

POST

Pre-Registration House Officer (Foundation Year 1) in

OBSTETRICS & GYNAECOLOGY

LOCATION

Northern Lincolnshire and Goole Hospitals NHS Trust was created on 1st 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.

DIANA, PRINCESS OF WALES HOSPITAL

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 £11.8 million Women and Children's Unit and £1 million dedicated Day Surgery Unit both completed in 2003. A new purpose built Endoscopy Unit and Cardiology Unit completed in 2005. The facilities also include:- MacMillan Chemotherapy Suite, MRI, CT, Isotope and Bone Densitometry Scanners.

DURATION OF POST

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

DEPARTMENTAL INFORMATION

Consultants: Mr W P Mueller, MB FRCOG with interest in Urogynaecology
Mr A Saha, MB FRCOG MD with interest in Oncology and Coloscopy
Mr I Bolaji, MB FRCOG FRCPI MD with interest in Infertility
Mr I P Stuart, MA MSC MRCOG with an interest in high risk Obstetrics
Mr Gimba, MSC, MRCOG with an interest in high risk Obstetrics and Ultrasound

Support Staff: 3 Staff Grade
3 Specialist Registrars
2 Senior SHOs
5 SHOs (Two of these will be vocational trainees)
1 Foundation Year 2 HO

The Department is part of the clinical division of Obstetrics, Gynaecology and Sexual Health. Sexual Health comprises of Genito-Urinary (GU) Medicine and Family Planning. The Trust is the lead provider for GU- Medicine for South Humber Health Authority including GU Medicine clinics in Scunthorpe and Grimsby and care of HIV out-patients on both locations and in-patients in Grimsby.

A new purpose built unit opened last year and is linked to the main building near the gynaecology ward and houses all maternity facilities, child and adolescent wards, the Neonatal Unit, on call and office accommodation. The new unit is based on the LDRP principle of maternity care, a new concept within which the distinction between antenatal, intrapartum and postpartum care and facilities will cease to exist. There are 16 beds in single and four bedded rooms, 19 LDRP-

rooms, a room with a birthing pool, disabled facility and a high dependency room. The latter are all fully equipped to accommodate the patient throughout her stay i.e. during Labour, Delivery, Recovery and Postpartum period. Integrated team midwifery has been developed in tandem with the new unit, which enables the distinction between community and hospital midwives to be largely removed. This will improve continuity of care and together with the new unit will contribute to a more community-based midwifery service and reduced length of the stay.

There is consultant anaesthetist cover during working hours and a 24-hour epidural service is in operation. Home confinements are well established in the area.

The Child Health department has a dedicated neonatologist (Dr Adiotomre) and the Neonatal Unit is equipped and staffed to deal with virtually all neonatal cases, although babies with congenital abnormalities are usually transferred to Sheffield. In utero transfer is rarely necessary and only undertaken when the Neonatal Unit is full or there are other specific reasons for transfer. Six Advanced Neonatal Nurse Practitioners are employed on the unit and provide a resuscitation service for Labour ward.

The gynaecology ward is currently being developed into a combined in- and outpatient area. There are 21 inpatient beds of which three are for breast patients, facilities for outpatient hysteroscopy and colposcopy, early pregnancy assessment, pregnancy advisory including the provision of medical terminations, fertility treatment and preoperative assessment. Preoperative assessment, medical terminations and early pregnancy assessment are nurse led. The inpatient area is separated from the outpatient facilities and in addition the department has the use of a variable number of day beds on the current day care ward.

In gynaecology, 4500 new patients were seen in 1998 and 2700 operative procedures were performed. The department has a day case rate in excess of 70%. Theatre is fully equipped for laparoscopic and hysteroscopic surgery and the department currently has the use of 10 theatre sessions (Eight Consultant and two Staff Grade/Registrar lists).

The department is working towards achieving accreditation for gynaecological cancer services.

Ultrasound scanning in Obstetrics and Gynaecology is generally performed by sonographers under the supervision of the Medical Physics Department. This department provides a comprehensive ultrasound service including a limited out of hours availability. The antenatal clinic is equipped with two modern scanners including facilities for Doppler and vaginal scans. An extra ultrasound scanner is available for use on Labour ward. A midwife is currently undertaking the Obstetric component of the ultrasonographer course.

The department provides obstetric and gynaecological care for Lincolnshire residents of the area around Louth and along the coast. This is partly done through Outreach Clinics in GP Surgeries (Gynaecological Clinics in Mablethorpe and Louth) and partly at Louth County Hospital (Gynae and antenatal clinics). Louth Hospital is part of the Lincoln and Louth Trust and a gynaecologist from Lincoln also undertakes clinics there. Obstetric care for Lincolnshire residents is fragmented in so far that many women deliver at Grimsby Hospital but antenatally and postnatally are cared for by midwives from Lincoln.

With the appointment of the fifth consultant, the department is able to fulfil the RCOG and CNST requirement of ten consultant labour ward sessions. Two consultants (Mr Stuart and Mr Gimba) have three labour ward sessions per week whereas the other three consultants will continue to have four sessions between them. Future service developments, increasing waiting list targets, cancer accreditation, continuing reduction in junior doctors hours etc may in the short to medium term require further consultant expansion.

Within the gynaecological department there are:-

- 10 gynaecological theatre lists per week
- 4 general gynaecological clinics per week
- 4 colposcopy clinics per week
- 1 to 2 fertility clinics per month
- 1-2 hysteroscopy clinics per week

Within the obstetric department there are 6 ante-natal clinics per week.

There is a Medical Advisory Committee of which all consultants are members. In addition, there is a well developed directorate system, and in respect of this speciality, it is the family services comprising of Obstetrics, Gynaecology, Sexual Health and Children's Services.

DUTIES OF THE POST

Obstetrics

- 1) Ante natal ward
- 2) Labour ward
- 3) Ante natal clinic
- 4) Post natal ward/obstetric theatre
- 5) Special Sessions (Assessment Unit Obstetric Ultrasound)

The post holder is responsible for the admission of patients to the ante natal ward, assistance at ante natal clinics, ward rounds, management of patients and the discharge of patients from post natal wards.

Gynaecology

- 1) Gynaecology theatre
- 2) Ward/emergency theatre/early pregnancy assessment clinic
- 3) Gynaecology clinic

The post holder is responsible for - Admission, examination and initiation of treatment under the supervision of the consultant and registrar, assisting in gynaecological clinics.

WORKING ARRANGEMENTS/JOB PLAN

	AM	LUNCH	PM
Monday	Delivery Suite		Gynae Clinic
Tuesday	Ward Work	F1 Teaching	Theatre
Wednesday	Gynae Clinic	Medicine Grand Rounds	Ward Work
Thursday	Antenatal Clinic/Ward Work	Surgery Grand Rounds	Antenatal Clinic/Ward Work
Friday	Theatre		Obs & Gynae Teaching Session

EDUCATIONAL OBJECTIVES

To build upon undergraduate education

To gain experience and familiarity in dealing with a wide variety of medical 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.

EDUCATIONAL SUPERVISOR – MR I I BOLAJI

Each Foundation Year 1 Trainee will have a nominated Educational Supervisor, with whom they should meet formally at the commencement of each 4-month rotation, again at 2 months and at the end of the post, using the F1 Training Portfolio as a basis for discussion.

INDUCTION

An induction programme is arranged for new starters at the beginning of August during which they have no other duties and attendance is mandatory. Departmental Inductions will take place at the beginning of each 4-month rotation.

GENERIC SKILLS TRAINING

All F1s are required to attend the Generic Skills Training Programme, which is run in conjunction with other Trusts in the North Yorkshire East Coast Foundation School. You may be required to travel to other hospitals for this training. There is also weekly F1 Teaching Session in Postgraduate Medical Education, which you are required to attend.

Associate Director of PGME and Clinical Tutor - Dr Joseph Adiotomre. T
Foundation Programme Director - Dr Asif Naqvi

ACCOMMODATION

The post is resident – single accommodation is available

ANNUAL LEAVE

Annual leave will be approved in the majority of cases however all leave is subject to the exigencies of the service and on occasion subject to locum availability

POSTGRADUATE MEDICAL EDUCATION – is committed to delivering high quality education and recognises that education is a life-long process and adopts the philosophy that the development of both service needs and education are closely interrelated in being able to deliver high quality health-care to the community. Osler House contains a 100 seat lecture theatre equipped with the latest Audio Visual Equipment including teleconferencing facilities. In addition there is a 30 seat Seminar Room that houses similar AV Equipment and teleconferencing facilities.

LIBRARY SERVICES - As well as traditional library services such as access to books, journals and inter-library loans; the library provides access to Internet services. 24-hour access to Databases such as Medline, The Cochrane Library, Electronic Journals, 123 Doc, MCQ and exam preparation websites is made available via the Internet. 24 hour Library access will also be available in 2006. All Doctors have access to training in the effective searching of healthcare databases, and this is now being offered both in the library and/or hospital departments upon request.

LEARNING RESOURCE CENTRE - is a dedicated Information Technology training centre and offers a full training curriculum from basic computer skills, use of the Internet and the application of basic principles in databases, spreadsheets, PowerPoint etc. through to highly specialised system training on hospital information systems.

HEALTH AND SAFETY

Under the Health & Safety at Work Act 1974 it is the responsibility of individual employees at every level to take care of their own health and safety at work and that of others who may be affected by their acts at work. This includes co-operating with management in complying with health and safety obligations, particularly by reporting promptly any defects, risks or potential hazards.

GENERAL INFORMATION

The main centres of population within Northern Lincolnshire and Goole are Grimsby, Scunthorpe, Goole, Brigg, Immingham and Cleethorpes.

Grimsby and Cleethorpes (covering 80% of the North East Lincolnshire Unitary Authority population) are situated at the mouth of the Humber Estuary. Scunthorpe is 30 miles to the West, within the North Lincolnshire Council area, with Goole a further 25 miles west within East Riding. Further a field; Hull is 30 miles to the North with Louth 15 miles to the South. The population within the area covered by the Trust is estimated at 358,000. There is an additional population of 85,000 within East and coastal Lincolnshire, which also looks to the Diana, Princess of Wales Hospital for a wide range of services.

NORTH EAST LINCOLNSHIRE - North East Lincolnshire is a small but diverse area on the east coast where the Humber estuary meets the North Sea. The adjoining towns of Grimsby and Cleethorpes form the largest centres of population, with the major container port of Immingham to the north. In contrast, rural communities such as Laceby, Waltham, Aylesby, Irby and Wold Newton extend into the attractive Lincolnshire Wolds. The area is well served by roads. It is less than three hours to London by rail and is only a few minutes drive to Humberside Airport, which has daily international flights, connecting to European International airports. The famous Humber Bridge enables you to reach the ferry port in Hull in less than an hour.

GRIMSBY - Grimsby, Europe's Food Town, offers you what no other town in the country can offer - a deep history, a great selection of shops, a most famous fishing heritage and much, much more. Grimsby lies on the South Bank of the Humber Estuary and is the 'capital' of North East Lincolnshire. Once famous for its fishing industry, Grimsby has carved a new identity in recent years and is currently poised for exciting developments as part of the local urban regeneration plans.

CLEETHORPES - All the ingredients you expect of a traditional seaside resort are still alive in Cleethorpes. Four miles of safe sandy beaches, a superb events and festivals programme and a host of quality attractions and friendly accommodation. The seaside town of Cleethorpes offers a multitude of attractions to suit many tastes. Nature lovers can stroll along the coastal path, watching the variety of wildlife that inhabits the shoreline - an area of natural beauty and one of Europe's most important estuarine wildlife havens. Cleethorpes seafront is a lively place to be, night or day. Visitors to Cleethorpes will find no shortage of places to eat and drink.

ALL APPLICANTS PLEASE NOTE -

All applicants are asked to check, before applying for a post, that they will be eligible for registration with the General Medical Council.

You can check for eligibility on the website <http://www/gmc-uk.org> If there is any uncertainty please contact the GMC and seek advice, If you cannot register with the GMC you cannot be employed as a Foundation Year 1 Trainee.