

Foundation Placement Description

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|---|--------------------|---|---|---------------------------------------|------------------|
| Foundation School (Delete as appropriate) | | Programme No. (eg. L006 OR T102)*: | | | |
| Trent | | T001 T004 T010 T020 | | | |
| Year (Delete as appropriate) | Specialty: | | | Subspecialty (If appropriate): | |
| F2 | Emergency Medicine | | | | |
| Site: | | | Trust: | | |
| Pilgrim Hospital | | | United Lincolnshire Hospitals NHS Trust | | |
| Main duties: | | | | | |
| <p>The junior doctors will be expected, in conjunction with his/her colleagues, to provide a comprehensive Accident & Emergency Medicine service at the Pilgrim Hospital. They will have continuing responsibility for patients in his/her care and for the proper functioning of the department. They will be answerable to the Accident and Emergency Consultant and overseen by the Head of Service for Accident and Emergency.</p> <p>The junior doctors are expected to do the formal assessment of their patients (history, clinical examination, requesting relevant investigations, initiating appropriate treatment and safe disposal from the department) under senior supervision. Consultants are present in the department from 8 am till at least 9 pm on week-days and from 9 am till 4 pm on the week-ends and Bank Holidays. There are at least two middle-grade doctors on the shop-floor at any given time.</p> <p>FY-1: Every patient seen by the FY-1 doctors is physically reviewed by a senior doctor. FY-2 and GPVTS Trainees: Complex cases should be discussed with the senior doctor and the discussion along with the name of the senior doctor should be mentioned in the ED notes.</p> <p>All the junior doctors are encouraged to decide the differential diagnosis and plan of management based on their history, examination and available investigations BEFORE discussion with the senior. 'Safe and quick decision-making' is one of the main skills for the junior doctors to acquire during this 4-month posting.</p> <p>All doctors participate in the 'Huddle' that takes place twice during the day (8 am and 3 pm) when the new consultant takes charge of the department. On week-ends and Bank Holidays this happens only once at 9 am. This is a Business Round at the White Board in the department when each doctor presents his/her patient/s in a systematic way and tells the plan for the new consultant to be aware. This also provides an important learning opportunity for the junior doctors.</p> <p>United Lincolnshire Hospitals NHS Trust is committed to safeguarding and promoting the welfare of children, young people and adults, both as service users and visitors to Trust premises. All staff have a responsibility to safeguard and promote the welfare of children and adults. The junior doctors, in conjunction with their clinical supervisors, will be responsible for ensuring they undertake the appropriate level of training relevant to their individual role and responsibilities and that they are aware of and work within the safeguarding policies of the Trust.</p> <p>The junior doctors are expected to treat patients, service users and carers with courtesy, care and compassion at all times, treating each person as an individual by offering a personalised service. Trust staff will adopt behaviours and attitudes which promote, supports and respects privacy and dignity in accordance with the Trust Dignity policies and dignity in care pledges. Staff are expected to challenge poor practice in relation to dignity and treat each other with respect.</p> | | | | | |
| Example Timetable | | | | | |
| For example: W/R (Outpatients), MDT, Meetings, X-Ray Conference etc | | | | | |
| | Mon | Tues | Weds | Thurs | Fri |
| AM | Working in A + E | Working In A + E | Working in A + E | A + E Teaching / Working in A + E | Working in A + E |
| Lunchtime | | | | FY2 Teaching 12-2:10pm | |
| PM | Working in A + E | Working In A + E | Working in A + E | Working in A + E | Working in A + E |
| Educational Activities: | | | | | |
| <p>Teaching: All junior doctors are expected to attend the departmental teaching (every Wednesday) from 11am - 1pm). They are also released from their shop-floor duties to attend their mandatory teaching.</p> <p>Audits: Every junior doctor is expected to participate in the departmental audits. Topics are chosen from the RCEM-given topics or from those arising from local needs based on local clinical practice. Usually two or three junior doctors share one topic. They are supervised by a Middle-grade doctor and a consultant. Audit presentation is usually arranged during the last 2 or 3 teaching sessions of the four-month period. Junior doctors are also encouraged to audit any aspect of the departmental clinical practices, if they feel any improvement is required.</p> <p>Rota: F2/GPVTS follow a rolling rota with shifts ranging from 8-12 hours, averaging at 40 hours per week</p> <p>Meeting with Clinical and Educational Supervisors: All junior doctors are expected to have formal meetings with the clinical and educational supervisors at least once every month to assess their progress and to identify any particular training needs.</p> | | | | | |
| Other Comments (if appropriate): | | | | | |

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Department Info: Emergency Department (ED) at Pilgrim Hospital forms an integral part of the Urgent Care Service which also includes the Acute Medical Unit (AMU) and the Ambulatory Emergency Care (AEC). ED, AMU and AEC are headed by two Heads of Service who report to the Clinical Director. The ED at Pilgrim is a busy medium sized department. We see nearly 60000 new patients every year. A significant proportion of these are frail and elderly (over 80 years of age) with a multitude of co-morbidities which can be challenging. We also have a significant number of major trauma patients coming to us because of our rural location and more than 1 Hour distance by road from the nearest Major Trauma Centre at QMC, Nottingham. The ED has a four-bed 'Resus' bay well equipped with state-of-the-art resuscitation equipment, including 'Oxylog-3000' ventilators and overhead monitoring units for each bed. There is also a central monitoring console in the main area of the department for easy monitoring of ECG of all the four beds. One of the resus beds also has paediatric resuscitation equipment. The resus also has a recently installed digital X-Ray that shows images within 3 seconds of shooting and a brand new portable Sonosite X-porte ultrasound machine. We have recently acquired a dedicated digital X-Ray room for our 'Major' and 'Minor' patients which has significantly reduced the time to get the X-Rays for our patients whilst reducing the work-load on the main X-Ray Department. There are a total of 11 'Major' cubicles, including one Plaster Room and one Clean Procedures (Suture) room. There is also a dedicated paediatric assessment room. We also have 3 small 'Minor' cubicles. The Department is an accredited Level-2 Trauma Unit.