

**SPECIALTY TRAINING PROGRAMME IN GERIATRIC MEDICINE IN WESSEX
DEANERY**

This is a 5 year training programme in Geriatric Medicine at ST3 aimed at doctors who can demonstrate the essential competencies to enter this level of training. The programme is designed to support training for a CCT in Geriatric Medicine and General Internal Medicine.

Details of essential competences and qualifications are detailed in the MMC person specification for Geriatric Medicine at ST3 which is available from www.mmc.nhs.uk

Subject to satisfactory progression, the anticipated outcome on completion of this programme is a Certificate of Completion of Training in Geriatric Medicine.

The programme is based in hospitals in the Wessex Deanery including:

<u>HOSPITAL</u>	<u>LOCATION</u>
North Hampshire Hospital	Basingstoke
The Royal Bournemouth Hospital	Bournemouth
Dorset County Hospital	Dorchester
St Mary's Hospital	Isle of Wight
Poole Hospital	Poole
Queen Alexandra Hospital	Portsmouth
Salisbury District Hospital	Salisbury
Southampton General Hospital	Southampton
Royal Hampshire County Hospital	Winchester

Wessex Deanery is a relatively small deanery with a defined geographical area which does lead to there being a single unit of application. In the majority of cases successful candidates will be asked to preference their choice of location for either one or two years. Some specialties will require successful candidates to preference both commencing location and specialty. Future placements will be based, as normal, on individual training and educational needs. Please note that applications are to the Wessex Deanery as a whole. This may mean that you may be allocated to any geographic location within the Wessex Deanery depending on training needs.

The Wessex Deanery covers a geographical area from Basingstoke in North Hampshire to Dorchester in West Dorset and the Isle of Wight to the South; in addition some programmes rotate to Jersey and Chichester in West Sussex. This is a spread of approximately 65 miles North to South and 76 miles East to West. The Wessex Deanery serves a population of around 2.8 million people.

The Wessex Deanery is part of South Central Strategic Health Authority which covers Berkshire, Buckinghamshire, Oxfordshire in the north (under Oxford Deanery) and Hampshire and Isle of Wight. In addition, Wessex Deanery provides training programmes within Dorset and South Wiltshire under a formal agreement with the South West Strategic Health Authority. The Wessex Deanery is responsible for the training of some 2,500 trainees.

Rotation Information

The aim is to provide a flexible programme of training, which, over a period of up to five years, will give the competencies and experience needed to gain a Certificate of Completion of Training (CCT). Specialist Registrars will be trained in both Geriatric Medicine and General Acute Medicine Level 2. The Wessex rotation has a reputation for providing excellent training in all aspects of General and Elderly Medicine and a broad range of opportunities to suit individual needs. Subspecialty training is available at various locations in the Region in intermediate care, stroke medicine, orthogeriatrics, old age psychiatry, falls, syncope, Parkinson's disease, continence and palliative care. There is strong support for trainees undertaking research or for those who are interested in further developing management or educational roles, including study leading to higher qualifications.

Study and Training

The primary aim of all posts is the training programme developed and there is a region wide syllabus and minimum standards of education agreed by all Trusts within the rotation.

The Deanery is committed to developing postgraduate training programmes as laid down by GMC, Colleges and Faculties and by COPMED - the Postgraduate Deans Network. At local level college/specialty tutors work with the Programme Director and Directors of Medical Education in supervising these programmes. Trainees will be expected to take part in these programmes (including audit) and to attend meetings with their nominated educational supervisor.

All posts within the training programme are recognised for postgraduate training by the General Medical Council (GMC) in accordance with their standards for training.

Study leave is granted in accordance with Deanery/Trust policy and are subject to the maintenance of the service.

All posts have a service element and the following covers the majority of duties. There will be minor variations in different hospitals but the list is aimed at covering the majority of duties:

1. Supervise, monitor and assist the House Officer (F1) in the day-to-day management of in-patients in posts with an attached F1.
2. Liaise between nurses, F1 and F2 Doctors, patients, relatives and senior medical staff.
3. Attend and participate in ward rounds as timetabled
4. Attend outpatient clinics.
5. Take part in rostered emergency work.
6. Dictate discharge summaries.
7. Study for higher examination and maintain continued professional development.
8. Attend weekly educational and multidisciplinary sessions.
9. Undertake audit at various times throughout the rotations.
10. Teach medical students as directed.
11. Co-operate with members of the personnel department when monitoring hours of work and other personnel issues.
12. Attend induction in each hospital or new department
13. Comply with all local policies including dress code, annual and study leave

Trust Generic/Specialty Information

Supervision of Training

Training programmes for all medical specialities are supervised by the Wessex Postgraduate School. Reporting to this are Specialist Training Committees (STCs). Thus Geriatric Medicine programmes are supervised by the STC (Geriatric Medicine). The STC is responsible for:

- Ensuring the availability of training slots for the programme
- Supporting educational supervisors in the individual districts in performing assessment and appraisal
- Performing annual summative assessments of individual Specialist Registrar's progress and reporting these to the JRCPTB and Postgraduate Dean.
- Planning the placement of Specialist Registrars for the annual change on the first Wednesday of March

E-Portfolio

Each Specialist Registrar will register with the JRCPTB and will have an eportfolio once the national project is complete. Meanwhile trainees will keep a paper portfolio. This will allow them to maintain a training record which will be used at the annual summative assessment.

Organisation

The training programme is required to provide adequate training to reach the required competencies in Geriatric Medicine and General Acute Medicine level 2. In addition, within the final year there is a requirement for some low intensity general internal medicine. Although the region is geographically spread out, and we understand that travelling may be difficult for trainees at times, the rotations for individual trainees must depend on training requirements, rather than social convenience. Out of Programme Experience for suitable training will be encouraged but is not usually granted in the final year before CCT.

Trainees rotate in March each year. Although they spend only a year in each post they may spend longer in a given location and rotate between posts especially in some of the larger centres. This will depend on individual training needs. The available posts offer Acute Medicine experience and Geriatric Medicine experience. Individual allocation to specific posts will initially be decided at time of interview and for subsequent years the rotation is agreed in consultation with the StRs usually at training days and will be confirmed at the RITA assessment to allow some flexibility. Posts which offer pure Geriatrics Training are: Portsmouth and Southampton.

Responsibilities of Specialist Registrars

It is expected that candidates will demonstrate an active interest in issues concerning Geriatric Medicine and old people in general. During their training Specialist Registrars are expected to take advantage of all training opportunities and to take responsibility (with guidance from their educational supervisors) for organising some aspects of their training. They are required to enrol with the JRCPTB as soon as possible after taking the post and it is expected that they will have knowledge of the curriculum requirements as laid out by the JRCPTB and PMETB.

Isle of Wight Healthcare NHS Trust

Staff: Medical

17 Consultants (11 take part in acute medical on call, 3 are responsible for Stroke unit and General Rehab unit, 2 of these are Consultants in Care of the Elderly)

- 1 1 Associate specialist
- 2 10 Registrars
- 3 11 SHO
- 4 11 FY1

Admission Policy

Non-selective acute medical take.

1:10 rota

Training Programme

All trainees will gain experience in:

- Emergency medicine all ages
- Stroke care on dedicated stroke unit
- General rehabilitation
- Falls outpatients
- Elderly medicine outpatients

There are opportunities to gain experience in other areas depending on training needs, the following have been arranged for previous trainees:

- A period of work in the local Hospice with teaching and supervision from the Palliative Care consultant.
- Attendance at the Parkinson's Disease clinic with the Neurologist from SGH who visits weekly.
- Dedicated time on ITU.
- Orthogeriatrics

There is a degree of flexibility within the weekly timetable that can be adapted to accommodate the Trainee's needs.

Basingstoke Hospital (part of Hampshire Hospital NHS Foundation Trust since Jan 2012)

Staff

- 3 Consultant Physicians
- 2 Specialist Registrars (1 elderly Care trainee, 1 acute medicine)
- 5 SHOs
- 5 FY1s

Admission Policy

Integrated Internal Medicine and Elderly care admissions through the acute admissions unit. The post is accredited for training in general internal medicine.

Training

There are opportunities to gain experience in stroke, orthogeriatrics, falls, syncope, Parkinson's and rehabilitation as well as acute elderly care and general medicine. Dependant on training needs trainees can spend time with the palliative care team (in hospital or in the local hospice) or with the psycho-geriatrician team.

Poole Hospital NHS Trust

Staff

- 9 Consultants
- 1 Associate Specialist
- 3 Specialist Registrars
- 2 Staff Grade Physicians
- 1 Stroke Fellow
- 13 SHOs (F2s / ST1 / ST2)
- 3 F1s

FCEs

5,000 acute, 2,500 rehab, 500 ortho-geriatric per year

Admission Policy:

All admissions via A&E over 80 years and any patient deemed to require medicine for the elderly input by referring GP. The post is accredited for elderly care medicine and GIM.

Training

Experience in acute elderly care, rehabilitation, community hospitals, intermediate care and orthogeriatrics. Specialist services in Parkinson's Disease, Stroke and Falls. Opportunities for research and clinical audit, and, developing skills in management and education.

Portsmouth – Portsmouth Hospitals NHS Trust

Staff

- 18 Consultants (15 WTEs)
- 1 Associate Specialist (Community Geriatrics)
- 0.9 Specialty Doctor (Ortho-Geriatrics)
- 1 Specialty Doctor (Community Geriatrics)
- 9 Specialist Registrars (1 on the Renal Medicine rotation)
- 12 CMT/VTS doctors
- 5 FY2 doctors + 1 Trust Doctor (FY2 Level)
- 9 FY1 doctors

Admissions

Approximately 5,000 acute and 6,340 total annually

Admission Policy

All medical emergencies of all ages are admitted via the Medical Assessment Unit (MAU) and triaged to appropriate specialties. Those patients admitted from MAU to acute wards in Medicine for Older People, Rehabilitation and Stroke are aged over 65 years with multiple pathologies or all ages for patients with stroke. The post is accredited in elderly care medicine and general internal medicine.

Clinical Experience

All trainees will gain experience in:

- Acute elderly medicine
- Outpatient services including Falls, Parkinson's Disease and Rapid Access Clinics
- Emergency medicine (all ages)
- Community geriatrics and intermediate care

The 8 posts in Portsmouth rotate so that during each year trainees will also gain experience in at least two of the following:

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- Stroke medicine, including hyper acute stroke medicine
- Rehabilitation
- Orthogeriatrics, including Falls Clinics
- Continuing care
- Syncope
- Palliative care
- Psychiatry liaison

All trainees are supported and encouraged to participate in audit and research.

Royal Bournemouth & Christchurch Hospitals NHS Trust

There are:

- 4 Specialist registrar posts
- 11 Consultants (2.5 Stroke)
- 1 associate specialist
- 1 Stroke Fellow
- 20 junior doctors in F1 – ST2

Admissions Policy

Fully integrated general medicine and geriatric medicine giving experience in both specialties.

Training Programme

Training opportunities in acute geriatrics and internal medicine, outpatient services, general rehabilitation, ortho-geriatric rehabilitation, day hospital, community and intermediate care, clinical audit and various special interests including stroke, syncope and falls, Parkinson's disease and respiratory disease of old age. There is also a great deal of encouragement and direct support for research projects.

Salisbury Health Care NHS Trust

Staff

- 5 Consultants
- 3 specialist registrars (1 acute medicine registrar)
- 4 senior House officer equivalents covering the stroke unit, 22 elderly care beds and medical outliers.
- 3 Foundation Year 1 doctors

FCEs

Approximately 1,800 per year.

Admission Policy

Fully integrated through the Medical admissions Unit. Direct admissions to Farley Stroke Unit.

Training Offered

All aspects of Geriatric and General (Internal) Medicine, specialist experience in elderly care, rehabilitation, falls clinic, day hospital, stroke medicine including thrombolysis, Parkinsonism, neurological rehabilitation, community hospitals, psychogeriatric and orthogeriatric liaison. Opportunities for research and clinical audit are available. Attachment in palliative care is recommended.

University Hospital Southampton NHS Foundation Trust

Staff

- 15 Consultants 3 NHS/University)
- 1 Associate Specialist
- 9 Specialist Registrars
- 1 NIHR Clinical Lecturer
- 4 Academic Clinical Fellows
- 10 SHOs
- 5 PRHOs

FCEs

Approximately 4,500 patients annually

Admission policy:

Age related admission policy
Post accredited in Geriatric Medicine.

Experience Available

The post rotates between the different consultants giving a wide experience of Medicine for Older People in acute, rehabilitation and community settings., Sub-speciality areas include Orthogeriatrics and the Stroke Service that now embraces acute thrombolysis,

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acute care and rehabilitation. The acute admissions process offers a needs related service. The specialist registrars contribute to the general medical on call and provide cover to the HDU setting.

Clinical Experience

This is flexible, although all registrars work on the acute wards looking after acutely sick older people and as part of their on call work on the Acute Medical Unit.. Other experiences, such as working in Community Geriatrics, Orthogeriatrics or on the Stroke Unit, are available through the rotating posts, negotiation with the other Specialist Registrars or according to individual training needs. Two of the posts have a day a week working in Community Geriatrics including the assessment of acutely ill older people in their own homes with the community 'rapid response' team, giving a unique community based experience. Thus the exact timetable for an individual trainee will be worked out in discussion with the educational supervisor once the registrar is in post. All registrars are expected to participate in the monthly journal club, the audit programme, teaching the undergraduate students and to complete a management project during their time in Southampton.

Research

Academic Geriatric Medicine at the University of Southampton has a strong track record in interdisciplinary ageing research and a flourishing clinical academic training programme. This currently involves 1 NIHR Clinical Lecturer and 4 Academic Clinical Fellows as well as a number of Specialist Registrars carrying out research projects and higher degrees during full time clinical training. There is a particular research focus on sarcopenia, frailty and movement disorders but these areas are always evolving and enquiries for advice about research training and new projects are always welcome.

Dorset County Hospital NHS Foundation Trust

Staff

- 5 Consultants
- 3 Specialist Registrars
- 3F2
- 3F1

FCEs

Approximately 1,800 per year

Admission Policy

Acute elderly care patients, predominantly the over 80 year olds admitted via common take team to admissions unit. Consultant EC in-take and post-take ward rounds. Triage to EC beds. Acute and Rehab Stroke Units (all adults).

Acute beds at DCH

- 54 EC
- 6 acute stroke
- 12 stroke rehab
- 24 Admissions Unit
- 70 Medical specialities

Intermediate Care

- 130 rehab beds at 5 community hospitals
- Specialist registrars attached to 1 community hospital for 1 session per week
- Experience gained in intermediate care, community rehab and some palliative care

Training Programme

Experience in acute elderly care medicine and acute general medicine (on call), stroke rehabilitation, and TIA clinics, ortho-geriatric liaison, intermediate care both in community hospitals and community based rehabilitation teams, falls and syncope clinics, psychogeriatric liaison, and clinical governance.

Specialist Services

- Stroke-acute, rehab, TIA clinics, Young Stroke Clinic
- Parkinson's Disease-specialist clinics
- Falls-Syncope clinic, falls clinics
- Ortho-geriatrics-4- 6 month attachment 1 session/week under lead EC consultant

Timetables

Flexible to suit training needs

Royal Hampshire County Hospital, Winchester (part of Hampshire Hospital NHS Foundation Trust since Jan 2012)

Staff

- 7 Consultants (2 FT stroke physicians, 2 FT geriatricians, 1 orthogeriatrician, 3PT geriatricians and 1 associate specialist)
- 5 medical teams each consisting of 2 Specialist registrars, 2 SHOs and 3 F1s of which one team acute elderly care. Additional 4 F2s and 2 GPVTS for rehab and acute stroke.

Admission Policy

A fully integrated (unselected) admission policy between elderly care and general medicine with acute physician model during daytime weekdays and general physician at other times. Speciality triage where possible and downstream speciality wards. The post gives broad general medical experience in a moderately busy district general hospital and is accredited in general internal medicine.

Specialist services

Acute elderly care ward (27 beds)

Hyperacute stroke unit (24 beds) plus rapid assessment TIA and thrombolysis

Rehabilitation (27 beds RHCH, 22 beds Andover)

Rapid assessment service for frail older patients (Winchester and Andover)

Parkinsons and falls

Orthogeriatric

Training Programme

Training is provided in all aspects of acute general internal medicine. The main opportunities in the post are core acute geriatrics, acute stroke and acute general medicine. In addition, the trainee is involved in management of patients on a stroke rehabilitation ward. There are opportunities for them to receive additional training in other aspects of elderly care medicine (such as falls, Parkinson's disease, ethics etc) depending on specific needs. Time is given each week for study and research.

Teaching

Study

There is a well-established training programme for specialist registrars, the WESTEC programme. There are regular training days throughout the year. Specialist registrars are expected to attend these, and are also expected to contribute to the meetings at intervals.

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There are also local General Acute Medicine training days which specialist registrars are expected to attend. Within Wessex Institute there are various systems in place for Acute Medicine training days. Portsmouth have a rolling half day per month, trainees from the Isle of Wight are also invited; Dorset have 1 full day every other month at Dorchester Poole and Bournemouth, Southampton and Winchester have combined meetings held on 1 day on alternate months which at Southampton. Salisbury trainees are able to join any of these training days and are advised to contact the relevant person to ensure that they attend the minimum requirement of training days.

Teaching

All Specialist Registrars will be expected to participate in the teaching of junior doctors, undergraduates nursing and paramedical staff. Formal training in teaching methodology may be made available to those with a specific interest in medical education.

Research

There is an active research training programme as part of the WESTEC programme and research opportunities in many of the slots available, the subject of which depends on individual department's interests or the trainee's needs. All registrars are expected to pursue a research project or a period of additional study, subject to the training needs and requirements of individuals.

Main Conditions of Service

The posts are whole-time and the appointments are subject to:

1. The Terms and Conditions of Service (TCS) for Hospital Medical and Dental Staff (England and Wales)
2. Satisfactory registration with the General Medical Council
3. Medical Fitness – You may be required to undergo a medical examination and chest x-ray. Potential applicants should be aware of the Department of Health and GMC/GDC requirements with regards to HIV/AIDS and Hepatitis viruses. Candidates must be immune to Hepatitis B. You will be required to provide, in advance of appointment, evidence of immunity or have a local blood test (as deemed necessary by the Occupational Health Department)
4. Right to work in the UK
5. Criminal Records Check/POCA check carried out by the Trust Medical HR department.
6. Pre-employment checks carried out by the Trust Medical HR department.

Hours

The working hours for junior doctors in training are now 48-hours (or 52-hours if working on a derogated rota) averaged over 26 weeks (six months). Doctors in training also have

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an individual right to opt-out if they choose to do so, but they cannot opt-out of rest break or leave requirements. However, the contracts for doctors in training make clear that overall hours **must not exceed 56 hours in a week** (New Deal Contract requirements) across all their employments and any locum work they do.

<http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/EWTD/Pages/EWTD.aspx>

Pay

You should be paid monthly at the rates set out in the national terms and conditions of service for hospital medical and dental staff and doctors in public health medicine and the community health service (England and Wales), “the TCS”, as amended from time to time. The pay scales are reviewed annually. Current rates of pay may be viewed at <http://www.nhsemployers.org/PayAndContracts/Pay%20circulares/Pages/PayCircularsMedicalandDental.aspx>

Part-time posts will be paid pro-rata.

Pay supplement

Depending upon the working pattern and hours of duty you are contracted to undertake by the employer you should be paid a monthly additional pay supplement at the rates set out in paragraph 22 of the TCS. The current pay scales may be viewed at xx. The pay supplement is not reckonable for NHS pension purposes. The pay supplement will be determined by the employer and should be made clear in their offer of employment and subject to monitoring.

Pension

You will be entitled to join or continue as a member of the NHS Pension Scheme, subject to its terms and rules, which may be amended from time to time.

Annual leave

Your entitlement to annual leave will be five or six weeks per annum depending upon your previous service/incremental point, as set out in paragraphs 205 – 206 of the TCS.

The TCS may be viewed at

<http://www.nhsemployers.org/PayAndContracts/MedicalandDentalContracts/JuniorDoctorsDentistsGPRreg/Pages/DoctorsInTraining-JuniorDoctorsTermsAndConditions150908.aspx>

Sick pay

Entitlements are outlined in paragraphs 225-240 of the TCS.

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Notice

You will be required to give your employer and entitled to receive from them notice in accordance with paragraphs 195 – 196 of the TCS.

Study leave

The employer is expected to offer study leave in accordance with paragraphs 250 – 254 of the TCS. Local policy and procedure will be explained at your induction.

Travel expenses

The employer is expected to offer travel expenses in accordance with paragraphs 277 – 308 of the TCS for journeys incurred in performing your duties. Local policy and procedure will be explained at induction.

Subsistence expenses

The employer is expected to offer subsistence expenses in accordance with paragraph 311 of the TCS. Local policy and procedure will be explained at induction.

Relocation expenses

The employer will have a local policy for relocation expenses based on paragraphs 314 – 315 of the TCS and national guidance at <http://www.nhsemployers.org/PayAndContracts/MedicalandDentalContracts/JuniorDoctorsDentistsGPReg/Pages/DoctorsInTraining-JuniorDoctorsTermsAndConditions150908.aspx>

You are advised to check eligibility and confirm any entitlement with the employer *before* incurring any expenditure. In addition to local policy there is Deanery guidance which can be viewed on www.wessexdeanery.nhs.uk

Pre-employment checks

All NHS employers are required to undertake pre-employment checks. The employer will confirm their local arrangements expected to be in line with national guidance at <http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Pages/Employment-checks.aspx>

Professional registration

It will be a requirement of employment that you have professional registration with the GMC for the duration of your employment.

Health and safety

All employers have a duty to protect their workers from harm. You will be advised by the employer of local policies and procedures intended to protect your health and safety and to comply with these.

Disciplinary and grievance procedures

The employer will have local policies and procedures for dealing with any disciplinary concerns or grievances you may have. They will advise you how to access these, not later than eight weeks after commencement of employment.

Educational supervisor

The employer will confirm your supervisor on commencement.

General information

The Deanery's management of Specialty Training programmes, including issues such as taking time out of programme and dealing with concerns or complaints, is available at www.wessexdeanery.nhs.uk and in the national 'Gold guide' to Specialty Training at http://www.mmc.nhs.uk/specialty_training_2010/gold_guide.aspx