the week.

WHERE THE PLACEMENT IS BASED

Eastbrook Ward and Eartham Ward and Worthing Hospital.

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Nick Adams / Dr Numbere Numbere

MAIN DUTIES OF THE PLACEMENT

Day to day care of general medical and respiratory inpatients, working in collaboration with the core trainees and SpRs on the two firms including clinical assessment, prescribing, discharge planning and discharge notification. Weekly social MDT meeting attendance (Tues 12.30pm Eastbrook ward). Liaison and communication with the general medical nursing staff on the ward, discharge co-ordinators. Referrals to other specialties within the hospital and occasionally to other units (as guided by consultants). Formulating and communicating weekend handover plans. Weekly meeting with the respiratory support secretary to ensure follow-up plans in place.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Tues: AM: Ward round/ward jobs

PM: Ward round/ward jobs

Weds: AM: Ward round/ward jobs

PM: Protected Foundation Teaching

Thurs: AM: Ward round/ward jobs

PM: Ward round/ward jobs

AM: Ward round/ward jobs

PM: Ward round/ward jobs

Sat: AM:

Fri:

PM:
Sun: AM:
PM:

On call requirements: Usually one weekend a month and one night a week. During the placement you'll usually do one week and one weekend of night shifts.

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F2/005

POST 09

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Learning opportunities are mainly based around patients on the ward (this may be general, hip fracture or stroke) and those who are admitted.

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care.

Multidisciplinary working. Opportunity to attend OP clinics. Lunchtime teaching 3 days per week.

WHERE THE PLACEMENT IS BASED

Botolphs/Buckingham/Ditchling/Durrington/Barrow/Broadwater/Becket ward

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Rajen Patel / Dr Ai-Lyn Yeo /Dr Ai Lyn Yeo / Dr Peter Williams / Dr Charlotte Kirk / Dr Nabarun Sengupta / Dr Gary French / Dr David Hunt

MAIN DUTIES OF THE PLACEMENT

Inpatient care of frail elderly patients with multiple comorbidities

On call, you will be admitting frail elderly with medical illness, stroke/TIA admissions of all ages, including acute thrombolysis, and you will be providing ward cover.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Handover / ward work / acute admissions / medical grand round

PM: Handover / ward work / acute admissions / medical grand round

Tues: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Weds: AM: Handover / ward work / acute admissions

PM: Protected Foundation Teaching

Thurs: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions
AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: 1 in 7. You will be on call approximately once a week, approximately 1 in 4 weekends (one of which is a weekend of nights) and have 2 weeks of nights over the 4 month placement.

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/030/F2/002

POST 02

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 – EMERGENCY MEDICINE

DEPARTMENT

Emergency Department

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

24/7 senior cover with a weekly teaching programme off the shop floor

WHERE THE PLACEMENT IS BASED

Accident & Emergency

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

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Mary Campbell/Dr Reinette Daniell/Dr Shaun Pitt/Dr Helen Milne

MAIN DUTIES OF THE PLACEMENT

To see emergency patients alongside senior cover

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Acute admissions / handover

PM: Acute admissions / handover

Tues: AM: Acute admissions / handover

PM: Acute admissions / handover

Weds: AM: Acute admissions / handover

PM: Protected Foundation Teaching

Thurs: AM: Acute admissions / handover

PM: Acute admissions / handover

AM: Acute admissions / handover

PM: Acute admissions / handover

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Shift work to cover a 24/7 timetable alongside 10 colleagues at the same level within the Emergency Department. Thus 1 in 10 nights.

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F2/004

POST 08

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Learning opportunities are mainly based around patients on the ward (this may be general, hip fracture or stroke) and those who are admitted.

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care.

Multidisciplinary working. Opportunity to attend OP clinics. Lunchtime teaching 3 days per week.

WHERE THE PLACEMENT IS BASED

Botolphs/Buckingham/Ditchling/Durrington/Barrow/Broadwater/Becket ward

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Rajen Patel / Dr Ai-Lyn Yeo /Dr Ai Lyn Yeo / Dr Peter Williams / Dr Charlotte Kirk / Dr Nabarun Sengupta / Dr Gary French / Dr David Hunt

MAIN DUTIES OF THE PLACEMENT

Inpatient care of frail elderly patients with multiple comorbidities

On call, you will be admitting frail elderly with medical illness, stroke/TIA admissions of all ages, including acute thrombolysis, and you will be providing ward cover.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Handover / ward work / acute admissions / medical grand round

PM: Handover / ward work / acute admissions / medical grand round

Tues: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Weds: AM: Handover / ward work / acute admissions

PM: Protected Foundation Teaching

Thurs: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: 1 in 7. You will be on call approximately once a week, approximately 1 in 4 weekends (one of which is a weekend of nights) and have 2 weeks of nights over the 4 month placement.

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/030/F2/001

POST 01

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 – EMERGENCY MEDICINE

DEPARTMENT

Emergency Department

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Working in a busy DGH Emergency Department with dedicated paediatric facilities

24/7 Consultant and Registrar cover with both shop floor teaching and a weekly teaching programme

Opportunities to undertake audit, safety improvement projects and clinical presentations Ideal environment to learn new procedures, gain exposure to multitude of patient presentations and improve all clinical skills

WHERE THE PLACEMENT IS BASED

Accident & Emergency

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Mary Campbell/Dr Reinette Daniell/Dr Shaun Pitt/Dr Helen Milne

MAIN DUTIES OF THE PLACEMENT

To see, treat and manage emergency patients with support from senior cover. Working in resus, majors, minors and paediatrics areas of the Emergency Department alongside senior doctors, specialist nurse and physio practitioners

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Acute admissions / handover

PM: Acute admissions / handover

Tues: AM: Acute admissions / handover

PM: Acute admissions / handover

Weds: AM: Acute admissions / handover

PM: Protected Foundation Teaching

Thurs: AM: Acute admissions / handover

PM: Acute admissions / handover

AM: Acute admissions / handover

PM: Acute admissions / handover

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Shift work to cover a 24/7 timetable alongside 10 colleagues at the same level within the Emergency Department. Thus 1 in 10 nights.

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SITE

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TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F2/003

POST 07

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

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Learning opportunities are mainly based around patients on the ward (this may be general, hip fracture or stroke) and those who are admitted.

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care.

Multidisciplinary working. Opportunity to attend OP clinics. Lunchtime teaching 3 days per week.

WHERE THE PLACEMENT IS BASED

Botolphs/Buckingham/Ditchling/Durrington/Barrow/Broadwater/Becket ward

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Rajen Patel / Dr Ai-Lyn Yeo /Dr Ai Lyn Yeo / Dr Peter Williams / Dr Charlotte Kirk / Dr Nabarun Sengupta / Dr Gary French / Dr David Hunt

MAIN DUTIES OF THE PLACEMENT

Inpatient care of frail elderly patients with multiple comorbidities

On call, you will be admitting frail elderly with medical illness, stroke/TIA admissions of all ages, including acute thrombolysis, and you will be providing ward cover.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Handover / ward work / acute admissions / medical grand round

PM: Handover / ward work / acute admissions / medical grand round

Tues: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Weds: AM: Handover / ward work / acute admissions

PM: Protected Foundation Teaching

Thurs: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions
AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: 1 in 7. You will be on call approximately once a week, approximately 1 in 4 weekends (one of which is a weekend of nights) and have 2 weeks of nights over the 4 month placement.

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F2/001 / KSS/RYR18/011/F2/006

POST 06

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Learning opportunities are mainly based around patients on one ward (this may be general, hip fracture or stroke) and those who are admitted.

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care.

Multidisciplinary working. Opportunity to attend OP clinics. Lunchtime teaching 3 days per week.

WHERE THE PLACEMENT IS BASED

Botolphs/Buckingham/Ditchling/Durrington/Barrow/Broadwater/Becket ward, Worthing Hospital

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Rajen Patel / Dr Ai-Lyn Yeo /Dr Ai Lyn Yeo / Dr Peter Williams / Dr Charlotte Kirk / Dr Nabarun Sengupta / Dr Gary French / Dr David Hunt

MAIN DUTIES OF THE PLACEMENT

Inpatient care of frail elderly patients with multiple comorbidities

On call, you will be admitting frail elderly with medical illness, stroke/TIA admissions of all ages, including acute thrombolysis, and you will be providing ward cover.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Handover / ward work / acute admissions / medical grand round

PM: Handover / ward work / acute admissions / medical grand round

Tues: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Weds: AM: Handover / ward work / acute admissions

PM: Protected Foundation Teaching

Thurs: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Fri: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Sat:	AM:			
	PM:			
Sun:	AM:			
	PM:			

On call requirements: 1 in 7. You will be on call approximately once a week, approximately 1 in 4 weekends (one of which is a weekend of nights) and have 2 weeks of nights over the 4 month placement.

LOCAL EDUCATION PROVIDER (LEP) / EMPLOYER INFORMATION

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- Compassion
- Communication
- Teamwork
- Respect
- Professionalism
- Inclusion

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Foundation Programme Individual Placement Descriptor*

TRUST

University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust)

SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/011/F2/001

POST 05

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 - GERIATRICS

DEPARTMENT

Department of Medicine for the Elderly (DoME)

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

Learning opportunities are mainly based around patients on one ward (this may be general, hip fracture or stroke) and those who are admitted.

Assessment and management of frail elderly patients with multiple co-morbidities, including complex discharge planning, communication, ethics and end of life care.

Multidisciplinary working. Opportunity to attend OP clinics. Lunchtime teaching 3 days per week.

WHERE THE PLACEMENT IS BASED

Botolphs/Buckingham/Ditchling/Durrington/Barrow/Broadwater/Becket ward, Worthing Hospital

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Rajen Patel / Dr Ai-Lyn Yeo /Dr Ai Lyn Yeo / Dr Peter Williams / Dr Charlotte Kirk / Dr Nabarun Sengupta / Dr Gary French / Dr David Hunt

MAIN DUTIES OF THE PLACEMENT

Inpatient care of frail elderly patients with multiple comorbidities

On call, you will be admitting frail elderly with medical illness, stroke/TIA admissions of all ages, including acute thrombolysis, and you will be providing ward cover.

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Handover / ward work / acute admissions / medical grand round

PM: Handover / ward work / acute admissions / medical grand round

Tues: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Weds: AM: Handover / ward work / acute admissions

PM: Protected Foundation Teaching

Thurs: AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

AM: Handover / ward work / acute admissions

PM: Handover / ward work / acute admissions

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Shift work to cover a 24/7 timetable alongside 10 colleagues at the same level within the Emergency Department. Thus 1 in 10 nights.

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Foundation Programme Individual Placement Descriptor*

TRUST University Hospitals Sussex NHS Foundation Trust (West) (formerly Western Sussex Hospitals NHS Foundation Trust) SITE Worthing TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known) KSS/RYR18/030/F2/004 POST 04 PLACEMENT DETAILS (i.e. the specialty and sub-specialty) F2 - EMERGENCY MEDICINE

DEPARTMENT

Emergency Department

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TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

24/7 senior cover with a weekly teaching programme off the shop floor

WHERE THE PLACEMENT IS BASED

Accident & Emergency

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Mary Campbell/Dr Reinette Daniell/Dr Shaun Pitt/Dr Helen Milne

MAIN DUTIES OF THE PLACEMENT

To see emergency patients alongside senior cover

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Acute admissions / handover

PM: Acute admissions / handover

Tues: AM: Acute admissions / handover

PM: Acute admissions / handover

Weds: AM: Acute admissions / handover

PM: Protected Foundation Teaching

Thurs: AM: Acute admissions / handover

PM: Acute admissions / handover

AM: Acute admissions / handover

PM: Acute admissions / handover

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Shift work to cover a 24/7 timetable alongside 10 colleagues at the same level within the Emergency Department. Thus 1 in 10 nights.

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SITE

Worthing

TRAINEE INFORMATION SYSTEM (TIS)Post Code (and local post number if known)

KSS/RYR18/030/F2/003

POST 03

PLACEMENT DETAILS (i.e. the specialty and sub-specialty)

F2 – EMERGENCY MEDICINE

DEPARTMENT

Emergency Department

TYPE OF WORK TO EXPECT AND LEARNING OPPORTUNITIES

24/7 senior cover with a weekly teaching programme off the shop floor

WHERE THE PLACEMENT IS BASED

Accident & Emergency

Tues:

CLINICAL SUPERVISOR(S) FOR THE PLACEMENT

Dr Mary Campbell/Dr Reinette Daniell/Dr Shaun Pitt/Dr Helen Miln e

MAIN DUTIES OF THE PLACEMENT

To see emergency patients alongside senior cover

TYPICAL WORKING PATTERN IN THIS PLACEMENT (e.g. ward rounds, clinics, theatre sessions)

Mon: AM: Acute admissions / handover

PM: Acute admissions / handover
AM: Acute admissions / handover

PM: Acute admissions / handover

Weds: AM: Acute admissions / handover

PM: Protected Foundation Teaching

Thurs: AM: Acute admissions / handover

PM: Acute admissions / handover AM: Acute admissions / handover

PM: Acute admissions / handover

Sat: AM:

Fri:

PM:

Sun: AM:

PM:

On call requirements: Shift work to cover a 24/7 timetable alongside 10 colleagues at the same level within the Emergency Department. Thus 1 in 10 nights.

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Foundation Programme – Year 2 Individual Placement Descriptor

Job Title: Foundation Year 2

Directorate: WAMH Services

Supervisor: Dr Anthony Ahwe Consultant Psychiatrist

Base: Maple Ward Meadowfield Hospital

Hours of Work: 40 Hours with full shift rota pattern

Guardian of Safe Working: Dr Sarah James

National Post Number:

Handover: As required by the scheme

INTRODUCTION

Sussex Partnership NHS Foundation Trust consists of some 4,500 passionate and dedicated clinicians and support staff, working hand in hand with partners in the community to care for and support vulnerable people. We provide NHS care and treatment for people living in Brighton and Hove, East and West Sussex and Hampshire. We also provide a range of specialist services across south east England.

We are one of the largest providers of children and young people's mental health services in England, delivering community services in Sussex and Hampshire. We provide services in places including hospital (we have about 650 inpatients beds), people's homes, community centres, GP practices and prison. Our services in Sussex care for people with mental health problems, learning disabilities and an addiction to drugs or alcohol.

We are one of the few mental health organisations to have been granted university status by the Association of UK University Hospitals. This recognises our achievements in bringing research, teaching and clinical care more closely together for the benefit of patients.

As a teaching trust of Brighton and Sussex Medical School we have a national reputation for leading-edge research. During 2013-14 our research activity generated £1.6 million income. We are now one of the most influential, effective and well-respected mental health trusts in the country, and, as a teaching trust of Brighton and Sussex Medical School: We started as Sussex Partnership NHS trust in April 2006 and became a Foundation Trust with teaching status in August 2008.

JOB CONTENT

Job outline:	This is a FY2 post based at Maple Ward, Meadowfield.		
	This is a 4 month placement , as part of the Year 2 of the South Thames Foundation School training programme.		
	The philosophy of the Acute Services is one of empowerment for the individual, aiming to establish a partnership with patients and carers so that they can make informed decisions about the management of their illness.		

The aim is to admit patients only when their needs cannot be met by the community-based services, and to use these other teams including crisis resolution team to facilitate discharge.

Acute In-patient services are based on maple ward in Meadowfield Hospital, a 17 bedded mixed inpatient unit. Patients who need special care (PICU) are admitted to Langley Green Hospital. Apart from the patients admitted from the working age teams, the ward is also provides admissions for EIS patient, LD patients and AOT /rehab patients for the Western locality. The post therefore provides exposure to a wide variety of interesting clinical presentations. There is good liaison with carers, community and specialist teams.

You would be working with enthusiastic, dynamic and creative teams which include OT, ward pharmacists, art therapist and a psychologist. Patients are encouraged to complete a WRAP. The other acute inpatient wards located in Meadowfiedl Hospital are on Rowan ward for working age Adult and Larch ward for OPMH.

The ward consultant, Dr Ahwe, has a full time core trainee who provides day to day cover medical for the ward and an experienced associate specialist who works on both adult wards.

The Foundation doctor would be expected to take an active role with the inpatient team and to develop both their clinical and leadership skills. This will involve attending the multidisciplinary reviews to formulate care plans, risk management plans and discharge plans. Often this will be done with the Dr Ahwe but, during periods of his leave, the associate specialist would be expected to conduct the reviews and support the foundation doctor.

We consider working with carers and relatives to be crucial; an important part on the in-patient role is to liaise with relatives and carers —the "Triangle of Care

There is an active teaching programme based at the chantonbury building on site attended by all medical staff. The post-holder will be expected to present an interesting and challenging case and critically appraise a journal article at the postgraduate academic centre.

Final year medical students from Brighton and Sussex Medical School undertake clinical placements in the locality, and there are plenty of opportunities to acquire and develop teaching skills. The participation of an audit project and would be encouraged.

Office space, IT and secretarial support will be provided at Meadowfield Hospital.

Clinical Responsibilities:

The trainee will be given Trust and local induction and after a period of shadowing with other members of the team will be given the opportunities to work with mentally disordered individuals of working age (18-70) including outpatients clinics, crisis assessments, home visits, mental health act assessments and liaising with GPs under the supervision of a consultant psychiatrist.

Clinical Supervision:	The trainee will always have direct access to an appropriate senior colleague for advice in any clinical situation. In most situations between 9:00-17:00 this will be the Consultant of the team, who will also act as the clinical supervisor for training and quality assurance purposes and will offer on average one hour per week direct face to face clinical supervision. On occasion this senior person may be a non-doctor competent to supervise and advise on the relevant activities. When working out of hours (on-call), there is always an arrangement where an inpatient MDT, Liaison Service, Senior Nurse Practitioner and more experienced trainees and/or a Consultant will be available for this supervision and advice, either on the phone or on-site.
Teaching and competences expected to be	This post is conducive to developing the vast majority of the generic competencies required by the Foundation Programme Curriculum.
achieved:	The placement is designed to help the trainee experience and develop Good Clinical Care in the management of acute mental disorder and self-harm management of patients with long-term mental health disorder and disabilities, including safe prescribing, record-keeping and correspondence, interface with other professionals.
	There is a formal educational program organised by the Trust most Wednesday afternoons at the Department of Psychiatry, Eastbourne District General Hospital. If allowed by the programme, the trainee will also have the opportunity to take part in case presentations, journal clubs and Balint Groups of psychotherapy with other trainees. The post holder will have the flexibility to attend other Foundation programme teaching activities with his/her peer group at the local Acute Hospital with prior agreement.
Education and Training:	 Active in-house teaching under the supervision of college tutor which includes case presentations, critical review of papers and audit presentations. Attendance at in-house postgraduate teaching is essential (Wednesday p.m.) Weekly one hour supervision with Educational Supervisor. Trainee forum, psychodynamic psychotherapy seminars and supervision Appraisal. Attendance to Balint Group, which forms part of the in-house postgraduate teaching.
Research and Quality Improvement:	Research and audit is encouraged and opportunities may be available and tailored to individual trainee needs.
Emergencies:	The post holder accepts that he/she will also perform duties in occasional emergencies and unforeseen circumstance at the request of the appropriate consultant in consultation. The job description includes cover of normal annual and study leave of colleagues for whom the practitioner is expected to deputise during normal run of duties.

	Monday	Tuesday	Wednesday	Thursday	Friday
am	MDT handover meeting 9am to 10am Ward round	St Richards – EM teaching	MDT handover meeting 9am to 10am Ward round	MDT handover meeting 9am to 10am Ward work	MDT handover meeting 9am to 10am Ward round
pm	Balint group 1pm to 2pm Ward work 2pm to 5pm	St Richards - EM teaching	Postgraduate academic teaching 1pm to 5pm	Ward work	Supervision 3pm to 4pm

Incorporated within the above work schedule will be 2 hours per week non-clinical Professional Development Time (PDT), as mandated by The Foundation School. The PDT time is to be used for self-directed learning, e-learning (this does not include trusts mandatory e-learning, i.e. Induction or annual update), meetings with ES's and CS's, portfolio work.

Supervision:	Expectations for supervision:
	This job description briefly describes the training placement and outlines an timetable (subject to change) which includes an identified time for one hour per week one-to-one supervision but may be delivered in a group with other trainees that your supervisor is responsible for.
	Ad hoc supervision about clinical matters happens outside of this, i.e. discussing a patient.
	Please contact your locality tutor if supervision is not happening as per the guidelines above

Foundation Programme Curriculum 2016 – Placement Matrix

The following table provides an indication as to what extent the Foundation Programme Curriculum 2016 syllabus areas may be met during a specific placement.

None of the syllabus areas should be expected to be met in this placement
To some extent/limited opportunity (positive or negative e.g. positive in that you may be able to experience this outcome)
To a great extent/ample opportunities

	Syllabus	Syllabus details	Expect to achieve
1:	Professional behaviour	F2 Acts in accordance with GMC guidance in all interactions with patients, relatives/carers and colleagues	

	1		1
Knowledge, skills and performance		Acts as a role model for medical students, other doctors and healthcare workers	
		Acts as a responsible employee and complies with local and national requirements e.g.	
		 Completing mandatory training Ensuring immunisation against communicable diseases Engaging in appraisal and assessment Taking responsibility for ensuring appropriate cover during leave Adhering to local sickness and return to work policies 	
	Personal	F2	
	organisation	Supervise, support and organise other team members to ensure appropriate prioritisation, timely delivery of care and completion of work	
	Personal	F2	
	responsibility	Takes personal responsibility for clinical decision and is able to justify actions	
		Takes personal responsibility for revalidation	
		Accepts responsibility for any personal errors and takes suitable action including: seeking senior advice, apologising, making appropriate records and notifications	
2:	Patient centred	F2	
Delivers patient centred care	care	Works with patients and colleagues to develop individual care plans	
an maintains trust		Respects patients 'right to refuse treatment and/or to decline involvement in research projects	
	Trust	F2	
		Discusses management options with patients and responds to their ideas, concerns and expectations	
		Encourages patients to make informed decisions, recognises patients' expertise and helps them to acquire knowledge of their condition	
	Consent	F2	
	3523	Obtains consent for an increasing range of procedures	
		Obtains valid consent by giving each patient the information they 'want', or 'need' in a way they can understand *including 'material risks' and reasonable alternative or variant treatments	
		Recognises when consent or refusal is invalid due to lack of capacity and applies principles of 'best interests' and 'least restriction'	
	1		

	1		
		Demonstrates understanding of the principle of involving the child in the decision making process when they are able to understand and consider the options	
3:	Ethical and legal	F1 & F2	
Behaves in	requirements		
accordance with ethical and legal		Practices in accordance with guidance from the GMC, relevant legislation and national and local guidelines	
requirements	Confidentiality	F1 & F2	
		Describes and applies the principles of confidentiality in accordance with GMC guidance	
		Ensures the patient's rights of confidentiality when clinical details are discussed, recorded in notes or stored electronically	
		Complies with information governance standards regarding confidential personal information	
		Follows GMC guidance on the use of social media	
		Describes when confidential information may be shared with appropriate third parties e.g. Police and DVLA	
	Statutory	F1 & F2	
	documentation	Completes statutory documentation correctly e.g.	
		 Death certificates Statement for fitness to work Cremation forms 	
	Mental capacity	F1 & F2	
		Performs mental state examination and assessment of cognition and capacity	
		Uses and documents the 'best interests checklist' when an individual lacks capacity for a specific decision	
		Demonstrates awareness of the principles of capacity and incapacity as set out in the Mental Capacity Act 2005	
		Demonstrates understanding that there are situations when it is appropriate for others to make decisions on their behalf of patients (e.g. lasting power of attorney, and guardianship)	
		Demonstrates understanding that treatment may be provided against a patients expressed wishes in certain defined circumstances	
4:	Self-directed	F1 & F2	
Keeps practice up to date through	learning	Acts to keep abreast of educational/training requirements Maintains a comtemporaneous e-portfolio which meets training programme requirements	

Г			
learning and teaching		Demonstrates change and improvement in practice as a result of reflection on personal experience, multi-source feedback (MSF) and feedback from SLEs	
		Identifies and addresses personal learning needs	
		F2	
	Teaching and assessment	Demonstrates improvement in teaching skills as a result of seeking, accepting and reflecting on feedback from learners and supervisors	
		Assesses medical students and other healthcare professionals and provides constructive feedback	
5:		F1 & F2	
Demonstrates engagement in career planning		Discusses how to achieve career ambitions with educational supervisor	
		Maintains an e-portfolio record of evidence demonstrating realistic career goals based on	
		career guidance, self-awareness, information gathering, selection processes and discussion with colleagues	
		Maintains an e-portfolio record of activities demonstrating exploration of possible specialty career options e.g. completion of taster period and reflection on the experience	
6:	Communication	F2	
Communicate s clearly in a	with patients/relatives/	Provides the necessary / desired information	
variety of settings	carers	Communicates increasingly complex information	
		Checks patients' understanding of options and supports patients in interpreting information and evidence relevant to their condition	
		Ensures that patients are able to express concerns and preferences, ask questions and make personal choices	
		Responds to patients' queries or concerns	
		Teaches communication skills to students and colleagues	
	Communication in challenging	F2	
	circumstances	Manages consultation/communication in time limited environments e.g. outpatients, emergency departments	
		Manages consultation/communication when English is not a patient's first language, including the appropriate use of an interpreter	
		Manages three-way consultations e.g. with an interpreter, using sign language, or with a child patient and their family/carers	

	0	F0	
	Complaints	F2	
		Acts to prevent/mitigate and minimise distress in situations	
		which might lead to complaint or dissatisfaction	
		Deals appropriately with angry/distressed/dissatisfied patients/carers and seeks assistance as appropriate	
	Patient records	F1 & F2	
		Maintains accurate, legible and contemporaneous patient records and ensures that entries are signed and dated in compliance with "Standards for the structure and content of patient records Health and Social Care Information Centre / Academy of Medical Royal Colleges (AoMRC) 2013"	
	Interface with other healthcare	F2	
	professionals	Demonstrates ability to make referrals across boundaries / through networks of care (primary, secondary, tertiary)	
		Writes accurate, timely, succinct and structured clinic letters and clinical summaries	
7:	Continuity of care	F2	
Works effectively as a team		Allocates and prioritises tasks during handover.	
member		Anticipates and identifies problems for the next clinical team/shift and takes pre-emptive action where required	
	Interaction with	F2	
	colleagues	Demonstrates initiative e.g. by recognising work pressures on	
		others, providing support and organising / allocating work to optimise effectiveness within the clinical team	
8:	Leadership	F2	
Demonstrates leadership skills		Demonstrates extended leadership role within the team by making decisions and taking responsibility for managing increasingly complex situations across a greater range of clinical and non-clinical situations	
		Supervises and supports team members, e.g. supervising F1 doctors, delegating tasks appropriately, directing patient review, organising handover	
9:	Recognition of	F1 & F2	
Recognises, assesses and initiates management of the acutely	acute illness	Responds promptly to notification of deterioration or concern regarding a patient's condition e.g. change in National Early Warning Score (NEWS)	
ill patient		Prioritises tasks according to clinical urgency and reviews patients in a timely manner	
		Recognises, manages and reports transfusion reactions, according to local and national guidelines	

	Assessment of the acutely unwell patient Immediate management of the acutely unwell patient	Performs rapid, focused assessment of illness severity including physiological monitoring and also considering mental health aspects Performs prompt, rapid, focused assessment of the patient who presents an acute risk to themselves or to others in the context of mental disorder, incapacity or incompetence F2 Reassesses acutely ill patients to monitor efficacy of interventions, including those aimed at managing acute mental illness and maintaining patient safety and the safety of others Recognises when a patient should be moved to a higher level of care and seeks appropriate assistance with review and management	
		Communicates with relatives/friends/carers in acute situations and offers support	
10: Recognises, assesses and manages patients with long term conditions	Management of long term conditions in the unwell patient	F2 Performs primary review of new referrals within the hospital or outpatient clinic Cares for patients with long-term diseases during their in-patient stay, as outpatients and in the community Reviews long-term drug regime and, with senior advice, considers modifying dosage, timing and treatment. Assesses and manages the impact of long term mental disorder on the presentation and course of acute physical illness, and vice versa	
	The frail patient	Prescribes with an understanding of the impact of increasing age, weight loss and frailty on drug pharmacokinetics and pharmacodynamics Performs a comprehensive geriatric assessment (CGA) including consideration of dementia Describes the impact of activities of daily living on long-term conditions (e.g. impact of a notifiable condition on driving) and provides information / discusses these with the patients and carers	
	Support for patients with long term conditions	F2 Encourages and assists patients to make realistic decisions about their care and helps them to construct and review advance/long-term care plans Arranges appropriate assessment for specialist rehabilitation, care home placement and respite care	

	1	T-0	
	Nutrition	F2	
		Works with other healthcare professionals to address nutritional needs and communicate these during care planning	
		Recognises eating disorders, seeks senior input and refers to local specialist service	
		Formulates a plan for investigation and management of weight loss or weight gain	
11:	History	F2	
Obtains history, performs		Obtains relevant history, including mental health and collateral history, in time limited and sometimes difficult circumstances	
clinical	Physical and	F2	
examination, formulates differential diagnosis	mental state examination	Performs focused physical/mental state examination in time limited environments e.g. outpatients/general ractice/emergency department	
and management		F2	
plan	Diagnosis	Performs primary review of new referrals within the hospital or outpatient clinic	
		Reviews initial diagnoses and plans appropriate strategies for further investigation	
	Clinical	F2	
	management	Refines problem lists and management plans and develops appropriate strategies for further investigation and management	
	Clinical review	F2	
		Reprioritises problems and refines strategies for investigation and management and leads regular review of treatment response to oversee patients' progress	
	Discharge	F2	
	planning	Anticipates clinical evolution and starts planning discharge and on-going care from the time of admission	
		Liaises and communicates with the patient, family and carers and supporting teams to arrange appropriate follow up	
		Recognises and records when patients are medically, including mentally, fit for discharge	
	Discharge summaries	F1 &F2	
		Prescribes discharge medication in a timely fashion	
		Produces a clear, timely, legible discharge summary that identifies principle diagnoses, including mental health, key treatments/interventions, discharge medication and follow-up arrangements	
12:	Investigations	F2	
L		I .	

Requests, relevant investigation s and acts upon results		Minimises wasteful or inappropriate use of resources by helping and directing colleagues to order appropriate tests and investigations	
		Explains to patients the risks, possible outcomes and implications of investigation results and obtains informed consent	
	Interpretation of investigations	F2	
	investigations	Increases the range and complexity of investigations which they can interpret and helps colleagues to interpret appropriate tests and investigations	
13:	Correct	F1 & F2	
Prescribes safely	prescription	Prescribes medicines, blood products and fluids correctly, accurately and unambiguously in accordance with GMC and other guidance using correct documentation to ensure that patients receive the correct drug via the correct route at the correct frequency and at the correct time	
		Demonstrates understanding of responsibilities and restrictions with regard to prescribing high risk medicines including anticoagulation, insulin, chemotherapy and immunotherapy	
		Performs dosage calculations accurately and verifies that the dose calculated is of the right order	
		Reviews previous prescriptions and transfers/transcribes accurately and appropriately	
		Describes the potential hazards related to different routes of drug administration (e.g. oral, intramuscular, intravenous, intrathecal)	
		Follows the guidance in Good Medical Practice in relation to self- prescribing and prescribing for friends and family	
		Within the hospital, prescribes controlled drugs using appropriate legal framework and describes the management and prescribing of controlled drugs in the community	
		Describes the importance of security issues in respect of prescription	
	Clinically effective	F1 & F2	
	prescription	Prescribes and administers for common important indications including medicines required urgently in the management of medical emergencies e.g. sepsis, exacerbation of chronic obstructive pulmonary disease, pulmonary oedema, congestive cardiac failure, pain, thromboprophylaxis	
		Prescribes safely for different patient groups including frail elderly, children, women of child-bearing potential, pregnant women and those with hepato-renal dysfunction	

Prescribes and administers oxygen, fluids and antimicrobials appropriate e.g. in accordance with NICE guidance on antimicrobial and intravenous fluid therapy	sas
Chooses appropriate intravenous fluids as vehicles for intravenous drugs and calculates the correct volume and florrate	w
Assesses the need for fluid replacement therapy and choose and prescribes appropriate intravenous fluids and calculates correct volume and flow rates	
Prescribes and administers blood products safely in accorda with guidelines/protocols on safe cross matching and the use blood and blood products	
Discussion of F1 & F2	
medication with patients Discusses drug treatment and administration with patients/carers, including duration of treatment, unwanted efficiency and interactions	fects
Obtains an accurate drug history, including allergy, self- medication, use of complementary healthcare products and enquiry about allergic and other adverse reactions	
Guidance on F1 & F2	
Prescribes using all available support including local and national formularies, pharmacists and more experienced prescribers to ensure accurate, safe and effective error-free prescribing, whilst recognising that legal responsibility remains	ns
with the prescriber Prescribes according to relevant national and local guidance antimicrobial therapy, recognising the link between antimicroprescribing and the development of antimicrobial resistance	
Review of F1 & F2	
prescriptions Reviews prescriptions regularly for effectiveness and safety taking account of patient response, adverse reactions and dilevel monitoring	rug
Recognises and initiates action for common adverse effects drugs and communicates these to patients, including potenti effects on work and driving	
14: Core procedures F2	
Performs procedures safely Maintains and improves skills in the core procedures and develops skills in more challenging circumstances e.g. reliable able to perform venous cannulation in the majority of patients	
including during resuscitation	

	Other procedures	F2	
		Teaches other healthcare workers procedures when skilled and sanctioned to do this	
		Increases the range of procedures they can perform relevant to specific clinical placements	
15:		F2	
Is trained and manages cardiac and respiratory arrest		Demonstrates the initiation and performance of advanced life support including cardiopulmonary resuscitation, manual defibrillation and management of life threatening arrhythmias and is able to lead the resuscitation team where necessary Demonstrates understanding of the ethics of transplantation and identifies potential donors to senior medical staff	
	Do not attempt	F2	
	cardiopulmonary		
	resuscitation orders	Discusses DNACPR with the multidisciplinary team, the patient, long-term carers (both medical and non-medical) and relatives and then records the outcome of that discussion	
16:		F1 & F2	
Demonstrates understandin g of the principles of health		Explains to patients the possible effects of lifestyle, including the effects of diet, nutrition, inactivity, smoking, alcohol and substance abuse	
promotion and illness prevention		Recognises the impact of wider determinants of health and advises on preventative measures with reference to local and national guidelines including:	
		 Smoking cessation and supportive measures Appropriate alcohol intake levels or drinking cessation Illicit drug use and referral to support services Biohazards 	
		 Risks of UV and ionising radiation especially the harmful effects of sunlight Lack of exercise and physical/mental activity Weight management Employment 	
		 Vaccination programmes Cancer screening e.g. breast, cervical, bowel Recommends well man/women clinics 	
17:	End of Life Care	F2	
Manages palliative and end of life care		Participates in discussions regarding personalised care planning including symptom management and advance care plans with patients, family and carers	
		Discusses the patients' needs and preferences regarding care in the last days of life, including preferred place of care and death,	

		treatment escalation plans, do not attempt cardiopulmonary resuscitation (DNACPR) decisions	
	Care after death	F1 & F2 Confirms death by conducting appropriate physical examination, documenting findings in the patient record	
		Behaves professionally and compassionately when confirming and pronouncing death	
		Follows the law and statutory codes of practice governing completion of Medical Certificate of Cause of Death (MCCD) and cremation certificates.	
		Completes MCCD when trained to do so and notes details reported on the MCCD in the patient record	
		Demonstrates understanding of circumstances requiring reporting death to coroner/procurator fiscal.	
		Reports death to coroner/procurator fiscal after discussion with a senior colleague	
		Discusses the benefits of post mortem examination and explains the process to relatives/carers	
		Completes relevant sections of cremation forms when trained to do this	
18:	Personal	F1 & F2	
Recognises and works within limits	competence	Recognises and works within limits of competency	
of personal competence		Calls for senior help and advice in a timely manner and communicates concerns/expected response clearly.	
		Uses clinical guidelines and protocols, care pathways and bundles	
		Takes part in activities to maintain and develop competence e.g. seeking opportunities to do SLES and attending simulation training	
		Demonstrates evidence of reflection on practice and how this has led to personal development	
19:	Patient safety	F2	
Makes patient safety a		Describes the mechanisms to report:	
priority in clinical		Device related adverse events	
practice		Adverse drug reactions	
		to appropriate national centre and completes reports as required	

		Participates in/undertakes a project related to a patient safety issue (e.g. Quality Improvement), with recommendations for improving the reliability of care and, with senior support, takes steps to institute these	
		Discusses risk reduction strategies and principles of significant event analysis and contributes to the discussion/analysis of adverse events, including potential to identify and prevent systematic error	
	Causes of impaired performance, error or suboptimal patient care	Pescribes the role of human factors in medical errors and takes steps to minimise these Describes ways of identifying poor performance in colleagues and how to support them	
	Patient identification	F1 & F2	
		Ensures patient safety by positive identification of the patient:	
		At each encounterIn case notes	
		 When prescribing/administering drugs On collecting specimens and when requesting and reviewing investigations Before consent for surgery/procedures 	
		Uses appropriate 2 or 3 point checks (e.g.name, date of birth, hospital number, address) in accordance with local protocols and national guidance	
		Crosschecks identification immediately before procedures/administration of blood products/IV drugs	
		Usage of medical devices and information technology (IT) (n.b. this excludes implantable devices	
	Usage of medical devices and information technology (IT)	F1 & F2 Demonstrates ability to operate common medical devices and interpret non-invasive monitoring correctly and safely after appropriate training	
		Accesses and uses IT systems including local computing systems appropriately Demonstrates good information governance in use of electronic	
		records	
	Infection control	F1 & F2 Demonstrates consistently high standard of practice in infection control techniques in patient contact and treatment including hand hygiene and use of personal protective equipment (PPE)	

		Demonstrates safe aseptic technique and correctly disposes of sharps and clinical waste	
		Demonstrates adherence to local guidelines/protocols for antibiotic prescribing	
		Requests screening for any disorder which could put other patients or staff at risk by cross contamination, e.g. Clostridium.Difficile	
		Takes an active role in outbreak management within healthcare settings (e.g. diarrhoea on a ward) and complies with procedures instituted by the infection control team	
		Informs the competent authority of notifiable diseases	
		Challenges and corrects poor practice in others who are not observing best practice in infection control	
		Recognises the need for immunisations and ensures own are up to date in accordance with local/national policy	
		Takes appropriate microbiological specimens in a timely fashion with safe technique	
		Recognises the risks to patients from transmission of blood- borne infection	
20-	Ouglity		
20:	Quality	F2	
Contributes to quality improvement	improvement	Contributes significantly to at least one quality improvement project including:	
Contributes to quality	_	Contributes significantly to at least one quality improvement project including:	
Contributes to quality	_	Contributes significantly to at least one quality improvement project including: • Data collection	
Contributes to quality	_	Contributes significantly to at least one quality improvement project including:	
Contributes to quality	_	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings	
Contributes to quality	improvement	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings Implementation of recommendations Makes quality improvement link to learning/professional	
Contributes to quality	improvement Healthcare resource	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings Implementation of recommendations Makes quality improvement link to learning/professional development in e-portfolio F1 & F2	
Contributes to quality	improvement	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings Implementation of recommendations Makes quality improvement link to learning/professional development in e-portfolio	
Contributes to quality	improvement Healthcare resource	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings Implementation of recommendations Makes quality improvement link to learning/professional development in e-portfolio F1 & F2 Demonstrates understanding of the organisational structure of the NHS and independent sector and their role in the wider	
Contributes to quality	improvement Healthcare resource	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings Implementation of recommendations Makes quality improvement link to learning/professional development in e-portfolio F1 & F2 Demonstrates understanding of the organisational structure of the NHS and independent sector and their role in the wider health and social care landscape	
Contributes to quality	improvement Healthcare resource	Contributes significantly to at least one quality improvement project including: Data collection Analysis and/or presentation of findings Implementation of recommendations Makes quality improvement link to learning/professional development in e-portfolio F1 & F2 Demonstrates understanding of the organisational structure of the NHS and independent sector and their role in the wider health and social care landscape Describes hospital and departmental management structure Describes the processes of commissioning and funding, and that all healthcare professionals have a responsibility for stewardship	

	Recognises the resource implications of personal actions and minimises unnecessary/wasteful use of resources e.g. repeat investigations, delayed discharge Describes cost implications of common treatments in terms of money, equipment and human resources (e.g. generic prescribing, intravenous v oral antibiotics)	
Information management	F1 & F2 Seeks, finds, appraises and acts on information related to medical practice including primary research evidence, reviews, guidelines and care bundles	
	Critically reviews research and, where appropriate, presents finding (e.g. journal club)	

Competences expected to be achieved:

This post is conducive to **developing the vast majority of the generic competencies** required by the Foundation Programme Curriculum (2016), e.g.

Section 1: Professional behaviour and trust

Section 2: Communication, team-working and leadership

Section 3: Clinical Care

Section 4: Safety & Quality

Also the placement is designed to help the trainee experience and develop **Good Clinical**Care in the management of acute mental disorder and self-harm, management of
patients with long-term mental health disorder and disability, including safe prescribing,
record-keeping and correspondence, interface with other professionals.

The trainee by the end of the placement is anticipated to be able to:

- Elicit a basic clinical history for a common psychiatric disorder
- Perform a mental state examination for a common psychiatric disorder
- Perform a cognitive screening assessment
- Perform a risk assessment
- Make a concise case presentation and initial management plan for a common psychiatric disorder
- Write an accurate and concise report, assessment or referral

Supervised Learning Events expected to be achieved:

It is expected that the following assessments will take place:

- 1x Mini-PAT [per year]: This is a Peer Assessment Tool and involves feedback from a range of Healthcare Professionals
- 2x Mini-CEX: This involves the evaluation of an observed clinical encounter with immediate feedback from the observer
- 2x CBD: Structured case-based discussions to allow decision-making and reasoning regarding the management of a case in detail
- 1x Assessment of teaching