



***GENERAL PRACTICE
TRAINING PROGRAMME***

2010-2011

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* Deanery reference number

St Mary's GP Training Programme

Postgraduate Education Centre, St Mary's Hospital
Praed Street
London W2 1NY
Tel 020 7886 2077: fax 020 7886 6314

Programme Directors: Drs Eric Britton, Rachael Garner & Nigel Giam
Administrator: Miss Chilien Hoang

Trainers:

| | |
|-------------------|-----------------------|
| Dr Lucy Abrahams | Dr Kate Gillies |
| Dr Stephen Aras | Dr Patrick Kiernan |
| Dr Deepa Bala | Dr Hilary King |
| Dr Eric Britton | Dr Deidre O'Gallagher |
| Dr Mark Daniels | Dr Neville Pursell |
| Dr Celia Dawson | Dr Ishani Sapadoru |
| Dr Rachael Garner | Dr Andy Tate |

Clinical Supervisors:

| | |
|----------------------|----------------------------------|
| Dr Mike Bellew | Psychiatry, Gordon |
| Ms Katy Clifford | Obstetrics & Gynaecology |
| Dr Ian Chen | Dermatology |
| Dr Mike Coren | Paediatrics |
| Dr Chris Farnham | Palliative care |
| Dr Michael Fertleman | Medicine/Care of Elderly |
| Dr Linda Greene | GU Medicine |
| Dr Margaret Guy | Public Health |
| Dr Jonathan Leonard | Dermatology |
| Dr John Lowe | Psychiatry, St Charles |
| Dr Ian Maconochie | Paediatric A+E |
| Dr Sarah Marriott | Psychiatry, St Mary's |
| Dr Claire Pulford | Medicine/Care of Elderly |
| Dr Denise Forth | Palliative Care |
| Dr Richard Rees | Rheumatology |
| Dr Steven Reid | Liaison Psychiatry, St Mary's |
| Dr Shane Roche | Medicine for the Elderly |
| Dr Alan Smith | GU Medicine |
| Mr M Stafford | Obstetrics & Gynaecology C+W |
| Dr Stefan Studnik | Community Paediatrics, St Mary's |
| Dr S Chandrayee | Community Paediatrics, St Mary's |
| Dr Zohra Taousi | Psychiatry, St Charles |
| Dr Ronnie Taylor | Psychiatry, Gordon |
| Mr Robin Touquet | Accident & Emergency |
| Dr John Walsh | HIV/GU Medicine / |

MISSION STATEMENT

We aim to provide a culture of appropriate learning and reflective practice. We have a commitment to recruit and train GPs to work locally.

BACKGROUND

This long-established training scheme offers a combination of inner-city general practice and teaching hospital posts with a GP-orientated education programme.

St Mary's Hospital serves a multi-ethnic inner city area. The hospital has a long tradition of clinical teaching and is active in the integration of primary and secondary care. Additionally it offers a wide variety of tertiary speciality services.

The programmes of training are comprised of 18 months training in secondary care posts combined with 18 months of training in primary care. The final 12 months of training is spent in General Practice with intensive training with a trainer in an approved training practice.

The Training Programme offers a choice of rotations constructed from the following posts, and placements in GP training practices:

- Accident and Emergency
- GU Medicine
- GP Innovative Training Posts (ITP)
- Medicine for the Elderly
- Obstetrics and Gynaecology
- Paediatrics
- Palliative care/GU Medicine
- Psychiatry
- Public Health

During the final GP year trainees attend out-patient clinics in the following departments: Rheumatology, Ophthalmology, Gynaecology, ENT, Paediatrics, and Dermatology. One GP ST will have the opportunity to spend a full day per week in the Community Paediatric Department.

EDUCATION

The course has a commitment to learner-centred education supplemented by appropriate tutorial support. The hospital posts have protected teaching, as does the training in practices. Important elements of the course are:

Two-day residential: this mandatory annual event provides an opportunity for greater in-depth group learning and is an invaluable part of the course.

Half-day release on Wednesday afternoons: This is central to the scheme, and attendance is throughout the three years. Time is made available to attend from both the hospital and GP posts. The emphasis is on work based problem solving and small group working; with sharing of clinical and personal experience. An outside facilitator is often invited to the weekly session and responsibility for the content of the course is planned with the trainees.

Tutorials with GP trainers or Consultants.

Assessment: Work placed based assessment is delivered through the nMRCGP E-portfolio

Trainee Swaps: If requested there is opportunity for final year, GP ST3's to exchange jobs within the scheme for one week to gain experience in other training practices.

POSTS AVAILABLE

This booklet outlines the GP training practices and hospital posts in the programme. Full descriptions of the hospital posts and a copy of the standard terms and conditions of service are available from Human Resources at the relevant Trust.

ASHVILLE SURGERY

**Swan House, Parsons Green Lane,
London SW6 4HS**

Tel: 020 7371 7171 Fax: 020 7371 0101

- Partners:** Dr Stephen Aras, Dr Tamsin Graham,
Dr Carolyn Hall, Dr Jason Jenkins & Dr Nuriyah
- Trainer:** Dr Stephen Aras
- Premises:** A converted Georgian building with modern extension to the rear.
- List size:** 9400
- Practice Area:** The practice covers a mix of socio-economic groups, young professionals in 'Fulham flat-land', council estates etc, with relatively few from ethnic minorities or high deprivation groups. We are close to the Parsons Green Health Centre and Walk-In Clinic with whom we work very closely.
- On-call rota:** We have 'opted out' of Out of Hours (OOH) and the PCT now has responsibility for covering our patients overnight and at weekends. OOOH experience will be arranged with the LCW Co-op with the appropriate cover.
- Additional:** The practice was started in February 1993, and is thus the youngest practice in the area. In June 1994 we took over the list of probably the oldest-established general practice in Fulham, creating a more balanced list. We have in 2007 also taken on the list of another 'old' practice and are now approaching 10,000 patients. We are fully computerised (Vision) and 'paperless' with letters etc scanned into the records. We have on-site community nurses and physiotherapy.

EMPEROR'S GATE MEDICAL CENTRE

49 Emperor's Gate

London SW7 4HJ

Tel: 020 8237 5333

Fax: 020 8237 5344

- Partners:** Dr Hilary King, Dr Caroline Stott, Dr Maria Pankhurst
- Trainer:** Dr Hilary King
- Premises:** Converted church on one floor, premises shared with community staff employed by Kensington and Chelsea PCT
- List size:** 6300
- Practice Area:** Approximately 1-mile radius within area of SW7, SW10, W8 and SW5. The practice population represents a broad mix of socio-economic, ethnic and language groups.
- OOH Rota:** London Central and West Unscheduled Care Collaborative
- Additional:** The practice is paper light and computerised (EMIS system) and provides child health surveillance and minor surgery. Our ancillary staff include a counsellor, attached health visitor and primary care mental health worker; the district nurse team is housed in the same building. There are close undergraduate teaching links with Imperial College. Drs. Stott & Pankhurst are trainers for the Riverside VTS, and there are occasions when 2 registrars are training in the practice.

DRS HUSSEIN, GILLIES & STEEDEN'S SURGERY

7 Stanhope
Mews West
London
SW7 5RB

Tel: 020 7835 0400 Fax: 020 7835 0979

- GPS:** Dr Kate Gillies, Dr Andrew Steeden, Dr Shuman Hussein and Dr Jenny Naylor
- Trainer:** Dr Kate Gillies
- Premises:** Three Georgian terraced mews houses knocked together. Accessible, light and airy over three floors.
- Staff/Team:** Full primary care team.
- List size:** 8000 (approx)
- Practice Area:** Covers SW1, SW3, SW7, SW5, SW10, W8
- Out of Hours:** Provided by the LCW GP Co-operative. Registrar attends sessions complying with GP Deanery OOH requirements.
- Additional:** We are working towards being a paper light Practice. We use Emis LV. We provide all general medical services and participate in the Qualities and Outcomes Framework.
- We participate in nearly all of the enhanced services, IM&T, PBC, Minor Surgery (Injections and excisions), INR Clinics, and Multiple Sclerosis.
- We look after Diabetic, CVD, travel, COPD, asthma, hypertension, mental health, smoking opportunistically.
- We have 2 Practice Nurses, 3 Principal GP's and 1 salaried GP.
- We operate Emergency Clinics morning and afternoon 5 days of the week as well as regular clinics. One of the Nurses does nurse-led triage mornings and afternoons. We have a full time Healthcare Assistant; onsite District Nursing; a Baby Clinic once a week with an onsite Health Visitor; an allocated Mental Health Worker who offers help to mental health patients; an onsite Phlebotomist twice a week for our patients to have their bloods taken and also it's available to patients outside the Practice from other Surgeries. In addition we have the following private services: Physiotherapy, Acupuncture, sports massage and Homeopathy on site.

KILBURN PARK MEDICAL CENTRE

12 Cambridge Gardens

London NW6

Tel: 020 7624 2414

Fax: 020 7624 2489

- Partners:** Dr Andy Tate, Dr Gillian Braunold, Mrs Julie Finnigan, Dr Alison Hill, Dr Almona Musa, Dr Fabia Shaw
- Trainer:** Dr Andy Tate, Dr Ishani Sapadoru
- Premises:** Converted Victorian house on four floors
- List size:** 7500
- Practice Area:** Covers NW6 and W9. High level of deprivation with a large proportion of refugee patients.
- OOH rota:** Twice a month with LCW GP Co-op
- Additional:** The practitioners are proud to work in a level of high deprivation and strive to provide quality care. There are high levels of physical, social and psychological morbidity and this is reflected in the workload. The post provides excellent experience in chronic diseases and care of patients with complex needs. We are strongly committed to inter-professional learning and have a thriving learning set that meets weekly.

THE LAW MEDICAL GROUP PRACTICE

**9 Wrotesley Road
Willesden, NW10 5UY
Tel: 020 8752 2102**

**124 Harrow Road
Wembley, HA9 6QQ
Tel: 020 8903 4848**

Partners: Dr Lucy Abrahams, Dr Jennifer Shields, Dr Adrian Richardson, Dr Anita Kapoor

Trainers: Each partner is a trainer and the practice usually has 4 GP Registrars. Imperial College undergraduates are also trained in the practice by Dr Lucy Abrahams.

Premises: Converted residential properties at both surgeries.

List Size: 13,000 patients

Practice Area: NW10 Surgery covers a relatively small geographic area of multi-occupied housing with a large mix of ethnic groups including many new immigrants from the extended EU as well as many families of long standing in the area. The Wembley surgery also covers a relatively small geographic area with a more static community largely of second and third generation Asian and Afro-Caribbean descendents. Wembley population has also got a large number of immigrants from the sub-saharran continent.

Out of Hours: Harmoni run the out-of-hours service.

Additional:

We are a long-standing teaching practice that has been computerised, including scanning, for many years (EMIS). Further technology is to be used to enable automated patient check-in and a modern telephone system is planned to help patients reach the most appropriate service more speedily. The practice has moved towards more specialist clinics, e.g. ante-natal, baby, diabetes and lung function. The use of triage will be increased to ensure the needs of patients, outside the core clinics, are correctly assessed.

There is a large integrated healthcare team. In addition to the partners and registrars, there are two salaried GPs and one teaching fellow, four practice nurses and two health care assistants, peripatetic counsellors and a dietician, together with health visitors and the community nurse and midwife team. The practice has weekly interdisciplinary meetings with frequent external specialist speakers.

LONSDALE MEDICAL CENTRE

**24 Lonsdale Road
London NW6 6R**

Telephone: 020 7328 8331 Fax: 020 7625 2103

- Partners:** Dr Taj Pradhan, Dr Chris Ford, Dr Levin David, Dr Lisa Miller, Dr Heather Davis, Dr Daniel Dietch, Dr Simon Read, Dr Eric Britton
- Trainers:** Dr Eric Britton (St Mary's) & Dr Heather Davis (Bloomsbury)
- Premises:** Purpose built surgery with 14 consulting rooms, 2 treatment rooms; staff facilities and off road parking, on a private light industrial road within a short walk of Queens Park Tube and Brondesbury Park Overground stations.
- List size:** c. 14500
- Practice Area:** The practice is in Brent PCT and its population reflects the diversity of London. The practice population represents a broad mix of socio-economic, ethnic and language groups living in south eastern Brent and north eastern Westminster. There is a small population of elderly patients who live outside the current catchment area due to historic reasons in the Notting Hill/ Ladbroke Grove area. The practice catchment area can be found at <http://www.lonsdalemedicalcentre.nhs.uk/practiceinfo>
- Present Rota:** LCW-UCC provides the practice OOH Cover, Dr. Britton's registrar will have the opportunity to train at the CAMIDOC OOH provider as well.
- Additional:** The practice is computerised (EMIS system). It provides child health surveillance, minor surgery, a well established substance misuse service, and a full range of family planning. In addition to a full nursing team, we have substance misuse counsellors, psychodynamic counsellors, CBT therapists and a relationship counsellor. We have good relationships with members of the extended Primary Health Care Team and they frequently attend our practice meetings. The practice has an ongoing relationship with RFUCMS and hosts an F2 doctor and GP trainee from the Bloomsbury programme

IMPERIAL COLLEGE HEALTH CENTRE

40 Princes Gardens, London SW7 1LY

Telephone: 0207 584 6301

Website: www.imperialcollegehealthcentre.co.uk

- Partners:** Dr Irene Weinreb, Dr Sarah Freedman, Dr Mark Daniels, Dr Chris Allen.
- GP Assistant:** Dr David Hayton
- Trainer:** Dr Mark Daniels
- Premises:** We are situated in new, purpose built premises in South Kensington.
- List Size:** 12000
- Practice Area:** We cover a large area of London, based on postcode. This is due to our connections with Imperial College and the Royal College of Music. We also cover a wide area of SW7 for our local resident population. The full registration area can be seen on our website.
- Out of Hours:** LCW UCC
- Additional:** We have a comprehensive multidisciplinary team including two practice nurses, a health care assistant, two physiotherapists and four psychotherapists. Also attached to the practice are a health visitor, a visiting consultant psychiatrist, a sports physician and complementary practitioners. There is a full administration team led by our practice manager and her deputy. We are a fully computerised, EMIS, paper light practice and are linked for pathology to St Mary's Hospital. Within our friendly team we have a wide range of individual skills and knowledge and have a strong inter-professional working and learning ethos. We hope that any new member of our team will find their experience both challenging and rewarding but also highly enjoyable.

NOTTING HILL MEDICAL CENTRE

14 Codrington Mews

London W11 2EH

Tel: 020 7727 5800 Fax: 020 7792 9044

- Partners:** Dr Rachael Garner
- Trainer:** Dr Rachael Garner
- Premises:** Award-winning purpose built premises in a courtyard. All consulting Rooms are on the ground floor. GP Trainee has a dedicated consulting room. Premises are shared with Dr John Stride of Portobello Medical Centre.
- Staff:** Two salaried GPs; One Nurse Practitioner and one Practice Nurse; one Health Care Assistant; Primary Care Mental Health Worker; Practice Counsellor; Community Psychiatric Nurse; Health Visitor; a full complement of Reception Staff and a Practice Manager.
- List size:** 3750
- Practice Area:** Covers W10 and W11. Ethnically and socio-economically diverse.
- Out of Hours:** Provided by LCW UCC. ST's attend sessions complying with London Deanery OOH requirements.
- Additional:** We are a paperless practice and use the EMIS system. We have 15-minute appointments. We provide General Medical Services and have enthusiastically embraced the new contract. We provide Minor Surgery services to the PCT. We provide a Health Monitoring Clinic for patients with Chronic Diseases: a Hypertension Clinic; and, an Anticoagulation Clinic. We operate nurse led triage and we also have telephone consultations. We have a Health Visitor based in the practice, who runs a weekly Baby Clinic. We provide Primary Care Services to the Princess Louise of Kensington Nursing Home. We train Foundation Year 2 doctors linked to Chelsea & Westminster Hospital as well as providing training to Health Visitors.

PADDINGTON GREEN HEALTH CENTRE

**4 Princess Louise Close, London W2 1LQ
Tel: 020 7887 1600**

- Partners:** Dr Risha Chopra, Dr Melinda Creme, Dr Victoria Froome, Dr Felicity Knott, Dr Neville Pursell
- Trainer:** Dr Neville Pursell, Dr Deepa Bala
- Premises:** Currently situated in brand-new state-of-the-art surgery in Paddington Green, W2; on 4 floors with underground parking.
- List size:** 8200 (approx.)
- Practice Area:** Covers NW8, W2, NW1 and part of W9.
- Out of Hours:** LCW GP CO-OP
- Additional:** Long-established training practice, fully computerised with IPS Vision; paper light practice, linked for Path Results etc. Comprehensive multi-disciplinary healthcare team with full attached staff including three practice nurses, district nurses, health adviser to the elderly, CPN, care manager, health visitors, community midwife team, practice counsellor, etc. The practice has a wealth of GP educational experience within the practice, offering an excellent grounding in inner city general practice for GP ST's.

THE PARK MEDICAL CENTRE

Inver Court, Invermead Close, London W6 0QG

Tel: 020 8741 7471 Fax: 020 8834 7312

- Partners:** Dr Deirdre O'Gallagher, Dr Peter Fermie, Dr Celia Dawson, Dr Duncan Johnson and Mr Dave Sellers
- Trainers:** Dr Deirdre O'Gallagher, Dr Celia Dawson & Peter Fermie
- Premises:** New purpose built surgery since May 2004
- List Size:** 7,500 patients
- Practice Area:** We cover a small practice area on the edge of Shepherds Bush, Chiswick and Hammersmith. We have a varied population with all social classes. Our practice population is multi-ethnic with a large percentage of young families with children. On-call is with LCW UCC once monthly.
- Additional:** The practice is fully computerised and we have good links with the Primary Health Care team, notably on site district nurses and Health Visitors. We have a Baby Clinic, a psychologist and a drug and alcohol counsellor. We also have private osteopath / acupuncture/ psychology.

SCARSDALE MEDICAL CENTRE

2 Scarsdale Place
London W8 5SX

Tel: 020 7938 1887 Fax: 020 7376 2784

- GPs :** Dr Patrick Kiernan , Dr Sarah Evans, Dr Marie Borgne
Dr Tim Lebens
- Trainer:** Dr Patrick Kiernan Dr Sarah Evans (approval pending)
- Premises and staff:** Accessible modern purpose built ground floor with full primary care team
- List size:** 5500 (approx)
- Practice Area:** Covers W8, SW5, W14. with its multicultural inner city population
- Out of Hours:** Provided by the LCW UCC. Registrar attends sessions complying with GP Deanery OOH requirements
- Additional:** We are a paper light practice using EMIS PCS. We provide all General Medical services. We participate in all the premium and enhanced services and in addition provide physiotherapy; diabetic; CVD; minor surgery; travel; minor illness and anti-coagulation clinics. We operate a nurse led triage service and have a health visitor on site with a weekly baby clinic.
- We provide adult counselling as well as substance misuse services. We have an on-site phlebotomist and also offer a range of practice based testing. We also provide services to a local nursing home and homeless hostel.
- As well as GP training we participate in FY2 training and teaching of medical students from Imperial College as well as providing training to nurses.

MEDICINE FOR THE ELDERLY

EDUCATIONAL SUPERVISORS: Dr Shane Roche & Dr Claire Pulford.
COLLEGE TUTOR Dr Michael Fertleman

MEDICAL STAFF

Consultants:

| | |
|----------------------|---|
| Dr Diane Ames | (Grafton Ward – acute stroke unit) |
| Dr Michael Fertleman | (Valentine Ellis Ward – Orthogeriatrics) |
| Dr David James | (OASIS team) |
| Dr Claire Pulford | (Victoria Ward) |
| Dr Shane Roche | (Albert Ward) |
| Dr Stuart Webb | (Lewis Lloyd Ward) |

Other:
5 full-time SpRs
1 part-time SpR
5 F1 trainees
6 F2 / ST1 trainees

DUTIES OF POST:

WARD WORK

1. Six months will be spent at St Mary's Hospital.
2. Trainees on the GP Training program will be allocated to Albert and Victoria wards. These wards specialise in general geriatric medicine with an emphasis on rehabilitation for patients who live locally.
3. Ongoing responsibility for all patients allocated to each ward. Attendance at SpR and consultant ward rounds.
4. Communication with the MDT and community teams on planned discharge.
5. Frequent discussion with relatives.
6. Supervision by registrar (one per ward); supervision of F1 trainee (one per ward)
7. In addition
 - a. The trainee on Albert ward will have a role in the falls clinic led by Dr Pulford.
 - b. The two trainees on Victoria ward will between them also be seconded to the rheumatology and dermatology departments when their trainees are away from ward work. Furthermore these two trainees will also have a role at Athlone House (community rehabilitation unit on Harrow Road) supervised by Dr Roche.

GENERAL INTERNAL MEDICINE

1. Unselected general medical on call for all adults over age 16.
2. The on-take rota has changed to be compliant with the 2009 regulations of the EWTD. Details will be given to the ST during induction.

SPECIALIST SERVICES

1. Falls clinic : Weekly MDT falls clinic
2. OASIS team: reviews all elderly patients admitted through Acute admissions unit.
3. Orthogeriatric Medicine : Provides all non operative care to all orthopaedic patients >65
4. Stroke Service: Acute thrombolysis and rehabilitation service.
5. Parkinson's Disease Clinic: Twice monthly with new and follow patients.
6. West CHATs Clinic: Twice weekly MDT clinic for Westminster patients in GP surgery.

TEACHING RESPONSIBILITIES

1. Regular commitment to attend and teach on Friday morning sessions
2. Monday lunchtime meeting with paper review by one trainee.
3. Rotating medical students are attached to each ward.

RESEARCH/AUDIT

There are opportunities to participate in research and requirement to participate in audit.

PAEDIATRICS

CLINICAL SUPERVISOR: Dr Mike Coren (General Paediatrics)

The paediatric department of St Mary's is rapidly expanding and includes general and specialist paediatrics as well as PICU and NICU. The department is an integral part of Imperial College School of Medicine with an active teaching and research commitment. The post holder will be working in general paediatrics.

GENERAL SERVICES

1. Currently children are seen acutely in the Paediatric A&E Department which is open 24 hours. The Paediatric A&E provides both a secondary referral system for general practitioners and emergency paediatric care for the local population. It is a busy unit offering excellent primary and secondary general paediatric experience under the supervision of Dr Maconochie and Dr Salter the Paediatric A and E consultants. Good middle grade and senior support is always available.
2. The general paediatric ward (Great Western) has 16 beds and provides in-patient care for both medical surgical patients. In addition, the Paediatric Short Stay Unit (PSSU) with 8 beds which provides both acute short stay and ambulatory care.
3. The 10-bedded day case ward (Westway) provides facilities for both surgical and medical day cases and investigations.
4. The Community Nursing Care Team supports the community and general paediatric services by looking after chronically ill children at home and providing an interface with the in-patient services.
5. There are close links to the Department of Child and Adolescent Mental Health based at Paddington Green.

SPECIALIST SERVICES

These include the Paediatric Intensive Care Unit (PICU), Paediatric Infectious Diseases Ward (Grand Union), the Paediatric HIV team, Paediatric Haematology, Paediatric Allergy, Paediatric General Surgery and Urology and acute Paediatric Nephrology. In addition there is a Neonatal Intensive Care Unit.

There is a Child Development Clinic including all the therapies, a school, fully staffed play areas, and a paediatric pharmacy and a paediatric social work team.

The department is divided into three teams of SHOs (General and Specialist Paediatrics, Neonatology and Paediatric Intensive Care). There are resident middle-grade staff in all areas available to supervise and support the SHOs.

ADULT PSYCHIATRY

North Paddington Community Mental Health Team St Charles Hospital

EDUCATIONAL SUPERVISOR: Dr Sarah Marriott

GENERAL INFORMATION

This post offers broad experience in the assessment and treatment of adults with a range of severe mental disorders, both acute and chronic, and places emphasis on liaison with local primary health care teams in Paddington. North Westminster's psychiatry services at St Charles W10 are divided into three sector teams: North Paddington (Dr Marriott, Dr Emmanuel), South Paddington (Dr Cox, Dr Behr), North Marylebone (Dr Clarke, Dr Mullen). Each sector has a community team and a designated ward. There is also a rehabilitation team working across all three sectors, and crisis services operating from 9am – 5pm on weekdays and at the weekends including an A & E mental health liaison team (Dr Reid). In-patient facilities are provided for all three sectors in the sixty-bedded in-patient unit.

The post holder will work with the North Paddington Team. This is a highly skilled multidisciplinary community mental health team comprising community psychiatric nurses, care managers, psychologists, occupational therapists and doctors in training. The community base of the team is at 7a Woodfield Road, London W9. The main base for the post holder is the St Charles Mental Health Unit, Exmoor Street, London W10.

DUTIES OF THE POST

The post involves work with in-patients (on James Ward), outpatients at 7a Woodfield Road and community and domiciliary visits as appropriate. The team often uses multidisciplinary joint assessments and works closely with other agencies such as probation, housing and voluntary services.

RESEARCH/AUDIT

Interested post-holders will be expected to contribute to local clinical audit, and will be supported to develop their own audit or research project in the sector or to collaborate with existing projects if they express an interest.

LIAISON ADULT PSYCHIATRY ST MARY'S

BASE: Department of Liaison Psychiatry, St Mary's Hospital.

EDUCATIONAL SUPERVISOR: Dr Steven Reid

GENERAL INFORMATION

This post is designed to provide training in mental health for a period of six months. The post is collaboration between St Mary's GP and Psychiatric Training Programmes, and Central and North West London (CNWL) NHS Trust.

CNWL provides a comprehensive range of mental health services for an area covering the London Borough of Brent, Westminster, Chelsea and Kensington and Harrow. Their mental health services are organised into four clinical directorates: Adult Mental Health; Elderly Care; Children, Families and Psychotherapy; and Substance Misuse.

The post holder will be working in the North Westminster sector which has a population of 110,000 served through three locality services: North Paddington, South Paddington and North Marylebone. Overall, the population is severely deprived and ethnically mixed. The area is established as a destination for immigrants and for refugees, and contains neighbourhoods of considerable deprivation as well as others, which are very wealthy. In some areas, most people are living in rented accommodation and the population is predominantly young and transient; in others there are above average numbers of older people, many living alone. Inpatient beds are located at St Charles' Hospital in Ladbroke Grove.

The liaison service at St Mary's Hospital is provided by Central and North West London Mental Health NHS Trust and the trainee will therefore have close links both with staff in the dedicated local mental health provider and those in the acute services trust at St Mary's. As well as their involvement in general liaison work, the trainee will have particular responsibility for the provision of a liaison service to the well-established HIV service at St Mary's. There will be close working with the Staff Grade Psychiatrist in the liaison psychiatry service and there will be a degree of cross-cover between the two posts.

MEDICAL STAFF IN NORTH WESTMINSTER

There are 12 consultant posts in the North Westminster sector.

DEPARTMENT OF LIAISON PSYCHIATRY

- 1 Consultant Liaison Psychiatrist
- 1 Assessment Services Manager
- 1 Staff Grade Psychiatrist
- 6 Liaison Mental Health Nurses
- 1 HIV Liaison Mental Health Nurse
- 1 Cognitive Behavioural Nurse Therapist
- 1 Team Administrator

THE POST

Liaison psychiatry is concerned with the practice of psychiatry in settings where psychiatry and the rest of medicine meet. The post holder will be based at St Mary's Hospital and will work closely with Dr Reid and the liaison psychiatry team. The post holder will provide a consultation-liaison service for mental health problems in HIV medicine, including outpatient clinics and attendance at the weekly psychosocial ward round. The team also provides a service to the rest of St Mary's Hospital. Indications for referral include:

- Deliberate self harm
- Disorders of mood – depression, anxiety, mania
- Psychological reactions to physical illness
- Psychotic illness
- Medically unexplained symptoms and somatisation
- Acute behavioural disturbance due to delirium

CONTINUING PROFESSIONAL DEVELOPMENT

This includes attendance at the weekly GP half-day teaching. The post holder will be encouraged to develop their own educational objectives appropriate to the field of mental health and primary care and will include effective prescribing for the common and severe mental disorders, an understanding of the theory and practice of psychological treatments for people with mental illness including psychodynamic, cognitive behavioural and systemic family therapy and the first line treatment of drug and alcohol problems. The post holder will be expected to develop skills to critically appraise the evidence base for mental health interventions, and receive training in effective teaching skills. They will be encouraged to develop their own audit or research project examining shared work between primary and secondary care.

TEACHING

The post holder will participate in multi-disciplinary clinical meetings, and be involved in teaching. They will be involved in chairing case presentations and journal clubs in the weekly academic meetings on site.

SUPERVISION

The consultant will provide educational supervision which will be a minimum equivalent of 1 hour per week. Supervision and consultation will also be provided in clinical meetings and on an ad hoc basis as clinical need determines.

ON-CALL COMMITMENTS

The on-call cover is now provided through a full shift rota. For night shifts, the post holder will be based at St Charles' Hospital.

ADULT GENERAL PSYCHIATRY GORDON HOSPITAL

EDUCATIONAL SUPERVISOR: Dr Mike Bellew

SERVICE DESCRIPTIONS

i) Inpatient Service

Inpatient care is delivered from the Gordon Hospital in SW1 where there are three acute admission wards: Vincent Ward (20 beds), Gerrard (22 beds) and Ebury (20 beds). There is also an Intensive Care Unit (Belgrave) which has 12 beds. The hospital is also a base for Psychology and Psychotherapy and a Day Service aimed at meeting the needs of inpatients.

ii) Community Mental Health Teams in Victoria

Community services in Victoria are fully integrated with Social Services with a joint management structure, with a Consultant and Team Manager providing clinical leadership to 3 CMHTs. The teams are located in Osbert Street, a few minutes walk from the hospital.

iii) Eating Disorder Unit (The Vincent Square Clinic)

This is a 12 bed inpatient unit at Hopkinson House, SW1. The clinic specialises in working with patients who have eating disorders and who are treatment resistant. There is the inpatient facility, outpatient clinic and day service. All patients are over 16 years of age.

iv) Day Services

The locality has a range of health and social care services including CMHT linked services, which offer focused, time-limited rehabilitation and treatment and the Workshop which provides supported work experience and rehabilitation. The Terrace Centre and 66 Lupus Street offer continuing care through social, leisure and focused support to networks of 130 people for each service.

MEDICAL STAFF IN SOUTH WESTMINSTER (SW1 AND W1)

Dr. Mike Bellew, Consultant, Victoria, SW1

Dr. Frances Connan, Consultant, The Vincent Square Clinic, Victoria, SW1

Dr. Tony Nayani, Intensive Care Unit & Intensively Staffed House,

Dr. Masum Khwaja, West End, W1

Dr Mike Dilley, West End, W1

Dr. Ronnie Taylor, Victoria, SW1

Dr. Sara Ketteley, Victoria, SW1

Dr. Jessica Kirker, Consultant Psychotherapist, Victoria, SW1

Dr. Lorenzo Grespi, Consultant Psychotherapist, South Marylebone, W1

JUNIOR STAFF

Two training slots for Specialist Registrars, 10 SHOs (attached to the Charing Cross Psychiatric Training Schemes).

DUTIES

In the Victoria area, part of the locality of South Westminster, three CMHTs have been developed. Each team is fully multidisciplinary. Medical staffing comprises 1 WTE Consultant and 2 SHO grade doctors in each team. One team has a Specialist Registrar.

The post holder will be attached to Victoria I CMHT under the clinical leadership of Dr. Bellew and will be accountable to Dr. Bellew.

General duties include the following, all of which are the post holder's responsibility:

1. Detailed clerking, history taking, examination and initiation of all necessary investigations for the patient. Keeping full clinical notes and ensuring the medical records information is updated according to departmental guidelines. Part I summaries should be completed within 2 weeks of admission and Part II summaries within a week of discharge.
2. The medical, psychiatric and physical management of allocated inpatients, outpatients and day patients. Clinical supervision of this work is provided within the context of individual supervision and multidisciplinary team meetings.
3. Arrangements for discharge, follow up and after-care of patients according to departmental guidelines.
4. Interviewing relatives and informal carers of patients.
5. Arranging appropriate referrals to other disciplines and services, both within the multidisciplinary team and to resources outside the team.
6. Observation of medical guidelines, prescription and drug administration and paramedical guidelines issued to the post holder.
7. Participation in the same day multidisciplinary assessment procedure according to the department rota guidelines.
8. Answering routine correspondence within a week.
9. Assisting with the preparation of medico-legal reports, including reports for Mental Health tribunals, in consultation with the relevant Consultant.
10. Organisation of your professional day and advising relevant secretary of whereabouts at all times so the secretary is able to reach you at any time during office hours.

ADULT GENERAL PSYCHIATRY

GORDON HOSPITAL & VICTORIA 1 CMHT

Educational Supervisor: Dr Ronald Taylor

The medical team

| | |
|-------------------------|-------------------|
| Consultant psychiatrist | Dr Ronnie Taylor |
| StR | Dr Harriet Saziya |
| Hon. SpR | Dr David Perahia |
| CT3 | Dr Kostas Tsilkos |
| CT1 | GP Trainee |
| Team Secretary | Norma Polden |

The training post is for 6 months. The trainee will join a multidisciplinary team based at the Gordon Hospital for inpatient services and at Hopkinson House for the CMHT. The trainee will be expected to participate in multi-professional and single professional assessment of inpatients, outpatients, day patients and patients presenting to Triage at the Gordon Hospital. Triage patients are assessed with a Triage nurse. The trainee is expected to participate in home visits, and to gain experience of community facilities such as staffed hostels. They are expected to participate in CPA reviews, and CMHT meetings. On the ward he/she will be responsible for the day-to-day management of inpatients, conducting regular mental state and physical reviews, coordinating physical investigations and liaising with colleagues.

On call at night is currently 1 in 10, supported by a rota of SpRs and consultants, with leave of absence the following day. There is a very occasional need to provide support to the Intensively Staffed House and to the eating disorders unit. The on-call room is on the ground floor of the Gordon Hospital.

Supervision

Dr Taylor provides educational supervision weekly on Thursdays at 2 pm. Psychotherapy supervision is also provided, and there is a weekly Balint group. Post holders are encouraged to participate in clinical audit and, under the supervision of the consultant, take on a small project.

Training objectives during the attachment

Individual objectives will be identified in writing with the trainee according to need, and will be settled early in the attachment. The objectives are likely to include:

Clinical

- to achieve competence in theoretical and practical management of cases in general adult psychiatry
- to manage a clinical caseload and prioritise appropriately
- in-depth supervision of at least one case during the attachment
- supervision in a specific therapeutic modality
- topic teaching
- discussion of appropriate papers

Management and Administration

- to be familiar with the implementation of the Care Programme Approach
- to be familiar with the local and national agenda for mental health
- to develop managerial skills

Teaching and Research

- to learn to appraise research evidence and apply it to everyday practice
- to develop teaching skills
- to formulate research questions and where possible initiate research projects

ADULT SERVICES WESTMINSTER

The adult care service in South Westminster locality aims to provide a comprehensive integrated mental health service to people aged 16 – 65 years who experience severe and/or enduring mental illness. There are nurses, psychologists, occupation therapists, social workers, psychotherapists and creative therapists, and support staff without professional qualifications. Services are supported by administrators and managerial staff.

There are 8 sites in the locality:

Gordon Hospital, including South Westminster Day Services

Hopkinson House: Victoria CMHTs, the Vincent Square Clinic, and the Intensively Staffed House

66 Lupus Street (day centre) SW1

96 Cambridge Street (residential and community support) SW1

Workshop & Company (day centre) 26 Newman Street W1

The Terrace (day centre) London W2

42 Queens Gardens W2

Soho Centre for Health & Care, Frith Street, W1

Service descriptions

Inpatient care is at the Gordon Hospital where there are 3 acute admission wards: Vincent (21 beds), Gerrard (21 beds), Ebury (21 beds), and an intensive care unit (Belgrave ward) with 12 beds. The hospital is also the base for psychology and psychotherapy. Day Services (for SW1 community patients) and inpatients are located in the basement.

Victoria CMHTs

The three Victoria CMHTs are based at Hopkinson House close to the Gordon Hospital. The management structure is integrated with social services and the three teams have an integrated health/social services joint duty system.

Housing Support

The housing support service assists in the resettlement process when a client is offered a tenancy. They are supported in setting up a home and long-term support is offered if necessary to maintain them in the community. The service works with up to 95 people living in Westminster.

Vincent Square Clinic (eating disorders unit)

The unit specialises in treatment resistant eating disorders. There are 12 beds, an outpatient clinic, and Day Services, based at Hopkinson House. The clinic manager is a clinical nurse specialist.

Day Services

The locality has a range of health and social care day services, including CMHT-linked services offering focused time-limited rehabilitation and treatment. The South Westminster day service at the Gordon Hospital provides a service for inpatients and 35 community patients. Workshop & Company offers a range of work projects and a drop-in/cafe. The Terrace and 66 Lupus Street offer continuing care through social, leisure and focused individual support to networks of 130 people for each service.

Residential Care

The Intensively Staffed House (ISH) offers a home for life for 13 people with long histories of institutionalised care and severe mental health problems. It has formal inpatient status and residents may be under a section of the Mental Health Act.

96 Cambridge Street and 42 Queens Gardens provide focused rehabilitation for up to 5 years within a residential provision. Both teams also provided support to a large network of client living in sheltered or independent housing in the community.

West End CMHT is based in the Soho Centre for Health & Care. The multidisciplinary team offers an assertive and integrated community mental health service to local residents, homeless and transient people in the area. The team manager is jointly appointed by the NHS and social services. The West End CMHT has an integrated health/social services duty system. The West End day service, based on the 4th floor of the Soho Centre for Health & Care, provides 25 places.

Academic activities and resources

Dr R Taylor is the educational supervisor and College Tutor

- the trainee will attend the half day release at St Marys on a Wednesday afternoon.
- there is weekly teaching at the Gordon Hospital. The programme includes evidence based journal clubs, topic teaching presented by the SpRs and Gordon Hospital consultants, as well as outside speakers, which the trainee should attend when possible.
- there is an active clinical audit programme under the auspices of clinical governance
- there may be scope to undertake small research projects during the attachment or to participate in ongoing research projects based in the Academic Department of Psychiatry. CT's are encouraged to make contact with a member of the Department to discuss research opportunities
- the post holder will be encouraged to participate in the teaching of medical students attached to the team

There is a small library at the Gordon Hospital with books and journals. The librarian attends on Mondays.

The post holder is entitled to 15 days study leave.

ADULT PSYCHIATRY CRISIS RESOLUTION TEAM (CRT)

**Based at North Kensington Crisis Resolution Team
St Charles Hospital. CNWL Mental Health Trust**

CONSULTANT AND EDUCATIONAL SUPERVISOR

Dr John Lowe, Consultant Psychiatrist – based full time at the St Charles site with 6 sessions on the Psychiatric Intensive Care Unit and 6 sessions with the CRT.

CATCHMENT AREA

North Kensington: a discrete inner city area with a culturally diverse population of approximately, 50,000.

SITE

St Charles Hospital Mental Health Unit based at the Pall Mall Mental Health Centre: Includes 2 Acute Wards, a Psychiatric Intensive Care Unit, a Rehabilitation Ward, a Day Hospital, 3 CMHTs, a CRT and an AOT. The local RCPsych SHO Tutor is Dr Sarah Eagger. At any one time there are 5 Psychiatric SHO trainees, 7 trainers and up to 2 SpRs. There is an SHO induction programme at each 6 monthly intake.

TEAM

Peripatetic Multidisciplinary Home Treatment Team established under the NHS Plan in 2002, including a dedicated Consultant and Manager, as well as Nursing, Occupational Therapy, Social Work, and Admin staff. Currently there is also a General Adult Psychiatry SpR in post.

SERVICE PROVIDED

Home treatment of patients in mental health crisis who would otherwise be admitted.

TRAINING EXPERIENCE OFFERED

Working as a key member of a 'new wave' mental health service (NHS Plan 2000), the post offers an exciting postgraduate introduction to the assessment and management of acute mental disorder in all its manifestations, across a range of settings, but principally in *the patient's own home*. Under supervision, the trainee will become fluent in psychiatric history taking, examination, investigation, and diagnosis; clinical note taking and presentations to colleagues; the prescribing of psychotropic medicines; basic psycho-educational and relapse prevention work; and, the maintenance of physical health in the mentally ill. Working with the MDT, the trainee will learn how to combine specialist and generic modalities, drawing on the particular skills of colleagues, such as family, social and vocational workers, as well as his, or her, own medical repertoire. The trainee will benefit from a strong team culture emphasising patient and staff safety as

applied the domiciliary setting, and supported by actuarial and dynamic risk assessment tools. The trainee will also join other team members in contributing to the substantial liaison component of the CRT work, including regular contacts with local in-patient wards,

community mental health teams (CMHTs), day hospitals, primary care services and non-statutory organisations - including those aimed at disadvantaged sub-groups amongst the mentally ill. The trainee will have the opportunity of a leading role in communication between the CRT and General Practice. There will also be opportunities to become involved in local audit, research and service development work.

ON CALL EXPERIENCE

The trainee will participate in a 1:9 full shift rota for in-patients and acute referrals to the Unit supported by both SpR and Consultant tiers of cover. This rota is currently compliant with the New Deal and EWTD. There will also be one daytime session per week on-call for acute referrals to the Mental Health Unit.

SUPERVISION

There will be weekly individual educational supervision with the Consultant Trainer lasting one hour. The trainee will also benefit from clinical supervision during home visits with the Consultant every Wednesday morning.

ACADEMIC PROGRAMME

The trainee will have protected time to attend the GPVTS half day per week. There is a weekly Journal Club each Friday lunchtime during term time. Trainees take it in turn to present either a case or a paper each week chaired by a Consultant or Specialist Registrar. There is an emphasis on Evidence Based Medicine and the acquisition of critical appraisal skills, but regular space is also given over to classical papers and audit. There is a library with a librarian on-site. Along with the psychiatric trainees on the site, the trainee is expected to attend a weekly Balint type group facilitated by a local Consultant Psychotherapist. There is also CRT Learning Forum held fortnightly at which the trainee would be encouraged to present.

GP TIMETABLE

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|----|---------------------------------------|-------------------------------|-----------------------------|--|----------------------------|
| am | Home Visits | Home Visits | Home Visits with Consultant | On-Call for Unit and Duty Team Balint Group | Home Visits |
| pm | MDT Meeting 4 – 5pm Supervision | Team Support Meeting Admin | GP Course | Team Learning Forum/Business Meeting | Lunchtime Academic Meeting |

ADULT PSYCHIATRY

North Kensington Community Mental Health Team St Charles Hospital

JOB TITLE

Trainee in General Practice to the North Kensington Community Mental Health Team Sector B.

CONSULTANT AND EDUCATIONAL SUPERVISOR

Dr Zohra Taousi, Consultant Psychiatrist based full time at the St Charles and Pall Mall Community Mental Health Team 150 Barlby Road, London W10.

CATCHMENT AREA

North Kensington: a discrete inner city area with a diverse population of approximately 50,000 served by 3 Community Mental Health Teams. Teams are sectorized – A, B and C – according to GP.

SITE/S

St Charles Hospital, Exmoor St, London W10 6DZ, and, The Pall Mall Centre 150 Barlby Rd, London W10 (Adjacent to the hospital site). This Includes: 2 Acute Wards, a Psychiatric Intensive Care Unit, a Rehabilitation Ward, 3 Community Mental Health Teams a Crisis Resolution Team and an Assertive Outreach Team. The local Tutor (RCPsych) is Dr John Lowe. Based on site there are a total of 11 ST1/3 Trainees (2 In General Practice – inc this post - and (9 in Psychiatry) 4 ST 4/6 Trainees in Psychiatry and 7 Consultant Trainers in Psychiatry. The site is due to be expended in January 2007 with the re-location of North Westminster in-patients services to St Charles Hospital, which will bring with it approximately 9 more ST1/3 Trainees including 2 in General Practice, 6 more Consultant Trainers and an additional College (RCPsych) Tutor.

SERVICE

The service in which the post holder will work offers both acute in-patient and community psychiatric multi-disciplinary team MDT care to patients in the designated local sector. An MDT based on Thames ward at St Charles Hospital provides in-patient care; an MDT based at the adjacent Pall Mall Centre delivers community care. The Trainer, Dr Evans, is the Consultant for both teams, and each MDT includes nursing, occupational therapy and psychology input. In addition the ward offers music and art therapy, and, the community team has a dedicated Primary Care Mental Health worker who maintains links with the referring General Practices and Practitioners.

TRAINING EXPERIENCE OFFERED

The post offers a basic specialist training in the assessment and management of acute and chronic mental disorder across a range of settings, including in-patient and community. Under supervision, the trainee will become fluent in psychiatric history taking, examination, investigation and diagnosis; clinical note taking and presentations to colleagues; the prescribing of psychotropic medicines; basic psycho-educational and relapse prevention work; and the maintenance of physical health in the mentally ill. There will be a strong emphasis on MDT working. In conjunction with the Primary Care Mental Health Worker the trainee will be encouraged to liaise closely with local General Practitioners. The trainee will benefit from a strong team culture, emphasising patient

and staff safety. There will also be opportunities to become involved in audit, research and service development work.

A monthly Junior Senior meeting, including all trainees and trainers, is held to discuss any topical training issues and to maintain the quality of the training offered.

ON CALL EXPERIENCE

The trainee will participate in a 1: 8 partial shift rota for in-patients and acute referrals to the Unit, supported by both SpR and Consultant tiers of cover. This rota is currently compliant with the New Deal and EWTD. There will also be one daytime session per week on-call for acute referrals to the Mental Health Unit.

It is possible that due to local circumstances and in view of the impending further requirements of EWTD, that a full shift pattern of working on call will be introduced by August 2007. It is likely that this will be combined with the on call rota for North Westminster such that out of hours there would always be 2 ST1/3 trainees on call working a 1 in 8 full shift rota.

SUPERVISION

There will be weekly individual supervision with the Consultant Trainer lasting one hour, informal supervision takes place in all settings, as required.

There is a weekly Balint group on site which all ST1/3 trainees are expected to attend.

ACADEMIC PROGRAMME

The trainee will have protected time to attend a GP Vocational Training Course, one half day per week.

There is a weekly Journal Club each Friday lunchtime during term time. Trainees take it in turn to present either a case or a paper each week, chaired by a Consultant or ST 4/6 trainee. There is an emphasis on Evidence Based Medicine and the acquisition of critical appraisal skills, but regular space is also given over to classical papers and audit. There is a library with a librarian on site.

WEEKLY TIMETABLE FOR SHO AND SUPERVISOR

| | AM | PM |
|------------------|--|--|
| Monday | 9 – 10 am Business Ward Round Ward and Community work | 888 On-call Bleep |
| Tuesday | Community Mental Health Referral meeting / MDT Business meeting | Ward / Community work |
| Wednesday | Follow up out patients clinic | GP Course |
| Thursday | 9.30 – 1pm Ward Round | New patient clinic |
| Friday | 1 : 1 Supervision Ward / Community work | Academic afternoon 12.30 – 2 pm Psychodynamic supervision |

ACCIDENT AND EMERGENCY MEDICINE

EDUCATIONAL SUPERVISOR: Mr R Touquet RD, FRCS, FRCP, FCEM, MRCGP
(Principal in General Practice 1975-76 Faversham, Kent)

BACKGROUND

St Mary's Accident & Emergency Department is a fully computerised modern department with its own x-ray facilities (PACS digital system from 2006), 4-bay resuscitation room, one operating theatre and areas for 'minor' and 'major' patients as well as a fully equipped seminar room recently upgraded, including a distinct Paediatric A&E. The department sees 90,000 new patients each year (including 20,000 children) and also has a 12 bedded Clinical Decision Unit; close working relationship with 40 bedded admission ward (Douglas/Joseph Toynbee) and a Rapid Assessment Unit (to improve liaison with GPs). ALS, APLS, PALS and ATLS courses are run in close association with three Resuscitation Training Officers. The £5.4m paediatric A&E department was opened in June 2000, led by Dr Ian Maconochie and Dr Julian Redhead, open 0800 to 2400hrs.

Both A&E and Paediatric doctors see children.

CONSULTANTS:

Dr Patricia Ward (Director of A&E Services)
Mr Robin Touquet MRCGP (VTS trainer)
Dr Julian Redhead
Dr Ruth Brown (Clinical Tutor)
Dr Nicola Batrick
(Training Programme Director for F2s)
Dr Ian Maconochie (Paediatric A&E)

OTHER MEDICAL STAFF :

Dr Teresa Challoner MD, MRCP (Associate Specialist, 2 sessions at weekends)
10 middle grades (provide 24 hour shop floor cover)
16 SHOs (10 FY2s) – all posts six months changing February/August

MAIN DUTIES AND RESPONSIBILITIES

The post holder is responsible both for the initial examination and care of all acutely ill and injured patients, adults and children, those 'major' patients requiring hospital facilities for investigation or in-patient management and those 'minor' patients most of whom have injuries or illnesses which do not require hospital admission. Timely, quality care is expected to ensure that patients are seen, treated and discharged within 4 hours. There are daily review and dressing clinics.

Recording clinical information on the A&E computer system. Computing is done in real time so that tracking and logging of the large number of patients that we see is attained. A discharge letter is produced for every consultation which is sent to the GP (or given to the patient to deliver).

The post holder must keep good written records of their work and use a personal name stamp when signing records. Liaison with GPs and hospital in-patient teams is an integral part of this post.

ROTA/WORKING HOURS

There is a 16-week rolling rota run by Dr. Ward. All SHOs work an average of 48 hours per week in the department (paid Band 1a from August 2007). The rota includes protected educational sessions on Wednesdays, attendance at which is mandatory unless on leave. There is a comprehensive in-house induction programme in February/August. *Please read the detailed job description for precise details of rota.*

TEACHING RESPONSIBILITIES

9 firms of 5 students for 3 weeks each, 27 weeks of the year, July to February.

RESEARCH/AUDIT

The department has a proven track record of research as is well known for its work on Alcohol Misuse. Adrian Brown, Alcohol Nurse Specialist for St Mary's, has his office within A&E. SHOs are encouraged to become involved in research projects and audit, and staff are encouraged to think and plan such in advance of their appointment. There is an allowance of 8 days (when working) study leave. No leave is usually taken in February and August, so that there is full attendance at the 'rolling induction programme'.

HOLIDAYS

Annual leave is built in to the rota. The 16 SHOs work very much as a disciplined Team (currently Team 42) of apprentices run by Dr Ward. Study leave is discretionary and requests must be approved by Dr Ward

OBSTETRICS AND GYNAECOLOGY ST MARY'S

EDUCATIONAL SUPERVISOR/TRAINING PROGRAMME DIRECTOR IN OBSTETRICS AND GYNAECOLOGY: Mrs Katy Clifford

BACKGROUND

This combined post in obstetrics and gynaecology consists of 6 months working in the Aleck Bourne Maternity Unit and the Samaritan Gynaecology unit based on site at St. Mary's.

CONSULTANTS

NHS:

Mr. Peter Mason
Mr. John Smith
Mr. Alan Farthing
Ms. Kate Paterson (Community Gynaecology)
Mr T G Teoh
Mrs Katy Clifford
Miss Deborah Gould
Miss Deidre Lyons
Mr Vik Khullar
Miss Lorin Lakasing
Miss Lorna Phelan
Mr Etienne Horner
Mr Ruwan Fernando
Miss Shala Ahmed

ACADEMIC:

Prof. Lesley Regan (Professor of O & G)
Miss Jenny Higham (Senior Lecturer)
Mr Raj Rai (Senior Lecturer)

OTHER CLINICAL

STAFF:

8 Specialist Registrars (year 4-5)
7 Specialist Registrars (year 1-3)
2 Associate Specialists
2 Staff Grade Specialists
4 other SHOs (6 in total)
4 Clinical Nurse Practitioners (Gynaecology)
4 Consultant midwives

EDUCATION

The post holder will be expected to attend the induction programme on arrival, and the course of introductory tutorials that outline the management of common problems in obstetrics and gynaecology.

The GP trainee will be free to attend the GP meetings on Wednesday afternoons.

There is a programme of meetings for education and audit. Monthly half-day postgraduate meetings are organised where routine clinical commitments are cancelled to facilitate attendance. Perinatal and foetal medicine meetings are held on Friday afternoons and there is a series of weekly tutorials for SHOs and SpRs. The facilities of the academic unit are available. Each SHO is expected to undertake a research/audit project during their six months in the department and present it to the unit before leaving.

SHOs in the department are expected to have some involvement in undergraduate teaching.

CLINICAL DUTIES AND RESPONSIBILITIES

1. Attendance at antenatal clinics.
2. Attendance at gynaecology clinics.
3. Closely supervised assessment and management of gynaecological emergencies.
4. Closely supervised medical care of women in the labour ward.
5. Antenatal, postnatal and post-operative care.
6. Some attendance at gynaecology operating lists.
7. Prompt signing of discharge summaries.

There is flexibility within the timetable to suit GP VTS and career SHOs as necessary. The post does involve assisting with the District Pregnancy Advisory Service (under the direction of Ms. Kate Paterson), but alternative arrangements can be made for appointees who feel unable to be involved with legal abortion.

ROTA/WORKING HOURS

The obstetric and gynaecology SHOs work a 56-hour week full shift system which meets the New Deal criteria, with three weeks of daytime work followed by a week of night work and then two weeks off.

During the three weeks of daytime work affiliation to a consultant-led clinical team is maintained, so that optimum continuity of care and a feeling of “belonging” can be maintained.

The full shift system provides internal cover for annual and study leave. Accordingly, appointees should apply well in advance to the administrative specialist registrar with requests for annual and study leave.

GYNAECOLOGY

ROTA/WORKING HOURS

The gynaecology SHOs work a rota system, and maintain an affiliation to a firm system, working for a consultant grouping with associated specialist registrars. There is a 1 in 6 rota with prospective internal cover for holiday and study leave. In view of this, holiday and study leave will need to be agreed with the administrative specialist registrar on taking up the post.

OBSTETRICS AND GYNAECOLOGY

CHELSEA & WESTMINSTER

Consultant Clinical Supervisor: Mr M Stafford

GENERAL INFORMATION

Chelsea and Westminster Hospital NHS Foundation NHS Trust comprises the Chelsea & Westminster Hospital, and a number of services and clinics provided on the Charing Cross Hospital site and at the South Westminster Centre. The Chelsea & Westminster Hospital is an NHS Foundation acute general hospital with a large A&E Department seeing over 80,000 patients a year and a total capacity of 550 beds. Specialities include General Surgery, Urology, Orthopaedic Surgery, Plastic Surgery with Burns, Vascular Surgery, Gynaecology and Obstetrics, Paediatric Surgery, Ophthalmology, Paediatric Neurosurgery, General Medicine and Gastroenterology, Care of the Elderly, HIV and GUM together with supporting departments including Haematology, Imaging, Cytology and Chemical Pathology.

There is a dedicated Treatment Centre (incorporating a Hand Management Unit), Endoscopy Unit and a self-contained regional Burns Unit which is covered by the Magill Department of Anaesthesia, with lists taking place most mornings.

Advanced initiatives have helped to improve working practices and roles such as the installation of a highly advanced pharmacy robot in May 2004 and a Clinical Skills Unit. It is a teaching hospital and provides clinical facilities for medical student education in association with Imperial College Faculty of Medicine. The Obstetric and Gynaecological Service includes 22 gynaecology beds, 52 maternity beds and a level three neonatal unit. Chelsea & Westminster Hospital provides a full range of healthcare services, both to the local community and as a national tertiary referral centre. Many of the clinical services are acknowledged national and international centres of excellence with major commitments to teaching.

THE WORK OF THE DEPARTMENT

The unit is staffed by a combination of NHS and University staff.

| | |
|--------------------------|--|
| Professor P J Steer | Head of Department/Honorary Consultant |
| Mr M Johnson | |
| Mr H El-Refaey | |
| Mr R P Marwood | |
| Mr Keith Duncan | |
| Miss J Bridges | Service Director Gynaecology |
| Ms Z Penn | Clinical Director |
| Mr M Stafford | |
| Mr G Thorpe-Beeston | |
| Nick Wales | College Tutor |
| Ms Gubby Ayida | Service Director Obstetrics |
| Mr Martin Lupton | |
| Dr. C. Gilling-Smith | |
| Dr. Julian Norman Taylor | |

The aims of the department are to provide a very high standard of patient care as an integral part of its undergraduate and postgraduate teaching, and research.

The department includes the Professorial unit of Imperial Medical School.

The department is active in postgraduate education. Meetings and tutorials are normally held each week and all members of the Unit are invited.

Senior House Officers are attached to department and work under the supervision of a Senior Registrar. They work in a close relationship with the midwifery and nursing staff as part of the clinical team.

Senior House Officers have formal teaching responsibilities and are expected to provide ad hoc teaching to student doctors who are attached to all the Obstetrics and Gynaecological firms.

There are facilities for clinically orientated research and every encouragement is given to SHOs who wish to embark on a project.

SENIOR HOUSE OFFICER IN OBSTETRICS

The Obstetric department at West London Hospital (prior to relocation to the Chelsea & Westminster Hospital) was a pioneer in emphasising the emotional needs of women in pregnancy and labour. One of the department's main objectives is to continue to provide an environment which is both supportive and facilitating to the emotional needs of women and their partners, as well as being safe. There is an excellent Ultrasound Department, and high technology facilities are available for intrapartum monitoring on a selective basis. Routine duties will include the care of patients in ante-natal and post-natal wards, and the labour ward. They will attend ante-natal clinics during the week.

SENIOR HOUSE OFFICER IN GYNAECOLOGY

The gynaecology ward, Anne Zunz, is situated on the 3rd floor of the new Chelsea and Westminster Hospital and has 25 beds. It provides a wide range of gynaecological experience, access to modern equipment excellent laboratory and investigative facilities, and offers specialist services including treatment of sub-fertility, minimally invasive surgery, endocrine problems and colposcopy clinics.

The SHO will help with the routine care of patients in the ward and clinics where he/she sees patients under the supervision of the Consultant. He/she may also attend operating lists during the week.

NIGHT AND WEEKEND WORK

There will be occasions when you will be asked to join the SpR rota to cover single nights or weekend days. You will also be asked to finish late (8pm) during the week. All of this will be by prior arrangement and will not interfere with your plans for leave.

STUDY AND TRAINING

(a) The Academic Department of Obstetrics and Gynaecology has postgraduate meetings each week which include audits of Obstetric statistics, perinatal mortality and morbidity, and specialist topics.

(b) Study Leave is granted in accordance with the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales)

(c) Hospital medical staff have the use of the Medical School Libraries which has approximately 20,000 volumes including all the latest editions of undergraduates' text books, monographic material and 35,000 current periodicals. The Libraries are situated on the 2nd and 3rd floors of the Reynolds building at Charing Cross Hospital and in the basement of Chelsea & Westminster Hospital.

(d) A postgraduate medical centre is maintained under the supervision of a postgraduate Sub-Dean and Tutors in various specialties.

COMMITMENT TO THE DEVELOPMENT OF STRUCTURED TRAINING PROGRAMME IN OBSTETRICS AND GYNAECOLOGY

This post is seen as part of our development of a structured training programme for the SHO years, preparing the candidate for work as an StR in a busy department of O&G

PALLIATIVE MEDICINE & GU MEDICINE/HIV

ST JOHN'S HOSPICE AND ST MARY'S HOSPITAL

EDUCATIONAL SUPERVISORS

Dr Farnham Consultant Palliative Care Medicine
Dr John Walsh Consultant HIV/GU Medicine

OUTLINE OF POST

This post will provide training in the out-patient management of HIV, sexual health and in patient palliative medicine. The post holder will work 4 clinical sessions each at St John's Hospice and Jefferies Wing, St Mary's.

ST JOHN'S HOSPICE

CONSULTANT STAFF: Dr Farnham
OTHER MEDICAL STAFF: 1 part time Staff Grade Physician
 1 Specialist Registrar

STRUCTURE AT ST JOHN'S HOSPICE

The hospice provides an HIV Palliative care service to 9 PCTs. There are 19 inpatient beds, a day hospice with 80 patients each week and a domiciliary community team. Patients are admitted for symptom control, respite, terminal care, rehabilitation and psychosocial support.

DUTIES OF POST

1. ST trainees are based at St John's Hospice but spend two days each week at St Mary's Hospital with the HIV Directorate.
2. At St John's the ST will work with the consultant and are responsible for 19 inpatients.
3. There is no on call rota at St John's. The duty resident doctors at the adjoining hospital cover after 5pm and all day Saturday and Sunday.
4. The ST shall attend the consultant ward rounds and multi-disciplinary team meetings and help prepare discharge letters as appropriate.
5. At St John's there is a weekly postgraduate educational programme to attend and SHO will attend the Wednesday afternoon GP ½ day at St Mary's
6. The ST will contribute to informal teaching of medical students.
7. There will be an appraisal at the end of the first and fifth month for the ST with the St John's consultant.

DUTIES AT ST JOHN'S HOSPICE

1. Admission of patients to the inpatient unit
2. Ongoing day to day management and preparation for discharge or palliative care
3. Attending and preparing for consultant ward rounds
4. Occasional review of patients in the day hospice or with the community support team.
5. Participating in multi disciplinary team meetings

ST MARY'S DIRECTORATE OF GU MEDICINE/HIV INTRODUCTION

The Department of Genito-Urinary Medicine and HIV at St Mary's Hospital, Paddington is based in the purpose-built Jefferiss Wing and on two designated in-patient wards. The aim of the department is to provide a full range of services for patients with sexually transmitted infections, HIV and related problems, whilst being fully committed to developing teaching, training and research.

In addition to the open access GU Medicine out-patient clinics, the department runs a range of booked specialist clinics, and provides a comprehensive service for patients with HIV infection. Both inpatient and outpatient care is provided within the department. There is also a joint HIV family service, which has been developed with the Paediatric Department at St. Mary's.

The Directorate also has a number of specialist teams, including a team of clinical nurse specialists, which is responsible for the co-ordination of care for HIV positive patients between wards, out-patients and the community; The Praed Street Project - a specialist service for female sex workers and the Working Men Project - a specialist service for male sex workers.

The department is fully integrated with the Academic Department of GU Medicine and Communicable Diseases at St Mary's, which has a Clinical Trials Centre in the adjacent Winston Churchill Wing.

DUTIES OF THE POST

Of the 4 clinical sessions per week at the Jefferiss Wing 3 will be in HIV and 1 will be in GUM. The 3 HIV sessions will be within the Wharfside HIV Clinic in the Jefferiss Wing: these will be "walk-in" clinics providing medical management of ambulant HIV-positive patients presenting with acute medical problems. This provides an excellent opportunity to become familiar with a wide range of problems in the management of HIV disease. The post holder will liaise closely with other clinical and ward staff, in order to optimise patient care. The remaining session at the Jefferiss Wing will be in the GUM clinic managing patients attending with acute sexually transmitted infections.

Participation in all weekly teaching sessions, clinic meetings and clinical audit is compulsory.

GU MEDICINE

EDUCATIONAL SUPERVISOR: DR LINDA GREENE

DUTIES OF THE POST

The post is located principally in St Marys Jefferies Wing GU Medicine out-patient clinic. There is also the opportunity for the post holder to cover GUM/HIV in-patient care during periods of medical leave. This would be dependent upon the experience and training needs of the post holder and on the staffing levels of the GU Medicine Department at that time.

The GP trainee will undertake clinical sessions as set out below:

GU MEDICINE WALK-IN CLINICS

The majority of time will be spent undertaking sessions in the GU Medicine Walk-in Clinic. These are open-access clinics for men and women with sexually transmitted infections and related problems.

- The doctor will be expected to assess, diagnose and treat these patients under the supervision of the senior medical staff within the clinic and working in close co-operation with the Nurse Practitioners and Nurse Consultant.

HIV EMERGENCY CLINICS

These clinics are held on a sessional basis, Monday to Friday, morning and afternoon, in the Wharfside Clinic on the first floor of the Jefferies Wing. They are un-booked clinics for HIV positive patients who have acute medical problems related to their HIV infection. The post holder will be allocated one session on average every 2 weeks and senior medical staff are available at all times to provide clinical advice and support.

MEDICAL REVIEW CLINICS

These are weekly booked appointment clinics which allow patients to attend for follow-up of GU Medicine problems and may be used for the post holder to follow-up patients of particular interest to them who require ongoing assessment and review.

The doctor will also be allocated sessions for the medical review and administration of GUM attenders' results.

On occasion, to cover the needs of the department the post holder may be Required to provide cover for the following clinics/services:

SPECIALIST SEXUAL HEALTH TRAINING

The doctor will spend one session per week in 2 blocks of 3 months working under consultant supervision in either the Jane Wadsworth Clinic [multidisciplinary sexual function service for both male and female patients] or the ARC Service [Adolescent Resource Centre].

EDUCATION, TRAINING AND APPRAISAL

The post holder will be expected to attend the departments weekly multidisciplinary educational half-day [Wed am] and to actively participate in these meetings. There will be regular appraisal of the post holder by the Consultant Educational Supervisor as per speciality training guidelines. The post will also be reviewed annually to assess its continuing appropriateness to General practice training.

They will be asked to undertake an audit under the guidance of their consultant educational supervisor and to present this at one of the departments regular audit sessions.

In addition to the clinic commitments outlined above there are regular opportunities for post-holders to attend SPR/Consultant led specialist clinics to further their experience. The post holder will be released from clinical duties in order to attend the Wednesday pm GPVTS meetings.

IN-PATIENT COVER

Where it is agreed that the GP Trainee will cover periods of SHO leave on the GUM/HIV ward, the post-holder will be responsible for clerking in, and initial assessment of GUM/HIV positive patients, admitted from home, via casualty or from the GUM or HIV Clinics.

- They will be involved in the investigation and treatment of these patients with appropriate supervision from the senior medical staff.
- The post holder will participate in ward rounds and necessary nursing and social rounds, and will liaise closely with other clinical and ward staff involved in the patients' care.
- The post holder will perform all necessary administrative duties such as notifying AIDS diagnoses to the HIV Information Officer and ensuring that discharge notification forms are completed fully for all patients.
- The post holder will ensure that General Practitioners are communicated with by telephone, if appropriate, for example, in the event of a patient's death.
- The post holder will be expected to contribute to providing a continuous high quality service on the ward. For example, by covering the duties of colleagues involved in other clinical activities within the department.

The rota is currently a full shift and is compliant with New Deal and European Working Time Directive. Cover is provided by a specialist registrar in GU Medicine. An appropriate rate of out-of-hours payment will be available for out-of-hours duties.

OUTLINE TIMETABLE – GUM/HIV GPVTS TMO/SHO

| | Morning | Afternoon | Evening |
|-----------|---|--|---------------------------|
| Monday | GUM clinic* | GUM Medical Review Clinic | |
| Tuesday | GUM clinic* | Admin | ARC clinic or GUM clinic* |
| Wednesday | Educational Meetings/ Audit (CPD / clinical Governance) | GPVTS ½ Day Release | |
| Thursday | Jane Wadsworth Clinic or GUM clinic* | HIV emergency clinic | GUM clinic* |
| Friday | GUM clinic* | Admin / observing in specialist clinic | |

Post holders will perform an average of 8 clinical sessions worked flexibly to include 2 evening clinics

The post currently receives a pay supplement equivalent to banding at level 1b to reflect the late clinic commitment

Post holders work no more than 48hr per week

GENERAL INFORMATION

1. Annual Leave and Study Leave - Annual leave is based on working days, this post qualifies for 14 working days per 6 months. Study leave is discretionary with a maximum of 15 working days per 6 months. All requests should be submitted at least 6 weeks in advance.
2. The post holder is expected to perform all administrative duties appropriate to the post and when required, within the time limits specified by the Trust. Full participation in clinical audit and weekly clinical meetings is mandatory.
3. The post holder will be allocated a named consultant educational supervisor [currently Dr Linda Greene] with whom he/she will be expected to undertake regular assessment and appraisals.

INNOVATIVE TRAINING POST (20053)

Incorporating General Practice, Women's & Child Health, and Rheumatology

THE JOB

An Innovative Training Post is a six-month GP ST1/2 post, which integrates different specialties into GP training. This post is outpatient and community-based, across the specialties of Gynaecology, Paediatrics, Rheumatology and General Practice.

The post holder will spend five sessions in General Practice, 2 sessions in Paediatric A&E, 2 sessions in Gynaecology (one acute in the Gynaecology ER and the other in Gynaecology Outpatients) and one session in Rheumatology per week. The ST will gain skills, knowledge and training in the management of primary care problems across these specialties as well as a more in depth knowledge of the management of acute gynaecological and paediatric presentations. The secondary care components are chiefly in the clinics sited at St Mary's and St Charles' Hospitals. The sessions in general practice are in a local GP training practice with one session attending the St Mary's half-day release course.

EDUCATION, SUPERVISION & LEARNING OUTCOMES

The post has a balanced service and educational focus. The educational component will include supervision and appraisal and the GP Trainer & Consultants listed below will be the clinical supervisors. The coordinating Clinical Supervisor will be the GP Trainer. At the commencement of the post the GP Trainer will compose a learning plan for the ST to be entered on the ST's PDP on their e-portfolio. The curriculum statements pertaining to gynaecology, paediatrics, sexual & reproductive health and rheumatology in conjunction with an educational needs assessment with the ST will inform the drafting of the PDP.

The GP Trainer will liaise closely with the consultants to ensure that the educational objectives are being fulfilled over the course of the post. As this post is based in primary care the ST will need to fulfil the GP OOH requirement and all other primary care outcome measures (e.g. PSQ's) relevant to a 6 month post in GP as dictated by the RCGP.

Overall educational supervision will be provided by the ST's Educational Supervisor assigned to the ST at the beginning of their training. The ST will be assessed through the nMRCGP e-portfolio with regular timely reviews with the Educational Supervisor. The ST will complete the PDP and Learning Log. WPBA Tools (COTS, MINI-Cex, CBD's MSF's etc) will be completed in each clinical venue in proportion to the time spent in each specialty. Near the end of the post the GP Trainer and the Consultants will each complete a clinical supervisors report to be reviewed by the Educational Supervisor with the ST at their 6-monthly ESR.

CLINICAL SUPERVISORS

- St Mary's GP Trainer to be assigned in Rotation from the St Mary's GP STS Trainers Group
- Dr. Richard Rees, Consultant Rheumatologist St Mary's Trust, Richard.Rees@imperial.nhs.uk
- Ms, Katy Clifford Consultant Gynaecologist, St Mary's Trust, Katy.Clifford@imperial.nhs.uk
- Dr Ian Maconochie Consultant Paediatric A&E St Mary's Trust, Ian.Maconochie@imperial.nhs.uk

WEEKLY TIME TABLE (Subject to Revision)

| ITP 20053 | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|-----------|---|---------|-----------|---------------------------------------|--|
| AM | GP | GP | GP | Rheumatology Dr Rees St Charles | Gynae OPD Mrs Clifford St Marys' OPD |
| PM | Paediatrics A&E Dr Maconochie St Marys' | GP | VTS/GP | Gynae ER St Marys' | Paediatrics A&E Dr Maconochie St Marys' |

COMPONENT JOB DESCRIPTIONS:

General Practice:

Training in this 6 month ST1/2 post will be similar in scope to training that occurs in ST3. It is recognized that due to having less experience the ST will require more support and time to get to grips with the unstructured presentations of primary care illnesses. The ST will be expected, as much as possible, to integrate into the practice's clinical team and care for the full breadth of patients that attend GP. The ST shall work 4 clinical sessions per week incorporating a 1 to 1.5 hour weekly tutorial with the trainer at some time during their time in the practice. In addition to a formal tutorial the GP trainer will provide contemporaneous supervision and debriefing during and after clinical sessions. The ST will do an additional clinical session when the half day release course is not in term. The ST will need to fulfil all the normal requirements of an ST1/2 in a GP placement as outlined by the RCGP.

The overall theme of the GP learning shall be geared towards integrating the knowledge gained in the secondary care setting into a holistic primary care approach around the theme of maternal and child health without detracting from other areas of primary care as they may arise. Every opportunity should be made by the GP trainer to introduce the ST to the members and clinics of the extended primary care team who provide care to women and children in the primary care setting including health visitors, practice nurses, immunization nurses, family planning specialists etc.

Paediatric A&E, Monday and Friday Afternoon, St Mary's Hospital

The ST will participate in the assessment of children presenting with acute problems to the A&E department. They will gain skill in the initial assessment of a child, learning to differentiate the well child, from the acutely unwell but stable child, to the acutely "toxic" child. They will be the first assessor of children, providing care in a supportive environment according to their ability as it progresses over the course of the post. The ST shall have the opportunity to learn about the assessment and management of all the common paediatric presentations ranging from common upper airway infections to non-accidental injury and child protection. In conjunction with their GP placement they will learn about the interfaces between primary, secondary care and the social service system and how they affect the care of children and their families.

Rheumatology, Thursday Morning Clinic, St Charles' Hospital

The rheumatology component will focus on gaining competency in the diagnosis and treatment of common rheumatologic problems referred to secondary care. The ST will attend the weekly Thursday morning clinic at St Charles' Hospital. The ST will participate in as much direct patient care as their skills will allow as determined by the supervising specialists. The ST will be encouraged to be the first clinician to assess the patient as they gain experience over the 6 months of the post. The ST will gain skill in diagnosing and treating common rheumatologic diseases that present to the clinic. In addition, the ST will do minor surgical procedures (i.e. joint injections) as available and deemed appropriate by the specialist team.

Gynaecology ER, Thursday Afternoon, St Mary's Hospital

This component will focus on gaining competency in the diagnosis and treatment of common acute gynaecology and early pregnancy problems presenting to the Gynaecology ER. The ST will attend the weekly Thursday afternoon sessions at St Mary's Hospital. The ST will participate in as much direct patient care as their skills will allow as determined by the supervising specialists. The ST will be encouraged to be the first clinician to assess the patient as they gain experience over the 6 months of the post. The ST will gain skills in diagnosing and treating the common acute gynaecologic problems such as miscarriage, bleeding in early pregnancy, ectopic pregnancy etc. In addition, the ST will be offered the opportunity to do assessment procedures, such as pelvic ultrasounds, as available and deemed appropriate by the specialist team. If staffing allows, the ST will have the opportunity to attend the labour ward, antenatal clinic and the maternity day clinic to gain experience in later obstetric care as well over the course of the 6 month post.

The ST will liaise closely with their Gynaecology clinical supervisors to determine what is possible to achieve during their 6 month post. In conjunction with their GP placement they will learn about the interfaces between primary, secondary care and the social service system and how they affect the care of women and their families.

Gynaecology Outpatients, Friday Morning Clinic, St Mary's Hospital

This component will focus on gaining competency in the diagnosis and treatment of common gynaecology problems referred to secondary care. The ST will attend the weekly Friday morning clinic at St Mary's Hospital. The ST will participate in as much direct patient care as their skills will allow as determined by the supervising specialists. The ST will be encouraged to be the first clinician to assess the patient as they gain

experience over the 6 months of the post. The ST will gain skill in diagnosing and treating common gynaecologic diseases that present to the clinic. They will keep contemporaneous notes. In addition, the ST will be offered the opportunity to do minor surgical procedures (e.g. hysteroscopy, pipelle biopsies, colposcopy) as available and deemed appropriate by the specialist team. If staffing allows, the ST will have the opportunity to attend the labour ward, antenatal clinic and the maternity day clinic to gain experience in obstetric care as well over the 6 months of the post.

The ST will liaise closely with their Gynaecology clinical supervisors to determine what is possible to achieve during their 6 month post. In conjunction with their GP placement they will learn about the interfaces between primary, secondary care and the social service system and how they affect the care of women and their families.

INNOVATIVE TRAINING POST (20015)

Incorporating General Practice, Palliative Care, Dermatology

THE JOB

An Innovative Training Post is a six-month GP ST1/2 post, which integrates different specialties into GP training. This post is outpatient and community-based, across the specialties of Palliative care, Dermatology and General Practice.

The post holder will spend five sessions in General Practice, four sessions in Palliative Care and one session in Dermatology per week. The ST will gain skills, knowledge and training in the management of primary care problems across these specialties. The secondary care components are chiefly in community and outpatient clinics sited at St Mary's and St Charles' Hospitals. The sessions in general practice are in a local GP training practice with one session attending the St Mary's half-day release.

EDUCATION, SUPERVISION & LEARNING OUTCOMES

The post has a balanced service and educational focus. The educational component will include supervision and appraisal and the GP Trainer & Consultants listed below will be the clinical supervisors. The coordinating Clinical Supervisor will be the GP Trainer. At the commencement of the post the GP Trainer will compose a learning plan for the ST to be entered on the ST's PDP on their e-portfolio. The curriculum statements pertaining to palliative care and dermatology in conjunction with an educational needs assessment with the ST will inform the drafting of the PDP. The GP Trainer will liaise closely with the consultants to ensure that the educational objectives are being fulfilled over the course of the post. As this post is based in primary care the ST will need to fulfil the GP OOH requirement and all other primary care outcome measures (e.g. PSQ's) relevant to a 6 month post in GP as dictated by the RCGP.

Overall educational supervision will be provided by the ST's Educational Supervisor assigned to the ST at the beginning of their training. The ST will be assessed through the nMRCGP e-portfolio with regular timely reviews with the Educational Supervisor. The ST will complete the PDP and Learning Log. WPBA Tools (COTS, MINI-Cex, CBD's MSF's etc) will be completed in each clinical venue in proportion to the time spent in each specialty. Near the end of the post the GP Trainer and the Consultants will each complete a clinical supervisors report to be reviewed by the Educational Supervisor with the ST at their 6-monthly ESR.

CLINICAL SUPERVISORS

- St Mary's GP Trainer to be assigned in Rotation from the St Mary's GP STS Trainers Group
- Dr Ien Chan, Consultant Dermatologist, St Mary's Trust, ien.chan@imperial.nhs.uk
- Dr Denise Forth, Consultant in Palliative Care, Pembridge Unit, St Charles Hospital, Denise.Forth@kc-pct.nhs.uk

WEEKLY TIME TABLE (Subject to Revision)

| ITP 20015: | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
|------------|--------|--|-------------------------------|----------|---|
| AM | GP | Palliative Care, All Day Pembridge Unit - Dr Denise Forth | Dermatology SMH - Dr Ien Chan | GP | Palliative Care, Pembridge Unit - Dr Denise Forth |
| PM | GP | Palliative Care, Pembridge Unit - Dr Denise Forth | VTS/GP | GP | Palliative Care, Pembridge Unit - Dr Denise Forth |

COMPONENT JOB DESCRIPTIONS:

General Practice:

Training in this 6 month ST1/2 post will be similar in scope to training that occurs in ST3. It is recognized that due to having less experience the ST will require more support and time to get to grips with the unstructured presentations of primary care illnesses. The ST will be expected, as much as possible, to integrate into the practice's clinical team and care for the full breadth of patients that attend GP. The ST shall work 4 clinical sessions per week incorporating a 1 to 1.5 hour weekly tutorial with the trainer at some time during their time in the practice. In addition to a formal tutorial the GP trainer will provide contemporaneous supervision and debriefing during and after clinical sessions. The ST will do an additional clinical session when the half day release course is not in term. The ST will need to fulfil all the normal requirements of an ST1/2 in a GP placement as outlined by the RCGP.

Dermatology, Wednesday Dermatology Clinic, St Mary's Hospital

The ST will attend the weekly Wednesday morning dermatology clinic at St Mary's Hospital. The ST will participate in as much direct patient care as their skills will allow as determined by the supervising specialists. The ST will be encouraged to be the first clinician to assess the patient as they gain experience over the 6 months of the post. The ST will gain skill in diagnosing and treating common dermatological diseases that present to the clinic. In addition, the ST will do minor surgical procedures as available and deemed appropriate by the specialist team.

Palliative Medicine – Pembridge Palliative Care Centre, St Charles Hospital

This post forms part of the medical team which, under the leadership of the consultant staff of Pembridge Palliative Care Centre, provides care for in-patients, day care and community patients on a day to day basis. The post is based in Pembridge Palliative Care Centre.

This post is an opportunity for a GP ST to gain experience in palliative care across different settings whilst being in a supportive environment. They would join a team of consultants and specialist trainees who all take part in a weekly educational meeting on Tuesday mornings. There are two consultant inpatient ward rounds per week and a

weekly multidisciplinary team meeting. There will also be scope to be involved in palliative day care. Involvement in clinical audit is actively encouraged.

There would be opportunities for the GP ST to also make links with the community palliative care team based at the Pembridge Centre and follow patients out into the community i.e. through joint visits with the specialist nurses and doctors, involvement in community MDTs.

MAIN CLINICAL ASPECTS OF THE POST

The post will be based mainly within the Pembridge Palliative Care Centre.

The post holder will work with the medical team to:

- Provide day to day medical care to all the in-patients in Pembridge Palliative Care Centre in accordance with the current policies and protocols for management and in accordance with the management plans laid down by the consultant and registrars in palliative medicine
- Provide a full medical assessment and management plan for some new admissions who are admitted in-patient ward (support would always be available from a consultant or registrar to discuss admissions, see patients together and formulate management plans)
- Play an appropriate role within the multi-disciplinary care team within the Centre, communicating with fellow professionals and responding to their concerns appropriately
- Communicate with the family and friends of all in-patients as appropriate
- Seek appropriate advice and support from the Consultant in Palliative Medicine and the Specialist Registrar when required, keeping in mind the boundaries of the post holder's experience and competence.

The post holder will work with the other medical staff in post to:

- Maintain clinical records
- Participate in the education of students and visiting professionals as appropriate
- Participate in clinical audits
- Attend educational activities within Pembridge Palliative Care Centre as appropriate
- Participate, as required, in collaborative research activity within Pembridge Palliative Care Centre
- Participate, as required, in the development of protocols, guidelines and documentation within Pembridge Palliative Care Centre

MAIN DUTIES OF THE COMPONENT

The post holder will work within Pembridge Palliative Care Centre each day from 9am to 5pm with time set aside for the weekly journal club.

WEEKLY JOB PLAN:

A.M.

P.M.

| | | |
|-----------|---------------------------------------|----------------------------------|
| MONDAY | | |
| TUESDAY | Journal Club Ward round | In-patient MDT |
| WEDNESDAY | | |
| THURSDAY | | . |
| FRIDAY | Ward round with specialist registrar. | Day Care & ward medical reviews. |

PUBLIC HEALTH

EDUCATIONAL SUPERVISOR: Dr Margaret Guy Westminster PCT

EDUCATION

Clinicians are trained to concentrate predominantly on the needs of individual patients, with a particular focus on the diagnosis and treatment of disease. Health promotion and preventive care (e.g. smoking cessation, immunisation, screening) are also predominantly focused on individuals. However, the public health practitioner's 'patient' is the local population. Considering population health needs requires a step-change in thinking for most clinicians, especially in terms of:

- understanding health needs of whole populations and specific groups within those populations;
- enabling the development and delivery of cross-sector and inter-disciplinary interventions that can improve well-being, as well as health care, for whole populations of sub-groups of populations; and
- determining service priorities within available resources.

In addition, enabling population health needs to be met requires an adequate knowledge of epidemiology, data analysis and interpretation, critical appraisal and the principles of health protection.

This post is intended to provide the trainee with a sufficient understanding of these areas to enable recognition of the relevance of these skills, and when and where to obtain specialist expertise.

SERVICE PROVISION

Just as working as a trainee in a hospital specialty involves directly providing services for patients as part of a clinical team, working as a trainee in public health involves providing services for the public as part of a public health team.

The work of public health service posts in PCTs includes undertaking population surveillance (e.g. monitoring and interpreting disease trends); supporting the PCT's providing, contracting and commissioning functions; enabling health inequalities to be identified and addressed and working with other organisations, e.g. the local authority, voluntary sector bodies and other NHS organisations to achieve this; and supporting the development and implementation of strategy and policy.

The GP trainee in public health will be expected to contribute to these various functions whilst attached to the PCT. They will not take part in the public health on call rota as this requires more knowledge and expertise than they are likely to have or be able to acquire during a part-time six-month post.

INTENDED LEARNING OUTCOMES

The four 'core competencies' of public health practitioners are:

1. surveillance and assessment of population health and well-being;
2. assessing evidence of effectiveness of health and health care interventions, programmes and services;

3. policy and strategy development and implementation; and
4. leadership and collaborative working for health.

By the end of their attachment with a PCT, the GP trainee in public health will be expected to have developed an appreciation of the main components of these four core competencies, and to have a general understanding of:

- the roles of PCTs and strategic health authorities and their relationships with other NHS organisations and partner organisations, such as the local authority and voluntary sector bodies;
- epidemiology, including population data analysis and interpretation;
- the health needs of the population and how these needs are identified;
- the principles of health protection and health promotion;
- the presentation of simple assessments and analyses in easily understandable formats;
- how public health expertise can contribute to policy and strategy development and implementation;
- how public health expertise can contribute to the effective provision and commissioning of health care services;
- why it is necessary to prioritise health and health care services and how this can be done; and
- how public health practitioners can influence others, through, for example, the provision of information and using the media.

In the appendix to this document, a check list of relevant public health skills and knowledge can be found. This will be used to assess the post-holder's knowledge and experience before, during and at the end of their attachment. It has been adapted from the check list used for public health SpRs and the competencies selected have been cross-referenced to the relevant Statements of the RCGP Curriculum, specifically intended learning outcomes found in curriculum statements; Personal and Professional Responsibilities, Management in Primary Care, Healthy people: promoting health and preventing disease.

SUPERVISION

The post-holder's educational (and clinical) supervisor for the public health component of this post will be an accredited public health trainer.

The public health teaching and experience will be through supervision and one-to-one discussion with the Director of Public Health with other members of the PCT's Public Health Team. The post-holder will have an hour a week protected time with the education supervisor.

The post-holder and the public health educational supervisor will conduct an initial educational needs assessment, a mid-point appraisal at 3 months and final appraisal at the end of the attachment. The final appraisal will include a review of educational and experiential attainment against the public health competencies identified in this document.

INDICATIVE PROGRAMME

A detailed programme and project work will be advised on commencement of each post but an indicative outline is given below. The public health sessions will be orchestrated around the delivery of the curricula competencies outlined in the Appendix.

| | Mon | Tues | Wed | Thurs | Fri |
|----|---------------------------------|---------------------------------------|--------------------|---|-------------------------|
| Am | Departmental meeting PH work | One to one with PH trainer PH work | PH work | London wide PH training every two weeks | Health protection cover |
| Pm | PH work | PH work | GP training scheme | PH work | PH work |

FORMAL TEACHING

Attendance at the local GP specialty training release programme is expected and there will be the opportunity to attend in-house and regional public health medicine training events.

ROLE OF POSTS IN GENERAL PRACTICE TRAINING PROGRAMMES

Each post will be incorporated into a structured training programme for general practice. All programmes will be compliant with the RCGP/PMETB regulations on programme content and structure.

QUALITY CONTROL

Posts will be included into the normal London Deanery processes for the quality control of GP training programmes and SHO posts. Currently, this comprises trainee exit questionnaires, and a three-yearly inspection visit to each vocational training scheme during which a triangulated assessment is conducted in relation to all posts attached to the scheme. This process is being revisited in the light of the recently published PMETB domains.

GP WITH COMMUNITY PAEDIATRICS AND OTHER OUTPATIENT CLINICS DURING THE GP COMPONENT OF TRAINING

All St Mary's GP training programmes comprise 18 months in GP. Innovative training posts outlined above count towards the 18 months. In addition to the Innovative Training posts, all ST's have the opportunity to attend outpatient experiences during the first 6 months of the GP component of their training. In order to facilitate this the ST's nominal "self direct learning sessions" are assigned to various secondary care clinics of St Mary's Hospital; placements in the outpatient departments is for a month in rotation. The schedule for attendance to these clinics is circulated by the programme directors at the beginning of each 6-month period.

It is the ST's responsibility with trainer support to contact the relevant secretary in advance of each attachment to arrange to sit in clinic. The clinics take place at St Mary's Hospital with the exception of Ophthalmology Clinic and A&E (Western Eye Hospital) and Rheumatology Clinic (St Charles Hospital).

| | | |
|--|---|---|
| Dermatology Dr J Leonard Wednesday am General Dermatology Clinic Secretary: 02078861194 | Ophthalmology Mr Migdal Any day A&E Dept Monday am Glaucoma Clinic Secretary: 02078863258 | Paediatrics Dr M Coren Monday pm Tuesday pm Friday am Secretary: 02078866402 |
| ENT MR Tolly Monday am Wednesday am Secretary: 02078861091 | Rheumatology Dr R Rees Wednesday am Thursday am Secretary: 02078861046 | Gynaecology ER Miss Ahmed Any day Secretary: 02078866907 |

When the ST is not attending an allocated clinic, they may use the self directed learning session to attend another clinic. Some examples are given below (all are located at St Mary's Hospital).

| | |
|-------------------------------|---|
| Joint Injection Clinic | Wednesday afternoon Contact Dr Rees' secretary (02078861010) |
| GU Medicine | Contact Dr Greene's secretary (02078861670) |
| See & Treat Clinic | Contact Lord A Darzi's secretary (02078861310) |

GP WITH COMMUNITY PAEDIATRICS

Every 6 months **one** ST in GP will be seconded to the Community Paediatrics Department of St Mary's Hospital for one day (2 sessions) per week for an entire 6 months. This ST1/2 opportunity is assigned when ST's choose their programme at the beginning of their training. This will be instead of the above rotation. They will have the opportunity to participate in the above placements in their ST3 year. The GP component of the post is rotated between the various training practices and therefore the weekly timetable will change to allow the best fit for the training practice and the department.

Prior to beginning the job the ST, GP trainer and the Department will negotiate which days would be best for the ST to attend the department in order to maximize educational benefit balanced with patient need in both sites, but the GP ST is to do 2 sessions in the department. The days in the department cannot be dictated given the variability in ST need, practice timetable, and department educational outcomes. However, the attendance to the Community Paediatric Department is not optional. If there are compromises to be made in the timetable they should be made in favour of the Community Paediatrics Department for this 6 month post in order to provide the ST with the paediatric experience that the post is intended to give.

- The GP trainer is the employer and ultimate clinical supervisor of the post.
- The two consultants that are responsible for the community paediatric component are Drs. Stephen Studnik and Chandrayee Sengupta.
(Stefan.Studnik@imperial.nhs.uk ; chandrayee.sengupta@nhs.net)
- The ST will need to arrange an honorary contract with the St Mary's Trust HR before a commencement of the post. The ST will be informed of whom to contact by the Programme Directors two months prior to beginning the post.

The basic work week will comprise:

- 6 clinical sessions in GP
- 2 Clinical sessions in Community Paediatrics
- 1 GP Tutorial Session
- 1 Session for the Half Day Release Course on Wednesday afternoons.