



## JOB DESCRIPTION

### POST

Foundation Year 1 doctor in **Infectious Diseases**

### LOCATION

Ward 20 (Infection Unit), Castle Hill Hospital, Cottingham, East Yorkshire.

### DURATION OF POST

4 months (as part of a 1 year rotational post)

### DEPARTMENTAL INFORMATION

The Department, which incorporates the Infection Unit on Ward 20 at Castle Hill, is the regional (tertiary) referral centre for Hull, East Yorkshire and North Lincolnshire. The unit has 27-beds incorporating 11 side rooms, 3 of which are dedicated negative pressure isolation rooms (for the management of patients suspected/known to have high risk respiratory spread pathogens such as chickenpox, multi-drug resistant TB, SARS, avian influenza and viral haemorrhagic fever) and 16 open-bay beds, which are used for non-communicable infections, isolation 'step-down' and general medical patients. The unit is very busy with complex patients and a high patient turn-over.

The unit provides an infection consultation service at both of the trusts main sites, but has particularly close working relationships with the Departments of Microbiology/Virology (Dr. Rolf Meigh is based at Castle Hill), Respiratory Medicine (TB and other respiratory infections), Gastroenterology (viral hepatitis), Genitourinary Medicine (HIV) and Public Health. The consultants in infectious diseases have a 'hands on' ethos and work closely together rotating monthly between ward, outpatient and inpatient referral/bacteraemia duties. An integrated Bacteraemia Service provides unsolicited advice on patients with bacteraemia on all wards at Castle Hill and most wards at Hull Royal Infirmary. There is an innovative and nationally recognised outreach service to the prisons and sheltered centres of Hull and East Yorkshire. There are also a number of evolving services including chronic fatigue, bone and joint infection and outpatient parenteral antibiotic therapy (there is a nurse specialist on the ward). The department provides considerable input to infection education at both undergraduate and postgraduate levels, and leads in antibiotic stewardship and infection prevention and control across the trust. The department is increasingly 'research active'.

## DUTIES OF THE POST

The Foundation Year 1 posts in Infection provide a unique opportunity to undergo basic training in the management of common infections requiring hospitalisation. A provisional programme (subject to change) is shown overleaf. The F1 doctors will be ward-based and will be responsible for the care of patients under the infectious disease consultants on the Infection Unit at Castle Hill, and any outlying patients that may occur at peak times of hospital activity. F1 doctors will be supervised by ST1 doctors in general medicine (2) and ST3 (or above) doctors in infectious diseases/medicine (3) or acute medicine (1). There is also a F2 doctor shared between our unit and GUM. The predominant inpatient infections managed are: complex skin and soft tissue, bone/joint (especially discitis), infections due to intravenous drug use, gastroenteritis, bacteraemia and associated infections such as endocarditis, HIV, TB, and travel related illness, although the overall breadth of infections is broad.

All doctors attend the weekly infectious diseases educational meeting (mandatory) and F1 doctors will be expected to present on one occasion (mandatory). Other weekly educational opportunities include an X-ray meeting, the medical grand round/CPD (mandatory), and a HIV MDT meeting (voluntary). For enthusiastic F1 doctors, there is ample opportunity for involvement in audit, writing case reports, etc. as all of the consultants are active in these areas. A table showing the required assessments and other activities during the post is shown below. For those with particular interests (e.g. in HIV or bone infections), we will endeavor to facilitate attendance at specialist clinics, depending on the availability of other staff to cover ward duties. We also try and facilitate a small amount of microbiology experience, again depending on availability of staff to cover ward duties.

F1 doctors will also work on ward 18, Castle Hill (predominantly respiratory, infection, elderly medicine, and miscellaneous medicine acute admissions) on a rotational basis; this rota is organized by Human Resources.

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## WORKING ARRANGEMENTS/JOB PLAN

### Timetable for Foundation Year 1 Posts in Infection

Day	Monday	Tuesday	Wednesday	Thursday	Friday
<b>Foundation Year 1</b>					
<b>Morning (9am – 12pm)</b>	Consultant ward round, ward 20, CHH (JHO to present $\geq 1$ case)	Ward work	Dept. of Microbiology (please contact Dr. Jacky Meigh before-hand) ONLY if ward has at least 1 ST1 doctor present and workload NOT excessive	8-15pm Weekly ID educational meeting (Seminar Room, X-ray, CHH; breakfast provided) followed by main weekly ID ward round at 9-15am (JHO to present $\geq 1$ case)	Ward work
<b>Lunchtime (12pm – 2pm)</b>	X-ray meeting (1pm, Seminar Room, X-ray, CHH on 2 <sup>nd</sup> – 5 <sup>th</sup> Mondays of month and Ward 2 Seminar Room on 1 <sup>st</sup> Monday; lunch provided)	1pm HIV MDT (optional)		JHO teaching at HRI (compulsory)	1pm Weekly medical grand round, alternates between CHH & HRI; lunch provided (see ERMEC website)
<b>Afternoon (2pm – 5pm)</b>	Ward work based on morning ward	Ward work	Ward work	Ward work	2pm CPD (venue as for grand round) 3-30pm Academic Medicine meeting or ward work

### EDUCATIONAL OBJECTIVES

- To build upon undergraduate education.
- To gain experience and familiarity in dealing with a wide variety of medical and infection conditions.
- To develop the skills of history taking, physical examination, appropriate investigation and rational prescribing.
- To master several basic medical techniques.
- To improve communication skills with patients, relatives and colleagues.
- To develop skills in managing time and conflicting priorities.

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### Outline of Assessments/Additional Activities for Foundation Year 1 Posts in Infection

Activity	When should it happen?	Supervisor
Induction	Beginning of month 1	Dr. Gavin Barlow (It is the F1s responsibility to organise these)
Mid-point review	End of month 2	
Final review and end of placement report	Month 4	
Direct observation of procedural skills (x2 per F1 during 4 months)	During ward work time	Any of the ID ST3+/post-MRCP STs or nurse specialists/ consultants depending on procedure
Mini-CEX (x2 per F1 during 4 months)	After main ward round on Thursday (please pre-arrange time with consultants well in advance)	Any of the ID consultants/ST3+ or post-MRCP STs
Case-based discussion (x2 per F1 during 4 months)	After main ward round on Thursday (please pre-arrange time with consultants/ST+s well in advance). One of the case should focus on an aspect of antibiotic prescribing	Any of the ID consultants/ST3+
Audit (optional)	-	Individual audit project leader (d/w Dr. Barlow on induction)
ID Educational meeting	Each of the F1s will be expected to present once during their 4 month attachment (see timetable on commencing and d/w Dr. Barlow for guidance)	Dr. Gavin Barlow
Self-Directed Learning about Appropriate Antibiotic Prescribing	Each of the F1s must complete the Appropriate Antimicrobial Prescribing for Tomorrows Doctors package	Dr. Gavin Barlow

**NB** It is the trainees (not the consultants) responsibility to organise the time and place of all required assessments. Although busy, the Infectious Diseases Team has plenty of staff, is very 'hands on' and provides ample opportunity for such assessments. There is therefore no excuse for not performing the required number of assessments during this post; this is your responsibility.

Each trainee will receive a departmental induction pack plus an infection self-learning pack – please note that completion of the latter by the time of final appraisal is mandatory.