

**2006/2007**

**FOUNDATION YEAR 2**

**ROTATION THREE**

**General Medicine & Diabetes/Endocrinology / General  
Practice / Orthopaedics**

**NORTHERN LINCOLNSHIRE AND GOOLE HOSPITALS NHS TRUST**

**Job Description**

**Senior House Officer – Foundation Training Year 2  
Based at either Scunthorpe or Grimsby**

**From August 2004 we are able to offer a number of new SHO rotations. Each rotation comprises of three four monthly placements and offers the candidate a wide range of experience in the different specialities. The posts are supported by the Postgraduate Dean. A named Educational Supervisor will carry out regular appraisals and assessments.**

**THE TRUST**

Northern Lincolnshire and Goole Hospitals NHS Trust was created on 1<sup>st</sup> April 2001 following the merger of North East Lincolnshire NHS Trust (Grimsby) with Scunthorpe and Goole Hospitals NHS Trust to form an acute Trust serving a catchment area of 500 square miles and a population of circa 410,000. The Trust has a budget of £145 million and employs approximately 4700 staff. Its name reflects the wider geographical area in which the Trust is a major provider of health care.

The strategic direction for local service provision has been recast in the light of a Service Review. The strategic direction is based upon:

The development of unified Clinical services across South Humber, delivered in three hospital settings, (namely Diana, Princess of Wales Hospital, Grimsby, Scunthorpe General Hospital and Goole & District Hospital)

- The development of specialist and sub-specialist expertise within these services
- Ensuring local services achieve both service and training accreditation requirements
- Maximising local service provision to local people
- The use of modern technology to support those unified services

This strategy is supported by South Humber Health Authority, the North East Lincolnshire and North Lincolnshire Primary Care Trusts and Local Authorities.

# DIANA, PRINCESS OF WALES HOSPITAL

## GRIMSBY

The Diana, Princess of Wales Hospital in Grimsby is situated on a single site, having been built in 1983 but has subsequently undergone considerable expansion. There are currently 530 beds and the latest developments are a £1 million dedicated Day Surgery Unit, which opened in January 2003, a £11.8 million Women and Children's Unit which opened in July 2004 and a planned purpose built Endoscopy Unit and Cardiology Unit.

### The Rotation

ROTATION	4 MONTHS	4 MONTHS	4 MONTHS
<b>1</b> <b>3 POSTS</b>	General Medicine/ Elderly Medicine  Dr J A Adiotomre	Obstetrics & Gynaecology  Mr I I Bolaji	General Surgery  Mr M Tilston
<b>2</b> <b>3 POSTS</b>	Paediatrics  Dr S Herber	General Practice  Dr S Topham	General Surgery/ Vascular Surgery  Mr H Souka
<b>3</b> <b>3 POSTS</b>	General Medicine/ Diabetes  Dr F Abourawi	General Practice  Dr R Crombie	Orthopaedics  Mr J A Roberts
<b>4</b> <b>3 POSTS</b>	General Medicine/ Cardiology  Dr M Walters	General Practice  Dr A Finch	Accident & Emergency  Mr A Shweikh
<b>5</b> <b>3 POSTS</b>	General Medicine/ Respiratory  Dr H O'Flynn/Dr D Jones	Psychiatry  Dr I Rehman	Ophthalmology  Mrs P Bagga

## GENERAL MEDICINE/DIABETES/ENDOCRINOLOGY

### THE WORK OF THE DEPARTMENT

Three Outpatient Clinics per week are carried out - one for Endocrinology and General Medicine and two for Diabetes. A full range of patients with Endocrinological problems are seen including thyroid disease, pituitary glands and adrenal problems. In diabetes, additional joint Clinics are held with a Consultant Paediatrician (Adolescent Diabetes Clinic); with a Consultant Vascular Surgeon (Diabetes Foot Clinic); and with a Consultant Gynaecologist (Ante-natal Diabetes Clinic). SHO's may attend these Clinics for training in these special problem areas. There are two Diabetes Nurses Specialists, one Dietitian and one Chiropodist attached to the Unit, we have recently established a purpose-built Diabetes Centre at the Hospital.

Training is now taking place for nursing staff to perform such tasks as blood taking and giving intravenous drugs such as antibiotics and steroids.

### DUTIES OF THE POST

There are good working relationships with Nursing & Professional and Technical staff.

There are occasional Medical Students seconded from the University of Sheffield and the postholder would be involved in the teaching of these students.

Research available according to personal initiative.

### TIMETABLE

	AM	PM
MONDAY	On-call	On-call
TUESDAY	Ward Round (Consultant)	Ward Work
WEDNESDAY	Endocrinology/General Medicine Clinic	Ward Work
THURSDAY	Diabetes Clinic	Ward Round (Consultant)
FRIDAY	Diabetes Clinic	Protected Teaching

## GENERAL PRACTICE

SHO's who have a GP component in their rotations will be attached to training practices. These are practices that have undergone the rigorous quality assurance programme by the Director of Postgraduate GP Education. As such they are used to providing training for GP registrars. During the course of the GP component you would be encouraged to develop a particular interest. With the help of your supervisor or one of the local GP course organisers (who can be contacted through you GP supervisor) you may write a specific educational programme for yourself which would allow you to gain experience in an area of practice that could not be covered successfully by simply attending General Practice. This would mean perhaps attending a specialty outpatient or community clinic. The possibilities are numerous.

However you will need to write a proposal, which includes the following headings:

- Why you wish to undertake this. You should be specific in your reasons
- Specific objectives. You should specify those objectives, which you think you will attain by doing this post; you should also include an argument, which will show you could not obtain these objectives during the course of your GP attachment.
- The methods by which you have obtained these objectives. You should clearly specify how your learning would progress.
- Assessment - you should show a strategy which enables you to be sure that you have obtained your learning objectives, this might be an audit, preparing a piece of work for presentation, collection of some feedback etc. You should provide as much detail as possible in this section.
- You should specify how much time per week you would need to spend on this. In general this should be of the order of one day out of the practice per week.
- Financially there is no specific budget for this process; therefore the extra training will need to be cost neutral, you undertake to have made this clear to anyone from whom you are seeking supervision.

During the 4 months the SHO will have experience of primary care and will be able to work towards the aims of the post:

**Educational aims for the GP Component Patients During the placement the doctor will:**

- gain an understanding of the person-centred approach, oriented to the individual
- work with patients in their own context and community
- gain an understanding of the impact of the patient as a person in the family
- gain an understanding of the physical, psychological, social and cultural dimensions of the problems presented
- gain understanding of the difference between disease and illness

**Illnesses During the placement the doctor will:**

- see illnesses at an early age and undifferentiated stage
- understand the different epidemiology and the prevalence and incidence of illness in the community.

**Processes During the placement the doctor will:**

- gain an understanding of the advantages of medical generalism in the community setting
- work in, and understand the roles of the primary care team in providing care to individual patients
- gain an understanding of the importance of effective communication between patient and doctor and the relationship built over time
- gain an understanding of effective communication between health care professional and the carers of patients
- gain an understanding of the role of primary care in promoting health in the community
- learn about decision making and risk management in the absence of support services (pathology, imaging, senior colleagues)
- understand the impact of working at the point of first contact to the health service with open access to patients
- gain an understanding of the impact and analysis of evidence based medicine and its application in the primary care setting
- understand the importance of continually developing personal knowledge

Specific timetables will be agreed early in the post with the educational supervisor. Protected study leave will be provided for your attendance at regionally organised foundation study days.

## ORTHOPAEDICS

### **THE WORK OF THE DEPARTMENT**

There are 5 Consultants, 2 Registrars, 1 Associate Specialist, 3 Staff Surgeons, a Senior, Senior House Officer and 4 Senior House Officers. The firms work closely together for on-call duties and admissions.

Each Consultant has a special interest service within the hospital, these include

Mr Roberts, lower limb joint replacement and revision  
Mr Bagga, knee surgery and lower limb joint replacement  
Mr Grant lower limb joint replacement and foot problems  
Mr Howell, knee surgery and hip joint replacement & revision  
Mr Eltayeb, Upper Limb

The department is equipped for most modern orthopaedic procedures. There is a daily trauma list. The post provides suitable training for all junior staff, including recognition for training of career orthopaedic registrars.

### **DUTIES OF THE POST**

Senior House Officer - Orthopaedic Department (the appointment is to the department rather than to an individual Consultant, but the successful candidate will be allocated an Educational Supervisor for the duration of his tenure).

### **ROTA**

The SHO's primary duties are to ward work with attendance in elective, training and emergency theatres.

1 : 5 emergency on-call and prospective cover.

As regard to Out Patient Clinic the SHO observes and is not hands on.

The appointee will be responsible for the admission procedure of orthopaedic patients and emergency admissions. He/She will be required to attend outpatient clinics and to assist in operating per duty roster.

There are no teaching duties.

Research is possible depending upon individual interest.