

Foundation Job Description

Foundation School (Delete as appropriate)	Programme No. (e.g. L006 OR T102) <i>Can be found on the Trent/LNR Allocation Spreadsheet</i>
LNR	L004/L052/L053/L056/L057

Grade (Delete as appropriate)	Specialty: <i>If General (Internal) Medicine OR General Surgery, please provide a sub-specialty</i>	Sub-specialty (If appropriate): <i>If General (Internal) Medicine OR General Surgery, please provide a sub-specialty</i>
F2	Emergency Medicine	with interest in frail elderly

Site:	Trust:
Leicester Royal Infirmary & LLR community hospitals	University Hospitals of Leicester NHS Trust

Main duties:

UHL and LPT are developing a geriatric or 'frailty' service which recognises the complexity of managing frail older people at the interface (acute care, emergency care and links with community services). The interface FY2 doctors will join a team of 17 consultant geriatricians and 21 Advanced Nurse Practitioners, with support from existing multidisciplinary team in delivering a specialist geriatric medical assessment to frail older people attending acute and community settings.

The acute and emergency frailty units – Leicester Royal Infirmary

This development aims at delivering Comprehensive Geriatric Assessment to frail older people in the acute setting. Patients are screened for frailty in the Emergency Department and then will undergo a multidisciplinary assessment including a consultant geriatrician, before being triaged onto the most appropriate setting. This might include admission to in-patient care in the acute or community setting, intermediate care (residential or home based), or occasionally other specialist care (e.g. cardio-respiratory).

Community Hospitals in Leicester, Leicestershire & Rutland

The Leicestershire Partnership NHS Trust (LPT) has 12 inpatient wards spread across eight community hospital sites working collaboratively with an Integrated Community Service (ICS) to provide high quality medical care to the patients of Leicester, Leicestershire and Rutland in order to create:

- Centres of excellence for re-enablement, providing the support needed to enable older people to get back into their own home and reducing the need for long term care and readmission
- Provide an increasing complexity of clinical interventions to support recovery for higher acuity patients closer to home
- Vibrant centres for local, short-term care of older people, restoring function, increasing motivation, participation and assessing for access to other services
- Local hubs that add value to the community, providing new types of services and bringing people and groups together
- In Loughborough there is also an 'Older Peoples Unit' which offers day case assessments to older people at risk of admission, again working within a MDT setting.
- There are plans to create more 'subacute' ward areas in some of the community hospitals in late 2015-2016.

Service Delivery

The ANP team is divided into zones. Each zone has a designated zone lead who oversees all leave allocation and rota compliance to facilitate effective cover arrangements. Our community hospitals have designated ANP's within each site Monday to Friday excluding Bank holidays from 09.00 to 17.30. Within these hours the ANPs are responsible for the medical management of all patients in conjunction with the consultant Geriatrician.

An on-call service by the ANP team is available between 08.00 -09.00 and 17.30-18.30 weekdays for emergency advice. The ANP responsible for on-call is identified on a designated ANP rota.

You will work with an ANP on a given ward for a two week-period; during that time, we expect you to manage half of the ward, using the ANPs for guidance and support, but YOU will be looking after the patients under your care – so be prepared to communicate effectively with the MDT!. Changes in clinical plans must be discussed with the ANP team to facilitate continuity of care delivery.

Central Nottingham Clinical Services (CNCS), a GP Out of Hours provider, provides medical management during the Out of Hours periods (weekdays 18.30-08.00 with weekend and bank holiday cover from 08.00-08.00).

Designated Consultant Geriatricians provide medical ward rounds twice a week to facilitate on-going review of medical care, new patient admissions and discussion of admission or re admissions to secondary care as appropriate. All patients must be reviewed a minimum of once a week by the consultant to facilitate the opportunity for clinical discussion of care. An on-call advice service is also available 09.00-18.00 5 days a week via the EFU on-call phone 07538 692 015.

To assist safe and effective care in combination with effective utilisation of resources a number of pathways have been established to facilitate treatment within the ward area and reduce attendance at ED e.g. Patient Alert Flag Process (See useful documents) , blood request folders and ANP led ward rounds.

The responsibility of the medical management of the ward lies with the ANP and the Consultant Geriatrician, but for governance purposes the geriatricians are clinically responsible.

Board Rounds

Each ward undertakes a daily multi-disciplinary board round to highlight any new medical issues, update the team on patient's progress and facilitate safe and timely patient discharges.

Other Services

Intensive Community Support Service (ICS)

The ANPs provide virtual support for each ICS Hub this includes:

Providing an agreed medical management plan for newly admitted patients and/or provides medical advice for patients within ICS including domiciliary visits as required.

- For acute trusts this may be just an agreement of their current recommended plan
- For GP referrals a medical management plan will need to be initiated

• Community Hospitals referrals – the ANP referring into ICS must ensure a robust medical management plan is in place and communicated on the referral form

Mental Health Services for Older People (MHSOP)

Example Timetable

For example: W/R (Outpatients), MDT, Meetings, X-Ray Conference etc

	Mon	Tues	Weds	Thurs	Fri
AM	Emergency frailty unit	Emergency frailty unit	Emergency frailty unit	Emergency frailty unit	
Lunchtime	Teaching				
PM	Community geriatrics	Community geriatrics	Community geriatrics	Community geriatrics	

Educational Activities:

Key learning outcomes:

Clerking for Discharge rather than for Diagnosis

Clinical care focused on Functionality rather than Diagnostic and Therapeutics

Clinical Diagnostic Reasoning without reliance on Investigations

Broadened concept and range of Therapeutic Options; Join 'EFU' whatsapp group

Teaching sessions: GER MED Monday 12.30 for 1pm, AMU 15 seminar room; 'Frailty fighting force' Friday 12.30 EDU seminar room; Monthly tutorials (Dr Conroy, clinical supervisor); self directed learning: Falls http://www.nottingham.ac.uk/toolkits/play_1685

Rehabilitation

<http://sonet.nottingham.ac.uk/rlos/ucel/icf/Default.html>

<https://www.youtube.com/watch?feature=youtu.be&v=JPzz6fcmxol&a=&app=desktop>

<http://www.americandeliriumsociety.org/resources/videos>

<http://www.bgs.org.uk/index.php/elearning>

http://www.alzheimers.org.uk/site/scripts/documents_info.php?documentID=130

http://sonet.nottingham.ac.uk/rlos/mentalhealth/dementia_hospital/

http://sonet.nottingham.ac.uk/rlos/mentalhealth/dementia_care/

<http://sonet.nottingham.ac.uk/rlos/mentalhealth/communication/>

<https://vimeo.com/132073531>

Other Comments (if appropriate):

Timetable is illustrative as F2s spend 50% of their time in Geriatric emergency care (in the emergency frailty unit, supervised by consultant geriatricians and working within an interdisciplinary MDT) and community hospitals (with geriatricians and ANPs, as well as the MDT - here they practice more autonomously, taking responsibility for a case load of patients, with opportunities to follow them through to home based services, as well as accessing a range of geriatric OPD services such as fall programmes) - but always under the supervision of a consultant. F2s have the opportunity to develop a wide range of experience across acute and community care.

Lots of opportunities to make a difference: Clinically, Service development, Quality improvement, Education & training. Quality improvement projects: Delivering Comprehensive Geriatric Assessment/MDT handover in Emergency Frailty Unit/Frailty identification

Disclaimer: Please note that the placement information provided is subject to change.