Dartford and Gravesham NHS Trust

NHS South East Coast

Postgraduate Deanery for Kent, Surrey and Sussex
University of London

Dartford and Gravesham NHS Trust
Darent Valley Hospital

INDUCTION HANDBOOK TO THE MEDICAL FACULTY GROUP



November 2020

MEDICAL FACULTY HANDBOOK
A GUIDE FOR POSTGRADUATE DOCTORS AND STAFF IN
DARTFORD AND GRAVESHAM NHS TRUST

Introduction

Welcome to The Philip Farrant Education Centre, Darent Valley Hospital. This Faculty Handbook is written for you as a Postgraduate Doctor and all who will be working with you during your time here at Darent Valley Hospital. Its purpose is to give you information about how your training programme works, and who the key people are who will be working with you. This Handbook contains generic information, but is specifically written to support those of you who are on the Medical Specialty Training programme. It should be read in conjunction with your curriculum found on the Joint Royal Colleges of Physicians Training Board (JRCPTB) website: www.jrcptb.org.uk

This Handbook is updated annually based on feedback from the Medicine Local Faculty Group, from you as a Postgraduate Doctor in training and from your Supervisors.

Location

During your time with us you will be based at Darent Valley Hospital, Dartford and Gravesham NHS Trust. The Postgraduate Centre is at The Philip Farrant Education Centre, Darent Valley Hospital.

Brief Profile of the Medical Department

The department of adult medicine at Darent Valley Hospital includes several subspecialties, most of which include both in- and out-patient commitments. These specialist services include:

- Cardiology- with a local 'Heart Centre' offering re-vascularization and device therapy including re-synchronisation therapy. Primary PCI arrangements are available onsite and at Ashford. This specialty also has major links with St Thomas's and Kings College Hospital London.

- Respiratory - offers a comprehensive TB service and resources include negative pressure rooms and lung physiology. There is an active interest in interventional pulmonology with pleural ultrasound, bronchoscopy and an established 'Medical Video assisted Thoracoscopy' as well as having the first Endobronchial ultrasound (EBUS) service in Kent. Insertion of Tunnelled indwelling pleural catheters are also now been offered

- Gastroenterology- offering conventional endoscopy services in addition to capsule endoscopy, ERCP and MRCP and an interventional stenting service. It also has major links with St Thomas's Hospital London.

- Diabetes/Endocrinology- with a very active diabetes service and an evolving metabolic bone disease service.

- Haematology- which is heavily involved in haemato-oncological research and has major links with the haematology unit at Kings Hospital.

- Elderly medicine- including stroke medicine with an acute thrombolysis service, a movement disorder service including Parkinson's disease, and Ortho-Geriatric services including medical trauma liaison. The department has been selected to become one of the Hyperacute Stroke Units sites.

- Renal Medicine - has inpatients as well as an onsite renal dialysis and major links to Kings College Hospital.

- Outpatient only specialties include rheumatology, with close links to the ortho-geriatric service offering an integrated 'Falls and Osteoporosis' service and neurology with a weekly liaison round

reviewing selected inpatients.

Key people

There are several key people who will support you during your time with us.

The Medical Director is Dr Stephen Fenlon
The Director of Clinical Education is Dr Ali Bokhari (ali.bokhari1@nhs.net)
The College Tutor is Dr Burhan Khan (burhan.khan@nhs.net)
The Foundation Programme Lead for Year 1 is Dr Mathias Toth (mathias.toth@nhs.net)
The Foundation Programme Lead for Year 2 is Dr Shahinul Khan (shahinul.khan@nhs.net)
The Medical Education Manager is Mrs Helen Addison (Haddison@nhs.net)

A list of Educational and Clinical Supervisors is given in Appendix A.

Local Programme Administrative Arrangements

The administrative arrangements for the local management of your programme are managed by the Medical Education Manager (MEM) and Faculty Administrator in conjunction with your Programme Lead. The national arrangements for the management of your programme are contained in your e-portfolio.
If you experience any local administration issues your first point of contact is the Postgraduate Centre.

The Local Education Board

There is a Local Education Board (LEB) in each Trust whose responsibility it is to ensure that postgraduate medical trainees receive education and training that meets local, national and professional standards. The LEB undertakes the quality control of postgraduate medical training programmes. It receives Annual Audit and Review Reports from LFGs.

The Medical Local Faculty Group (LFG)

The Medical Local Faculty Group's remit is threefold: to ensure that the local medical programme is fit for purpose and in line with the curriculum requirements, to quality control the local medical programme and to ensure that trainee progression is tracked, supported and audited. The Local Medical Faculty meets at least three times a year and its work is quality controlled by the HEKSS Standards for the Local Faculty Graduate. The Faculty Group is responsible for ensuring that the Medical Programme is such that it will enable you to meet specific competences required in any given year by your Medical Curriculum.

The Medical Curriculum

The curriculum for your medical specialty can be found at www.jrcptb.org.uk. The Local Medical Faculty is responsible for ensuring that the medical programme is such that it will enable you to meet specific competences required in any given year by your curriculum. It is important that you read the curriculum so that you are aware of what is required of you and the competencies that are required, in order for you to complete your training satisfactorily. It is the acquisition of these competencies that will be assessed during the year using a selection of the various Assessment Tools.

The aims and objectives of the Medical Curricula

The aims and objectives of the different medical specialty curricula can be found on the Joint Royal Colleges of Physicians Training Board (JRCPTB) website at www.jrcptb.org.uk. In summary, the objectives are to:

- Provide experience and knowledge of acute medical emergencies
- Provide basic knowledge across a spectrum of medical specialties common to the needs of a general physician
- Provide a solid platform of knowledge, competencies and experience sufficient to allow progression to enter specialty training in medicine

How you complete the Medical Curriculum

This medical curriculum is competency based and leads to the satisfactory completion of competencies.
You will be supported during your time at Dartford and Gravesham NHS Trust by your Programme Lead, an allocated Educational Supervisor and Clinical Supervisors, all of whom will give you regular feedback about your progress. You should never be in any doubt about your progress and what you can do to improve this.

The medical programme structure
This Faculty Handbook, however, gives you details of how the national curriculum for medicine is organised here at Dartford and Gravesham NHS Trust. It gives you details of your local programme, which has been devised to meet the requirements of the medical curriculum.

Training opportunities include: ward-based, half day local teaching, regional study days, clinical audit and exposure to academic opportunities. The programme is structured to comply with the Generic standards for training of the Postgraduate Medical and Education Training Board (PMETB) and the Gold Guide (Gold Guide).

You must make an appointment with your Educational Supervisor at the start of your appointment to create your Learning Agreement that should cover the learning opportunities for the whole year and to decide which examinations you expect to pass during the year. You will also state the type and frequency of Work Based Assessments that you will organise in each post. You will be expected to undertake one or more Clinical Audits or Quality Improvement Projects (QIP) and submit some research or clinical work for a national or international meeting for potential publication. You will have annual local and HEKSS based Annual Review of Competence Progression (ARCP).

Induction/Handover/Taking consent
You will be inducted to the Trust, your Specialty Programme and your Specialty Department (http://www.dvh.nhs.uk).

The policy for handover to ensure patient care includes daily handover meetings where the outgoing team discusses unstable patients with the incoming team during the 'hospital handover at night' (HH@N) handover meeting. In addition, all critically ill patients in the medical department are handed over in a SBAR format and the SITE team keeps a record. There is also an electronic weekend handover system in which all patients that need reviewing over the weekend are registered. These eHandover patients are then reviewed in the weekend morning meeting. All out of hour bleeps from the wards are first addressed to the Bleep 111 holder who then directs appropriate ones to the ward cover doctors.

The policy for taking consent is based on the current GMC guidelines: 'It expands on the guidance in Good Medical Practice, which requires doctors to be satisfied that they have consent from a patient, or other valid authority, before undertaking any examination or investigation, providing treatment, or involving patients in teaching and research. This guidance sets out the principles on which good clinical decisions should be based. It provides a framework for good practice that covers the various situations that doctors may face in the course of their work. The guidance concentrates on decision-making in the context of investigations or treatment; but the principles apply more widely, including decisions on taking part in research, and decisions at the end of life.'

Study and Annual Leave
Study leave is managed by the Medical Education Department, although any requests must be discussed and authorised by the Educational Supervisor and the rota manager.

Study Leave should:

(i) enhance clinical, education and training
(ii) be planned as far in advance as possible, as an integral part of the education and training process
(iii) provide education and training not easily acquired in the clinical setting or locally, e.g.

acquisition of a theoretical knowledge base such as basic sciences, statistics, etc.

(iv) Support Delivery of Curriculum Targets.

Study leave entitlement is 30 days per year. Annual leave is 32 days per year increasing with seniority. Application forms for Study Leave are held within the Postgraduate Centre and all annual leave should be discussed with the Adult Medicine Rota Coordinator, Emma Jeeves (01322 428184). For study leave and annual leave request forms, please the Trust Intranet - http://www.dvh.nhs.uk/adagio/

Examinations

Details of the examinations can be found at www.jrcptb.org.uk and the respective Royal College or Society websites. A study leave application form must be submitted to the Medical Education Department. Although leave for examinations is to be taken as part of a study leave application, the actual day of the examination will not be deducted from the study leave entitlement.

Your Educational Supervisor – roles and responsibilities

Your Educational Supervisor is responsible for overseeing your training and making sure that you are making the necessary clinical and educational progress. You should have regular feedback from your Educational Supervisor.

Educational Supervisors

- Responsible for the supervision of trainees' progress
- Responsible for ensuring that trainees are making necessary clinical and educational progress
- Educational Supervisors should have the training and ability to undertake appraisals, work with portfolios and provide career advice, plus managing the trainee in difficulty.
- Meet the trainee at least twice during the job and arrange work based assessments.
- Clinical Supervisors are responsible for day to day supervision of the trainee in the workplace, teaching on the job, regular feedback and rapid response to issues as they arise.

Your Clinical Supervisor – roles and responsibilities

Your Clinical Supervisor is responsible for your progress within each placement and for your day-to-day clinical progress. You should have regular feedback from your Clinical Supervisor. The process by which information about your progress is collated by your Educational Supervisor from your Clinical Supervisor is through appraisal, assessment and annual planning.

Your role as a learner

You are responsible for your own learning within the programme with the support of key people as above. You should ensure that you have regular meetings with your supervisors, that you maintain your portfolio, keep up to date with assessments as required and be signed off for each ARCP exercise.

Your Year Group Representative

This is a key part of the feedback process, where is a member of your cohort will undertake to consult with the whole cohort (either face-to-face or by e-mail) to gather feedback about the local programme and to give this feedback at the meetings of the Local Medical Faculty Group. The feedback loop must be closed as relevant information/responses from the LFG need to go back to the cohort. This is the responsibility of the Year Group Representative.

How you will learn in this programme

In this programme a variety of learning approaches are adopted. These include web-based, CDs, ward-based clinical teaching, exposure to outpatients at the appropriate identified level, group learning, private study, courses, reflective practice, audit projects, clinical meetings, journal clubs, grand rounds, regular teaching specific to year and Specialty, but also multi-Specialty if appropriate.

Feedback

This is a crucial aspect of your programme. You can expect to receive detailed feedback on your progress from your Educational Supervisor and from your Clinical Supervisor. This will happen during on going

review meetings with your Educational Supervisor. You should have a clear idea of your progress in the programme at any given time and what you have to do to move to the next stage.

Annual Appraisal
The three integrated components of the training process (appraisal, assessment and annual planning) contribute to the Annual Review of Competence Progression (ARCP) that are managed by the HEKSS Deanery and occur towards the end of the year.

Training Portfolio
This is a key aspect of your learning in the programme. It is your responsibility to maintain an e- portfolio. This is an essential mandatory requirement as it provides an audit of your progress and learning. Further information on how to manage and complete the specialty e-portfolio can be found at http://www.jrcptb.org.uk/assessment/Pages/e-portfolio.aspx.

Assessments
This programme is competency based. The assessment tools are explained on the JRCPTB website: http://www.jrcptb.org.uk/assessment/Pages/default.aspx . It is your responsibility to undertake the assessments in accordance to the curriculum. All of your assessments must be recorded in your e-portfolio.

Meetings relating to assessment
The School of Medicine will contact all trainees to arrange the Annual Review of Competency Progression (ARCP). A satisfactory outcome will lead to progression to the next year of training or the end of a fixed term training post.

The Appeals Process
In the event that you fail to gain certification you can appeal to the Medical Faculty Group in accordance with the guidelines set out by HEKSS.

If you require help
The Darent Valley Hospital's Education Centre operates an 'Open Door' approach and here you can find information about local Trust policies, e.g. Grievance, Bullying and Harassment and Equal Opportunities. In addition, these policies can be found on the Trust's intranet site Accessing Dartford and Gravesham Information Online (ADAGIO).

Career support
Information about the HEKSS Career Service can be accessed on their website. In addition to your supervisors, there is a designated Career Lead, Dr Suresh Kumar, who is available to provide career guidance and support. Appointments can be arranged through the Education Centre.

Using educational resources
The library, situated in the Philip Farrant Education Centre, Darent Valley Hospital, offers a wide range of services for doctors. As well as loaning books to you we can show you how to access electronic resources including full text journals, e-books and a range of healthcare databases**.** Simon Millgate, Head of Library Services, and his team can help you with your literature searches or can do them for you. There are PCs in the library with Internet access for use by library members. The opening times are Monday-Thursday 08:30 – 1700hrs and Friday 08:30 – 16:30hrs, but out of hours access is available.

GMC Ethical Guidelines
The GMC has published "Good Medical Practice" which sets out the principles and values on which good practice is founded; these principles together describe medical professionalism in action. The guidance is addressed to doctors, but it is also intended to let the public know what they can expect from doctors. More information is available from the GMC at http://www.gmcuk.org/guidance/good_medical_practice/index.asp

Less than Full Time Training
Details can be obtained from the Education Centre or HEKSS

Exception Reporting Process

The purpose of exception reports is to ensure prompt resolution and or remedial action to ensure that safe working hours are maintained. Exception reports are used by doctors when day-to-day work varies significantly and/or regularly from the agreed work schedule. Exception reports could relate to:

- variation in the hours of work and / or rest; or
- the pattern of work; or
- missed educational or learning opportunities; or
- a lack of support available to the doctor.

How to exception report?

Exception reports will be registered directly by the doctor via DRS4 and will include:

- Your name, specialty and grade
- The identity of the Educational Supervisor
- The dates, times and durations of exceptions
- The nature of the variation from the work schedule or rota and,
- An outline of the steps, if any, you have taken to resolve the issue prior to submitting the report.

Managing exception reports via DRS4:

- Create and submit new exceptions related to hours/rest & education issues
- View the status of previously submitted exceptions
- View any comments added by supervisors and others
- Add comments to existing exceptions
- Add agreement to outcome of exceptions

Where do they go?

Exception reports where day-to-day work varies from your agreed work schedule, must be submitted electronically to your Clinical Supervisor (CS), and Guardian of Safe Working.

You will copy the exception report to the Director of Clinical Education in relation to training issues.

What happens to them once they are sent / received?

The Clinical Supervisor receiving the exception report will review the content and then discuss it with you to agree what action is necessary to address the issue. He/she will set out the agreed outcome of the exception report, including any agreed actions, in an electronic response to you (copied to either the Director of Clinical Education or Guardian of Safe Working, depending on whether the issue is educational or safety related, or both).

Process to Raise Concerns – Internal Guidance

Following GMC Guidance all doctors have a duty to raise concerns where they believe that patient safety or care is being compromised. Undermining and bullying is also taken very seriously therefore, trainees are encouraged to raise any encounters which they feel have not been satisfactory. There are 3 escalation routes to raise your concerns:

1st route – This is the normal route and we encourage you to use it unless it is, in your judgement, not safe or unlikely to get a fair hearing. You should escalate in the following order if you feel your concern has not been addressed; Clinical supervisor, Educational Supervisor, College Tutor, Clinical Education department.

2nd Route – If you feel you cannot use route 1 for any reason, or you feel the concern needs immediate action, due to the severity you can raise it to Clinical Education haddison@nhs.net/Ali.bokhari1@nhs.net or Medical Director stephenfenlon@nhs.net

3rd Route – If you wish to raise you concern completely anonymously you can raise it to the Trust Speak Up Guardian.

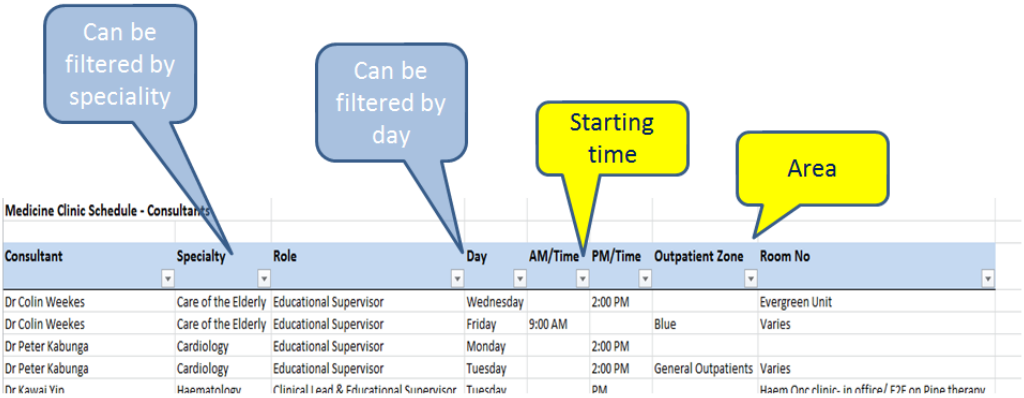
Whatever route you choose, we recommend you complete a Datix Report as well. Further details on the Trust's Bullying and Harassment Policy can be found on ADAGIO.

Winscribe Details

USER ID	First Name	Last Name	Password/reset/New
5671	REG 1	Elderly Care	in use already
1238	REG 2	Elderly Care	in use already
9180	REG 3	Elderly Care	1235
1235	SHO 1	Elderly Care	in use already
1239	SHO 2	Elderly Care	in use already
9203	REG 1	Stroke	1235
9197	REG 2	Stroke	1235
9192	REG 3	Stroke	1235
9187	SHO 1	Stroke	1235
9189	SHO 2	Stroke	1235
5109	REG 1	Cardiology	in use already
9181	REG 2	Cardiology	1232
9202	REG 3	Cardiology	1232
9193	SHO 1	Cardiology	1232
9201	SHO 2	Cardiology	1232
1055	REG 1	Respiratory	1236
9182	REG 2	Respiratory	1236
9198	REG 3	Respiratory	1236
9209	SHO 1	Respiratory	1236
9207	SHO 2	Respiratory	1236
1243	REG 1	Diabetes and Endocrine	in use already
1194	REG2	Diabetes and Endocrine	in use already
9206	REG 3	Diabetes and Endocrine	1231
1129	SHO 1	Diabetes and Endocrine	in use already
9212	SHO 2	Diabetes and Endocrine	1231
1501	REG 1	Gastroenterology	in use already
1502	REG 2	Gastroenterology	in use already
9211	REG 3	Gastroenterology	1234
1503	SHO 1	Gastroenterology	in use already
1273	SHO 2	Gastroenterology	1234
9185	REG 1	Renal	1238
9191	REG 2	Renal	1238
9205	REG 3	Renal	1238
9210	SHO 1	Renal	1238
9195	SHO 2	Renal	1238
9186	REG 1	Acute Medicine	1211
9196	REG 2	Acute Medicine	1211
9200	REG 3	Acute Medicine	1211
9208	SHO 1	Acute Medicine	1211
9188	SHO 2	Acute Medicine	1211
9184	REG 1	Neurology	1471
9190	REG 2	Neurology	1471
9204	REG 3	Neurology	1471
9194	SHO 1	Neurology	1471
9183	SHO 2	Neurology	1471

Attending Outpatient Clinics

Clinic Spreadsheet



IMT Clinics

1 Trainees

Aim: one (01) full day /month i.e. 2 clinics (am & pm)/month

IMT1	**≥20/yr**
IMT2	**≥20/yr**
IMT3	**≥40/yr**
Total	**≥80**

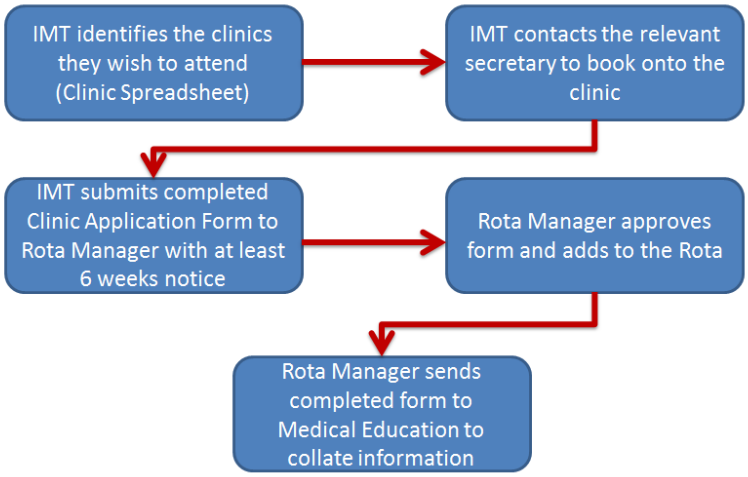
2 Rota

'Clinic Day' included into Master rota
Not counted in minimal staffing levels

3 Specialities

Named secretary per speciality
Confirm Consultant clinic
Facilitate room availability
WPBA i.e. CBDs etc

IMT Clinic Booking Process



Trainees should pre-book 1 day to attend clinic a month, to ensure the mandatory ARCP requirement is met. Trainees can continue to attend clinics adhoc if the wards allow, to gain further exposure.

Consultants

Respiratory Medicine

Dr Burhan Khan	Clinical Lead & Educational Supervisor
Dr Hamid Aminy-Raouf	Educational Supervisor
Dr Majid Mushtaq	Educational Supervisor
Dr Rekha Bhalla	Educational Supervisor
Dr Sudhir Lohani	Educational Supervisor

Gastroenterology

Dr Chirag Kothari	Clinical Lead & Educational Supervisor
Dr Ben Warner	Educational Supervisor
Dr Guy Sisson	Educational Supervisor
Dr Philip Mairs	Educational Supervisor
Dr Siddharth Birdi	Educational Supervisor

Care of the Elderly

Dr Rupinder Gill	Clinical Lead & Educational Supervisor
Dr Colin Weekes	Educational Supervisor
Dr Imran Ashraf	Educational Supervisor
Dr Mathias Toth	FY1 Lead & Educational Supervisor
Dr Praphul Shukla	Educational Supervisor
Dr Prasanna Aghoram	Educational Supervisor

Diabetes and Endocrine

Dr Arthur Ogunko	Clinical Lead & Educational Supervisor
Dr Cynthia Mohandas	Educational Supervisor

Cardiology

Dr Winston Martin	Clinical Lead & Educational Supervisor
Dr Peter Kabunga	Educational Supervisor
Dr Saqib Ghani	Educational Supervisor
Dr Savio D'Souza	Educational Supervisor
Dr Ed Petzer	Clinical Supervisor
Dr Fabrizio Cecaro	Clinical Supervisor

Haematology

Dr Kawai Yip	Clinical Lead & Educational Supervisor
Dr Joy Galani	Educational Supervisor

Palliative Medicine

Dr Victor Pace	Clinical Supervisor

Renal Medicine

Dr Jonathan Kwan	Clinical Lead & Educational Supervisor
Dr Andrew Coutinho	Educational Supervisor
Dr Nihil Chitalia	Educational Supervisor

Acute Medicine

Dr Itopo Abedo	Clinical Lead & Educational Supervisor
Dr Lanitha Srikugan	Educational Supervisor
Dr Dora Affam	Educational Supervisor
Dr Noshaba Khiljee	Educational Supervisor
Dr Rehan Shamim	Clinical Supervisor
Dr Sebastian Urruela	Clinical Supervisor
Dr Saeedur Rahman	Clinical Supervisor

Neurology

Dr Shane Delamont	Clinical Lead & Educational Supervisor
Dr Catherine Ellis	Educational Supervisor
Dr Kirstin Weyrich	Clinical Supervisor
Dr E De Pablo Fernandez	Clincial Supervisor
Dr Ivona Tylova-Horackova	Clincial Supervisor
Dr Guru Kumar	Clincial Supervisor