

# Foundation Placement Description

<b>Foundation School (Delete as appropriate)</b>		<b>Programme No. (eg. L006 OR T102)*:</b>			
Trent		T107			
<b>Year (Delete as appropriate)</b>	<b>Specialty:</b>	<b>Subspecialty (If appropriate):</b>			
F1	Urology				
<b>Site:</b>		<b>Trust:</b>			
City Campus		Nottingham University Hospitals NHS Trust			
<b>Main duties:</b>					
<p>Duties depend on the roles allocated each week. F1s are expected to fulfill these roles which provide quality patient care from different perspectives. The main duties of F1s are the initial symptomatic management of patients, organization of investigations to differentiate diagnosis and the discharging of patients back into the community.</p> <p>There are 6 urology F1s that work in a team and fulfill different roles that rotate every week.</p> <p>All 6 F1s are allocated a Consultant each eg. Mr. Lemberger. F1s will work closely with their respective Registrar on ward rounds every morning at 8am where their Consultant may lead the ward round once or twice a week. Each patient will be reviewed and instructions delegated to the F1 of the team.</p> <p>Pre-op clinics include history taking and examinations, interpreting data such as blood work and ECGs. It is important to communicate with anesthetists when abnormalities are found. This is essentially a screening process for patients who are unwell for surgery.</p> <p>Admin includes filling VTE forms, discharge summaries, TTOs and paper work such as on-going audits.</p> <p>On average, week day shifts start at 8am (or 7.45am to prepare) till 5.30pm.</p> <p>On call requirements: FY1s at NCH cross cover various surgical specialities on a rota that includes Night, Twilights (17:30-20:00 Mon-Fri) and Long Days (07:30-20:00 Sat-Sun) shifts. For twilight/weekend shifts - 1 F1 covers Urology on-calls (and other surgical specialities if helps needed to support CTs or FY2s). For night shifts - 2 F1's cover General Surgery and Urology Nights, with the support of CTs or FY2. F1s on-call will be required to clerk patients, list differential diagnosis, investigate and manage patient symptoms. Admitted patients will then be presented to senior colleagues for management plans. On-call shifts can be weekdays or weekend day/nights or twilight.</p>					
<b>Example Timetable</b>					
<b>For example: W/R (Outpatients), MDT, Meetings, X-Ray Conference etc</b>					
	<b>Mon</b>	<b>Tues</b>	<b>Weds</b>	<b>Thurs</b>	<b>Fri</b>
<b>AM</b>					
<b>Lunchtime</b>					
<b>PM</b>					
<b>Educational Activities:</b>					
<p>Those working on the wards will be expected to work with an MDT setting. These patients may be emergency and elective new admissions or post-op patients. Performing practical procedures such as venepuncture, cannulation, catheterisation is also expected.</p> <p>F1s on-call will be required to clerk patients, list differential diagnosis, investigate and manage patient symptoms. On-call shifts can be weekdays or weekend day/nights or twilight.</p> <p>Pre-op clinics include history taking and examinations, interpreting data such as blood work and ECGs – useful for education. Good interaction with anaesthetists.</p> <p>Working closely with Registrars on the ward allows ePortfolio assessments to be conveniently organised on the ward.</p> <p>F1s are encouraged to attend operating lists</p> <p>F1 weekly teaching every Thursday lunchtime.</p> <p>Trainees are released to attend mandatory FY1 teaching and study leave is facilitated. There are opportunities to participate in quality improvement and patient safety activities.</p> <p>Generic Learning outcomes you should be able to achieve in this job:</p> <ol style="list-style-type: none"> <li>1. Professional Behaviour &amp; Trust: Act professionally; deliver patient centred care and maintain trust; behave in accordance with ethical &amp; legal requirements; keeps practice up to date through learning and teaching; demonstrate engagement in career planning.</li> <li>2. Communication, team working and Leadership: Communicate clearly in a variety of settings; work effectively as a team member; demonstrate leadership skills.</li> <li>3. Clinical Care: Recognise, assess and initiate manage the acutely ill patient; recognise, assesses and manage patients with long term conditions; obtain history, perform clinical examination, formulate differential diagnosis and management plans; request relevant investigations and act upon results; prescribe safely; perform procedures safely; trained to and manage cardiac and respiratory arrests; demonstrate understanding of the principles of health promotion and illness prevention; manage palliative and end of life care.</li> <li>4. Safety and Quality: Recognise and work within limits of personal competence; make patient safety a priority in clinical practice; contribute to quality improvement.</li> </ol>					
<b>Other Comments (if appropriate):</b>					
All urological patients in City hospital are located in Harvey 2 and Gillies wards with outliers when beds are not available on these wards. All our shifts are based on these wards except for pre-op clinics where these are arranged in the Urology Centre.					

\*can be found on the Trent/LNR Allocations Spreadsheet

## Disclaimer:

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