

Job Description from a FY1 Trainee's Point of View.

Welcome to Psychiatry!

I thought I'd give you a little handover with regards to the placement. Things may change a little bit for you but I thought I'd give you the low down on how the attachment has worked for me to give you a rough idea. It dates from a few months ago (late 2009) so some Consultants names may have changed.

Your clinical /educational supervisor (I don't know what stage you are at) is Mike Groves. He is very friendly and approachable. I'm sure he wouldn't mind me saying that you shouldn't be worried about contacting him with any problems (even if it's out of hours!). The F2 post is a combination of community work and inpatient work.

I have actually worked for 4 consultants in total.

- Dr Mike Groves - community
- Dr Roger Palmer – Woodhaven (your Woodhaven consultant will be Dr. Guy Powell)
- Dr Monica Alferez-Calvo - community
- Dr Tola Ade-Conde - community

The bases for the attachments are; -

- **Waterford House**

- This is in New Milton (142 Station Road)
- It is the base for the community mental health team and is your registered base.
- My clinics were based here
- Its where you can find three of your consultants
 - Mike Groves
 - Dr Tola Ade-Conde
 - Dr Monica Alferez-Calvo
- Dr. Ade-Conde and Dr. Alferez Calvo job share and are part time.
- Dr. Ade-Conde works Mon-Wed; Dr Alferez Thurs-Fri

- **Woodhaven Hospital – Winsor Ward**

- This is the main inpatient unit
- It is at Tatchbury Mount in Calmore
- The Consultant I have been working for here has been Dr. Roger Palmer.

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- However, you will now be working for Dr. Guy Powell as he now looks after the Waterford House inpatients
- There is a doctors office here with computers for you to use
 - Two of the computers have Equest and Edocs access – but no PACS – you have to wait for the X-ray reports to be sent to the unit
- Sycamore Lodge is the place where we have teaching and this is on the Tatchbury Mount site
- There are four other SHOs
- **Copper Beeches**
 - This is a rehab facility unit in New Milton
 - Here I have been covering Dr Ade-Conde's patients
 - It is covered by Waterford House
- **Fordingbridge**
 - Is part of the Waterford House team
 - It is where Mike is partly based and does some clinics

Below is a timetable to how **one former F2's week** has gone over the last 4 months.

Monday	Tuesday	Wednesday	Thursday	Friday
a.m. Copper Beeches; 9.30 – Dr Ade-Conde's Ward Round	a.m. Woodhaven; Dr. Powell's ward round	a.m. Waterford House; 9.30 – Team meeting	a.m. Waterford House; Outpatient clinic – supervised by Mike and Dr Alferez-Calvo	a.m. Winsor Ward
p.m. Woodhaven Winsor Ward Ward work	p.m. Sycamore Lodge Teaching	p.m. Waterford House Outpatient clinic – supervised by Dr Ade-Conde	p.m. Copper Beeches – any jobs? Waterford House Paperwork Winsor paperwork	p.m. Winsor Ward

Winsor Ward Round

Psychiatric ward rounds are run by the consultants (in my case at Woodhaven this was Dr. Palmer; in your case Dr. Powell). It's multi-disciplinary and we take about 30 minutes per patient. Your job is to write in the notes and of course contribute with any thing you know about the patient (mental state, blood results etc.). As always, document date, time and document everyone present. We tend to discuss the patient before they come in so label this first part as "nurse report" or similar. Then document when the patient comes in (and

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any family members who come with them). For every patient, do a small Mental State Examination under the main headings. Always ask about and document the Risks associated with the patient and then obviously the plan. Dr Powell is now going to be looking after the Waterford House patients from now on.

Ward Work

I covered Dr Palmer's patients. In particular, I was supposed to cover the Waterford House patients but I have tended to cover them all.

Ward work includes anything associated with your patients. Often our job is to deal with the physical side of the patient's health when on the unit. We are not really expected to make decisions about psychiatric medications and observations etc. Do always seek assistance from Dr. Powell if you need to. Discharge summaries in psychiatry can take a long time. The SHOs can show you a basic summary (plus I have put one in your folder on the G drive). Try to stay ahead of the game and start them before the patient goes home. Really the Waterford summaries are your responsibility but I have also been helping by doing other Dr. Palmer patients (so you might want to help out with the rest of Dr. Powell's if you know them). You can either type your summaries or dictate them. Save them as the patients name in Dr. Powell's folder (found in the G drive). Dictations and finished signed summaries go to Mike Gaston.

Copper Beeches

The ward round is with Dr. Ade-Conde and tends to start at 9.30am. Your role is the same as on the Winsor Ward round. Document in the notes as above. When you are there, do any odd jobs they require. Dr. Powell also looks after patients there but I have been only covering Dr. Ade-Conde's patients. However, I have been doing odd jobs that I deem appropriate for Dr. Powell's patients I used to go in or call Copper Beeches on a Friday to ask about any jobs that need doing e.g. prescriptions or discharge summaries. Probably now the most appropriate time for this for you is a Thursday afternoon.

Teaching

Tuesday afternoon is teaching. There is a free lunch normally supplied by a drug rep who does a brief presentation prior to it starting. Then there are two presentations; a case presentation and then journal club. Each SHO/team takes it in turns to present an interesting case and also present journal club. Mike or Sue Reid will be able to tell you

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when your sessions are. Also the SHOs take it in turns to take a 3rd Year Medical Student tutorial after that teaching. Again, you'll need to find out when yours is (Dr. Coggan Consultant can help you). We are responsible for teaching the students and at times you will have a Final Year Student attached to you. Also the 3rd Years are given times to shadow the SHOs so they will come and find you at times (again Sue Reid normally has a list of who and when but if in doubt, Dr. Coggan would know).

Junior Doctors meeting

Recently there has been a proposal for a junior doctors meeting to air any concerns/ ideas for the ward or on call. Plus this could be an opportunity to sort out the rota – day time duty and swaps for annual leave. Currently we have been thinking about a Tuesday afternoon for this.

Waterford House Meeting

This happens every Wednesday and starts at 9.30am. It's multi-disciplinary and there is an agenda they work by. In the first few weeks, you won't have much to contribute as you won't be seeing patients. However, they discuss Woodhaven in-patients so if you've seen the patients in ward round etc. then contribute. Also they discuss Copper Beeches so again, contribute when you can. When you start doing clinics, it's where you talk about new assessments, discharges and any referrals for CBT/DBT or urgent cases for discussion. Every so often the meeting is held at a GP Surgery up the road called Spencer House.....I've got this wrong every week! Check with Mike when the meetings are there!

Outpatient Clinics

You'll spend the first four weeks shadowing and watching clinics. After that, you'll see patients alone. Usual stuff, document date and time, problem and MSE. Dictate your letters and make a note of anything that needs chasing (e.g. asking for CBT at the meeting/ or new assessments for discussion at the meeting). There should ALWAYS be a consultant on site when you are doing a clinic....so if your supervising consultant is on leave then you cannot do clinic. You can ask your supervising consultant anything, and ask them about management before the patient leaves so you can feel more confident in your decision making.

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Duty Day

Duty Day on Winsor has tended to be Thursday for me because it's the day that I don't have anything on in the community. However, you now have a clinic on a Thursday morning so that's not going to be good for you. You and the other SHOs are going to have to sit down and organise the duty rota because the jobs are changing.

When you are day duty you are expected to be on site for Winsor Ward (but we don't cover Southfields/Bluebirds/Melbury on these days). At 9am you report to the nurse's station and ask if there are any doctor duty jobs. These can include bloods to be taken, ECGs to be performed, physical examinations, TTOs to write or dispense. It is also your responsibility on that day to see any admissions. If there are any jobs regarding psychiatric medications/ treatment/observations then we tend to leave those jobs to their own teams. So do let the SHO/consultant of the respective teams know on duty day if there are such jobs. Also if you are unsure whether the job is appropriate for you, then just ask the SHO....everyone is really friendly.

The psychiatric unit is different to a medical ward. There is no phlebotomy service. Bloods taken get put in the fridge and transported to SGH. Things like urine dipsticks and ECGs are performed by the doctors. All clinical material can be found in the clinic room.

You have to make sure duty days are covered when you go on leave by swapping with the other SHOs.

On Call

There are two types of on call.

- **Shift**

- This runs from 17pm-22pm.
- You are expected to be on the Tatchbury/Winsor site during this time. You cover Winsor Ward and the other units. Southfields is a medium secure unit for adults. Bluebirds is a medium secure unit for adolescents.
- You are contacted via your work mobile
- If there is no work and no expected admissions, then go to CRHT and see if there are any assessments/visits you can join them on.
- At 22pm, you finish. Make sure you ring the on call SHO (usually a Melbury SHO) to hand over (even if there is nothing to hand over).

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- **On call**

- This is 17pm-9am
- From 17pm-22pm you cover the Tatchbury site as above. At 17pm, if there is no work/expected admissions, go home. You can do your on call from home and come in if necessary. You again will be contacted if needed by your work mobile.
- From 22pm you cover Woodhaven and the Melbury Site. You receive a handover at 22pm from the other side.
- Melbury is at Winchester hospital. There is an adult in-patient unit – Kingsley; an older age unit – Stefano Olivero; a Mother and Baby Unit.
- Melbury uses an electronic prescribing system JAC – you will be given training and remote access for this (so you can prescribe from home).
- If you wish to prescribe from home for the Woodhaven unit, then you can fax prescriptions across.
- You are expected to go to work as usual the next day (we don't get any time off). However, if you've had a really bad night then you can negotiate with your consultant to leave a little early if appropriate

- **Weekends**

- This is Saturday or Sunday 9am-9am
- Its like being on call (see above)
- You cover both sites and can do it from home
- You only need to go in if you are called (but they tend to be very busy)
- Again, you are reachable by your work mobile
- At 9am, you should receive a handover from the person coming off and you should handover at 9am the next day.

I think that's all you need to know. I hope you have fun!