

## Trainee Job Description

<b>Job Title</b>	<b>CT2-3 in Rehabilitation Psychiatry</b>				
<b>Educational Supervisor</b>	<b>Dr Iain Mackenzie</b>				
<b>Hospital Address</b>	<b>Prospect Place (Low Secure Unit) Birch Hill Hospital, Rochdale</b>				
<b>Trust</b>	<b>Pennine Care NHS Foundation Trust</b>				
<b>Speciality</b>	<b>Psychiatry</b>	<b>Sub Speciality</b>		<b>Rehabilitation</b>	
<b>Year of Trainee (delete those n/a)</b>		<b>2</b>	<b>3</b>		

## Description of Placement

Prospect Place (formerly the Low Secure Unit or High Dependency Unit) is a 45 bed all male unit offering rehabilitation input. This is provided through optimisation of medication (particularly with Clozapine), intensive Occupational Therapy input with a view not only to minimise the symptoms of a service users mental disorder but improve independent living skills (for instance through budgeting and cooking skills) and to establish a meaningful repertoire of daily activities from college or adult learning to exercise and employment opportunities. This along with group and individual input into addressing often coexisting substance and alcohol misuse plays a significant role in reducing frequency and duration of future admissions with overall intentions to minimise 'revolving door patients' and assist this group often with treatment resistant schizophrenia/schizoaffective disorder to achieve their maximal degree of independence and staying well.

The unit is divided into three units, admissions which are approximately once monthly are typically admitted into the 'Engagement and Assessment Unit' before moving on with improvement to 'Recovery Unit' and then prior to discharge (or transfer to a less secure unit such as a Stepdown Unit) to the third 'Social Inclusion Unit'.

The Low Secure Unit moved from Tameside to a new purpose built development on the Birch Hill hospital site, Rochdale in June 2011 providing the above service to this set of service users.

## Roles and Responsibilities of the Trainee

-The trainee will ensure they receive a schedule for each service users monthly care team meeting (ward round) from Dr Iain Mackenzie's secretary at the beginning of the post.

They will attend Dr Simon Sandhu's twice monthly Wednesday CTMs for his 6 patients and Dr Rukyia Hassan's weekly Monday CTMs concerning the 14 patients under her care (3 to 4 each Monday). They will be expected to swap on calls, ECT etc with colleagues to avoid clashes wherever possible with this, the main clinical focus of their job. In exceptional circumstances where this is not possible they will be responsible for ensuring that Dr Sandhu & Dr Hassan are aware in advance and to then familiarise themselves with the outcomes of the CTMs and any associated actions.

They will also have opportunity but not be expected to attend the other rehabilitation consultants ward rounds (Dr Alnuamaani and Dr Mackenzie) where commitments allow if they so wish. Although Dr Alnuamaani/Dr Mackenzie share a staff grade doctor (Dr Ghufuran Ullah) the rehabilitation CT may be expected to provide general medical/psychiatric reviews to any Prospect Place patient in his absence.

-Shadowing Dr Sturman and Dr Sandhu at Hospital Managers meetings and MHRTs and later in the post completing psychiatric reports under supervision for presentation in Hospital Managers meetings.

-Completing admission and discharge summaries for newly admitted or discharged patients under the care of Dr Sturman and Dr Sandhu during the period of their attachment to the service.

**-It is acknowledged that the trainees timetable may be increasingly complex when nights on call and study leave etc occur and as such it is expected that the trainee will be responsible for ensuring that ward staff on each of the 3 units are made aware in advance on a weekly or monthly basis of the trainees availability times, contacts and cover arrangements.**

**Core Clinical Work** *include details of where this will be carried out, type of assessments and therapies for which the doctor in training will be responsible (all experience must be appropriate to the level of training provided)*

See also above.

-The trainee will be expected to provide day to day clinical input primarily into monitoring, assessment and investigation the of physical health of Dr Hassan and Dr Sandhu's 20 patients but at times for all 45 patients. This is now in conjunction with the regular weekly input of a local GP.

Appropriate supervision is provided by Dr Iain Mackenzie or where relevant or in his absence the other consultants Dr Alnuamaani, Dr Hassan and Dr Sandhu.

-The trainee will assess service user's mental states over the month in between CTMs so they may contribute more fully to MDT discussions.

-Regular attendance at referrals meetings (Heathfield House, Cale Green, Stockport, SK2 6RA) at 2pm on alternate Thursday afternoons. Rehabilitation assessments from acute wards within Pennine Care and Central Manchester Hospitals, Medium Secure Units such as Edenfield and the independent sector (Cheadle Royal and Kemple View Hospitals) or local prisons are allocated to a Medic & Nurse assessment team. Where appropriate these may be allocated to the trainee always to be jointly completed with an experienced member of the Clinical Pathway Team Nurse Specialists and a report compiled by the trainee prior to the subsequent referrals meeting where the trainee can present their assessment for discussion.

-Involvement in assessing service users when in seclusion jointly with members of nursing staff and with access to advice from the consultant psychiatrists above.

## On Call

### Please state frequency of on-call and nature of duties plus arrangements for clinical supervision

1:9 partial shift with split 3 and 4 day nights.

Ensure to swap on call periods with a colleague where these might otherwise clash with the main clinical commitments e.g. Dr. Sandhu & Dr Hassan's CTMs.

Clinical supervision for on call duties is provided by the relevant Consultant (or their cross cover) to the service user during daytime and by the rota consultant or Higher training doctor on call out of hours.

The CT2-3 covers the Birch Hill site and Rochdale patients presenting at Bury A&E (as there is no A&E at Rochdale or Birch Hill) To minimise service disruption the rehabilitation psychiatric trainee does not participate in covering the daytime part of the on call rota.

### Academic Activities *These should include case conferences/Journal Clubs/Lectures etc)*

There is a regular programme of Journal clubs, case conferences and interview skills training on Wednesday afternoons that the CT is expected to attend and participate in. Difficulties with attendance/absences etc and further details for timetable should be addressed in the first instance to the coordinator for this programme. The trainee will be responsible for ensuring their attendance meets requirements and that they familiarise themselves with their dates for presenting cases etc. There are also educational meetings on some Friday lunchtimes.

## Facilities

There is a junior doctor room with computer facilities located in the Laurence Burns unit where the secretaries, consultants and mental health act administrators are based. This is shared with staff Doctor Dr Ghufuran Ullah.

There is secretarial support through Dr Hassan's secretary (01617163795)-located in the Laurence Burns Unit though issues relating to Dr Sandhu or his patients should be addressed to him through his secretary Lynne Oversby at Heathfield House (01617164310).

## Supervision Arrangements

This is currently at Dr Mackenzie's office in the Laurence Burns Unit at 2pm on Mondays though this may be flexible to another time where necessary on the part of trainer or trainee.

## Teaching/Academic Experience

Academic experience is provided primarily through the teaching programme above and Dr Mackenzie and the other experienced substantive rehabilitation psychiatrists at the unit are keen to provide teaching on the ward and during CTMs as well as completing WPBA assessments with the trainee.

## Audit/Research Opportunities

There are a number of previous audits which provide opportunity to be re-audited, some new audit targets identified by CQC or the trainee may choose their own topic. The service is keen to assess its performance and provide support for any trainee wishing to be involved in this area as expected.

Additionally there are often opportunities through National audits to be involved in data collection.

We would aim to support you pursuing any research interests you may have - however this

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is a core clinical post & as such we would expect your focus to be on Prospect Place patients.

### Management Opportunities

Dr Sandhu is the lead consultant for the RHSD directorate and is involved in a wide variety of management activities as well as programme director for Higher Training. Dependant on the training needs and interests of the trainee there may be opportunity to be involved in some of these activities if he is approached by the trainee. The trainee is expected to attend Prospect Place Development Group (PPDG) meetings on Fridays which offers some exposure to management issues.

### Other/Additional Experience

- There is opportunity to gain extensive experience in the use of and augmentation of Clozapine.
- Opportunity to attend Hospital Managers and MHRTs and compile reports and present these at least at the former meetings.
- Involvement/experience in other specialist assessments including HCR-20, RSVP, BPRS etc.

### Description of Special Interest Opportunities

- The trainees need to attend eg psychotherapy training/MSc is adequately addressed through relatively flexible commitments other than Mondays and Wednesdays and on Thursday afternoons.
- There are ample opportunities for the trainee to be involved in Occupational Therapy groups and assessments and possibly with the Units psychologist and Dual Diagnosis workers.

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
*9-10:00 MDT Clinical Handover, Birch Hill- <i>(Trainee may be required to do Clozapine bloods)</i> 10-1.00 Weekly CTM(ward round) Prospect Place LSU, Tameside with Dr Hassan <b>Trainee is expected to alter ECT/oncalls etc to avoid clashes</b>	9-10:00 MDT Clinical Handover, Birch Hill  10-2.00 CTM LSU, Birch Hill May be opportunity to attend other rehab consultant ward rounds with Dr Alnuamaani if agreed.  psychotherapy training flexibly	9-10:00 MDT Clinical Handover, Birch Hill *10.00-4.30 CTM LSU, Birch Hill (2 of 4 weeks)- Trainee covers Dr Sandhu's 6 patients too and is expected to attend & prepare for these twice monthly ward rounds with Dr Sandhu.	9-10:00 MDT Clinical Handover, Tameside  (Possibly for MRCPsych course dependant on trainees needs or Birch Hill daytime on-call etc)	9-10:00 MDT Clinical Handover, Birch Hill  10-11:00 PPDG, Birch Hill  12-13:00 Educational meetings, Birch Hill (check educational timetable not every week)

<p>*2.-3.00 Supervision with Dr Mackenzie 3-4.00 Weekly CTM ctd (ward round) Prospect Place LSU, Birch Hill with Dr Hassan Ward work from CTMs</p>	<p>Ward work Rehab assessments/reports with supervisor (or other RHSD team members) Discharge summaries etc Report writing under supervision and Hospital Managers attendances.</p>	<p>1-330 Trainees educational meetings/Case conference/Journal Club/Interview skills training Birch Hill</p>	<p>*2pm-4.30pm Directorate referrals meeting (alt. weeks) at Heathfield House, Cale Green, Stockport SK2 6RA - <b><i>Trainee expected to attend these meetings for allocation &amp; presentation of rehab. assessments</i></b></p>	<p>Ward work Rehab assessments with supervisor (or other RHSD team members)  Report writing under supervision and Hospital Managers attendances etc</p>
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