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Fareham and Gosport 
Primary Care Trust

East Hampshire 
Primary Care Trust

COMMUNITY GERIATRICIAN

Fareham & Gosport PCT

There are four major providers of health services in the Portsmouth District – Portsmouth Hospitals Trust (which is the provider of most acute hospital services except Elderly Medicine), East Hampshire Primary Care Trust, Fareham & Gosport Primary Care Trust and Portsmouth City Primary Care Trust.

Portsmouth Hospitals Trust is engaged in the process of a major PFI development, which will see all acute services concentrated on the Queen Alexandra site. The success of this PFI scheme will be critically dependent on the development of enhanced community services particularly for the elderly in all three Primary Care Trusts. All three PCTs are working with Portsmouth Hospitals Trust to ensure that older people have appropriate access to acute facilities, that admission is avoided when it is safe to do so, and that older people are discharged from the acute hospital when their needs can be met outside the acute setting. This post will provide services to Fareham and Gosport Primary Care Trust and has been planned as the first in a number of similar appointments in the Portsmouth Health Economy. There are already plans for a similar post in East Hampshire Primary Care Trust.

The main focus of this post will be on the development and provision of community services to the elderly and to provide an in reach service to the acute hospitals. This a new full time post but candidates wishing to work part time will be considered. The Department of Medicine for Elderly People is one of the largest in the country with thirteen Consultants including Martin Severs - Professor of Elderly Medicine in the School of Postgraduate Medicine of the University of Portsmouth.

Introduction to Portsmouth

Portsmouth is a university city on the south coast with ready access to London (one and a half hours by train). There are ferries to France and the Continent. Sailing and watersports are very popular and sandy beaches are within easy reach. The area offers the advantages of city life, with close proximity to the beautiful South Downs with pleasant villages and seaside towns. Hampshire is an ideal location for families with many good schools.

Hampshire and Isle of Wight Health Authority is one of 28 Strategic Health Authorities in England. Portsmouth has a population of 542,000 and borders the Solent and English Channel and includes the City of Portsmouth and the Boroughs of Gosport, Fareham and Havant. The District extends from Warsash in the West to Emsworth on the Sussex border and its northern boundaries encompass Petersfield and Liss. The Department of Medicine for Elderly People is hosted by the East Hampshire Primary Care Trust (PCT).

The Department Of Medicine For Elderly People

The Department aims to provide a comprehensive service, including acute admission facilities, rehabilitation, palliative care, continuing care, respite care, day hospitals and outpatients services to vulnerable people over the age of 65.

The department is currently expanding so as to improve the quality and breadth of services for the elderly. There has been close working with General Physician colleagues to improve collaboration and partnership between the two departments. A Consultant Geriatrician is involved in the post-take ward round on the Medical Assessment Unit (MAU) every day of the week, along with 2 Consultant Physicians. Acute services are based at Queen Alexandra Hospital and St. Mary's Hospital (DGH).

The Department operates an unselected acute admissions policy for patients aged 65 and over, with a focus on the frail elderly and those with multiple pathology. There is an effective stroke service, which accepts acute admissions of all ages and offers rehabilitation for those over 65.

There are general rehabilitation beds at the Kingsclere Rehabilitation Centre at St Mary's Hospital, and also in 3 Community Hospitals – St. Christophers, Petersfield and Gosport. Outpatients clinics are also provided at the district general hospital sites and at Gosport War Memorial and Petersfield Hospitals.

There are four geriatric day hospitals; the Amulree Day Hospital is at St Mary's Hospital, the Trevor Howell Day Hospital at Queen Alexandra Hospital, the Laurel Day Unit at Petersfield Community Hospital and Dolphin Day Hospital at Gosport War Memorial Hospital. Day hospitals have developed their own special interest areas such as Parkinson's disease and related conditions, falls assessment and syncope investigations. Our department still provides continuing care facilities in community hospitals. The department has regular liaison with other departments, including Orthopaedics and Old Age Psychiatry.

Community Services have been augmented with the development of three community rehabilitation teams, one for each Primary Care Trust. Continuing care beds have been reconfigured to provide local rehabilitation facilities.

Modern library facilities exist at both district general hospital sites and bench libraries at most of the smaller sites. Ample opportunity exists for Continuing Medical Education (CME), both internally and externally. The Trust is committed to CME and Continuing Professional Development (CPD).

Department Statistics

District Population 1998	542, 086
Aged 65-74 years	46,990
Aged 75-84 years	30,835
Aged 85+	10,819

Elderly Medicine

Available Beds

Acute	Queen Alexandra & St. Mary's Hospitals	125
	Stroke Unit – Mary Ward	19

Stroke Rehabilitation

Stroke Rehabilitation	- Guernsey Ward (St Mary's Hospital)	20
	- Queen Alexandra Hospital	16
	- St Christopher's (Fareham)	9
	- Gosport War Memorial Hospital	8
	- Petersfield Hospital	4

General Rehabilitation	- Kingsclere (St Mary's Hospital)	30
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Palliative Care	- Charles Ward (Queen Alexandra)	8
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Continuing Care	- George Ward (Queen Alexandra)	17
	- Jersey House (St Mary's)	19
	- Petersfield Community Hospital	8
	- St Christopher's (Fareham)	31

	- Gosport War Memorial Hospital	20
	- Jubilee House NHS Nursing Home	25
Intermediate Care (Community Hospital beds)	- Gosport War Memorial Hospital	24
	- St. Christopher's Hospital	17
	- Petersfield Community Hospital	12
Day Hospital Places	- St Mary's Hospital	15
	- Queen Alexandra Hospital	15
	- Petersfield Community Hospital	10
	- Gosport War Memorial Hospital	15

Activity Statistics

Total admissions (2000-2001)	4700
	(acute) 3600

Current Medical Staff

<u>Consultants</u>	<u>Specialist Interest</u>	<u>NHS Sessions</u>
Dr R I Reid	Medical Director of Trust	11 (4 Clinical, 7 Medical Director)
Professor M P Severs	School of Postgraduate Medicine	2
Dr A B Dowd	Deputy Lead and Locality Lead East Hants	11
Dr M Bacon	Syncope	11
Dr D Jarrett	Community Clinical Tutor and Lead Consultant	11
Dr R F Logan	Clinical Audit	11
Dr A Lord	Locality Lead Fareham/Gosport Day Hospitals Parkinson's Disease Stroke Service	11
Dr J Tandy	Locality Lead Portsmouth	11
Dr S Poulton	Orthogeriatrics/Falls	11
Dr A Ravindrane	Acute Clinical Governance Cardio-vascular disease	11
Dr M Puliyeel	Drugs and Therapeutics	11
Dr J Beynon	Osteoporosis and Falls (Fareham & Gosport)	11
Dr J Grunstein	Community Rehabilitation (Petersfield Hospital)	1

The Consultants are loosely grouped into three groups, each group relating to one of the three Primary Care Trusts (or Group), namely Fareham and Gosport, Portsmouth City and East Hampshire. There is flexibility of working and cover across these three groups but some cross cover of annual/study leave between consultants within the same group is required.

Current Medical Staff (contd)

<u>Associate Specialist</u> Dr V Vardon	Palliative/Continuing Care	7 sessions
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Junior Staff

4 Specialist Registrars
 16 Senior House Officers
 7 Pre-Registration House Officers
 41 Clinical Assistant sessions
 3 Hospital Practitioner sessions

EXISTING SERVICES IN FAREHAM & GOSPORT PCT

Community Enabling Service – This provides a single point of contact in the PCT for referrals and the co-ordination of Intermediate Services for the older person. The team comprises Administration Staff, Nurses, Parkinson's Disease Nurse, Therapists, Community Pharmacists, Care Managers and Care Assistants from Social Services and a Consultant Geriatrician. Referrals between team members are informal. Patients are assessed primarily in their own home but if more specialised assessment is required, this is provided by Trevor Howell Day Hospital and Dolphin Day Hospital.

Inpatient Rehabilitation in Community Hospitals – General and Stroke Rehabilitation is provided at Gosport War Memorial Hospital (GWMH) and St. Christopher's Hospital Fareham.

Dolphin Day Hospital – Has 15 places, is open daily between Monday to Friday and accepts patients for multidisciplinary assessment and management for a variety of conditions including Falls and Parkinson's Disease. Day Case Blood Transfusions are carried out in accordance with an agreed policy. The Quick Pick-Up session is a new development and is to offer General Practitioners a quick specialist assessment either at home or in the Day Hospital in order to prevent acute admissions. Facilities are available on site at GWMH for phlebotomy, ECG, 24 hour ECG and Blood Pressure monitoring, X-rays, Ultrasound, Spirometry, Sigmoidoscopy, Pleural Aspiration and Joint Injection. Haslar Hospital is situated a couple of miles away and has facilities for CT and MRI Scanning, Barium examinations, and Nuclear Medicine.

PCT Care Home Strategy - The PCT recognises the growing importance of the private sector provision of long term care for older people and is keen to foster links to improve the interface with local health services. The post holder would be expected to work with the PCT to develop strategies – looking at, for example, the introduction of specialist nurses to work with care home staff to improve their skill base to allow the provision of subcutaneous fluids and improve palliative care expertise. In addition the PCT will encourage the development of end of life planning in nursing homes to avoid the unnecessary and futile acute admission of those who are terminally ill or close to death. The PCT would like to foster the development of specialist nurses who will track care home residents who are inpatients to ensure that information about their health state, and how the care home can accept the person back, are all available to acute ward staff. The forthcoming emergence of general practitioners with a special interest may also be another avenue securing improvements to care home standards and older people in the community at large.

The post-holder will provide expert support to community staff and to general practitioners via telephone, visiting patients, contributing to education programmes.

THE POST OF COMMUNITY GERIATRICIAN***The Role***

- To work with the General Practitioners (GP) and the PCT to identify the frail, vulnerable and at risk elderly and to develop appropriate services and levels of care to met their needs.

- Assessment of older people within the community setting in co-operation with the multidisciplinary team of the Community Enabling Service (CES) of Fareham & Gosport Primary Care Trust (PCT)
- Uphold the principles of clinical governance as detailed in "A First Class Service".
- To facilitate delivery of the NSF for Older People as a member of the Local Implementation Team (LIT) of the PCT.

Responsibilities

- Defined clinical responsibility for patients.
- Function as a member of the multidisciplinary team, ensuring patient care is based on need and ensuring services are acceptable and accessible to patients and carers.
- Supervision, training and education of junior medical staff, and of other disciplines in health and social services as required.
- Provide support and advice to General Practitioners on a wide range of aspects of elderly care and to undertake domiciliary consultations.
- Undertake clinical audit and participate in the Clinical Governance programme of the PCT.
- CME and CPD in keeping with the guidelines of the Royal College of Physicians.
- Work with Elderly Medicine, and the Medical Director in the future development of services to elderly people.
- Participate in the on-call Consultant rota and MAU Post Take Ward Round together with other colleagues in Elderly Medicine. The maintenance of skills in dealing with the acutely unwell is important and will be addressed through the annual appraisal. A limited period on an acute ward could be arranged on a regular basis.
- Development of a special interest. The PCT has recently appointed a Parkinson's Disease Nurse Specialist and is keen to develop a multidisciplinary specialist team to deal with Movement Disorders. An interest in Movement Disorders or any other specialist area will be encouraged.

Duties

The post will suit Physicians who have a primary interest in the development of community-based services and rehabilitation of the elderly.

Advice to Primary Care services will be required mainly for older people. This will include advice on the options of enhanced care in their own homes, referral to intermediate care facilities, as well as retaining the option for acute hospital admission.

The sessions in Acute Elderly Medicine will be as an in-reach to patients in the acute sector – assessment of patients in the MAU and assessment of patients referred from acute general medical and acute elderly care wards. The postholder would also be expected to liaise with the consultant(s) providing the orthogeriatric service about facilitating early discharge from the orthopaedic wards. Although the focus would be on patients belonging to GPs of Fareham & Gosport PCT the work on MAU in particular would be assessment of appropriate elderly patients from all localities. With the development of community geriatric services in the other 2 PCTs there will be a need for liaison with colleagues undertaking this role in the other 2 localities. The role within the acute wards would be to promote early safe discharge and transfer to the most appropriate post acute setting. The assessment nurses of the CES would support these assessments.

In-patient care will be mainly on Daedalus Ward at Gosport War Memorial Hospital where patients are currently admitted for general and stroke rehabilitation. With the development of multidisciplinary services in the locality it may be necessary in the future to develop a scheme for admission of the complex (but not acutely unwell) patients to a designated ward in Gosport War Memorial Hospital.

It would be expected that the post holder would look at standards of care of older people in Nursing Homes in the PCT and address issues, which include Medicines Management, continence and supporting GPs where appropriate in the management of acutely unwell residents. It is also essential to work towards closer and more co-ordinate working with the Old Age Psychiatry teams in Fareham and Gosport with a view to ensuring that patients have the most appropriate management.

The post-holder will be fully integrated with and take an active part in educational and management activities of the Department of Medicine for Elderly People.

Education

There is a regular teaching programme for pre-registration house officers, SHOs and specialist registrars. The consultant is expected to participate in this as well as multi-professional teaching and also be involved in the hospital clinical governance and educational arrangements. Opportunities exist for undergraduate education of medical students from Southampton Medical School. The consultant may act, as educational supervisor for an SHO working with them. This will entail close supervision, regular appraisals. Continuing Medical Education (CME) and Continuing Professional Development (CPD) are actively encouraged and arrangements for these activities will be through the Department of Medicine for Elderly People, Portsmouth. There is a Trust policy of continuing professional development and all consultants are encouraged to develop the skills necessary for the new Health Service. All consultants have annual appraisals in line with NHS Executive recommendations.

Audit

The department has a well-developed audit programme and all consultants contribute to local, regional and national audit. The consultants are committed to the principles of Clinical Governance and the successful candidate would be expected to contribute to Department and Trust Clinical Governance practice.

Research

There is ample opportunity for research and opportunities to guide Specialist Registrars in this area of practice. The Department is keen to expand its research base. Research is supported by the local Academic Research and Development Support Unit (ARDSU).

Management

All consultants in the department have assumed lead roles in particular clinical or managerial fields. Every encouragement will be given to a new consultant to cultivate management skills and participate in departmental service planning and development. The department has had a positive attitude to working constructively with management at all levels.

Health services in Portsmouth, as in other parts of the country, are undergoing change. Old Age Psychiatry is hosted, along with Elderly Medicine, by East Hampshire Primary Care Trust allowing opportunities for closer working between the two departments.

Timetable

The consultant will have an office and be supported by a personal secretary. The timetable is shown below. Yearly job plan reviews mean timetables may change to meet new priorities and developments.

	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>
<i>Morning</i>	Acute In-Reach	Acute In-Reach	Admin, Audit, Research	Outpatients (GWMH)	Dolphin Day Hospital (Special Interest)
<i>Afternoon</i>	Daedalus (In- patient General & Stroke Rehab)	CES (Community Visits)	Admin, Audit, Research	Admin, Audit, Research	Admin, Audit, Research

It would be necessary to use these sessions flexibly and consider changes as the service in the PCT and Elderly Medicine develop. In conjunction with Prof. M.P. Severs it may be possible to include an Academic session if the applicant so wished.

Conditions of Service

This post is covered by the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales) and the General Whitley Council Conditions of Service.

Rehabilitation of Offenders Act 1974/Criminal Convictions or Fitness to Practice Proceedings

This post is subject to an exception order under the Rehabilitation of Offenders Act 1974. Applicants are required to declare prosecutions or convictions, including those considered "spent" under the Act. Failure to disclose a criminal offence, having been bound over or cautioned or that you are currently the subject of criminal proceedings which might lead to a conviction, an order binding you over or a caution, or fitness to practice proceedings undertaken or being undertaken by an appropriate licensing or regulatory body, may disqualify you from appointment, or result in summary dismissal/disciplinary action and referral to the General Medical Council for consideration if such a discrepancy came to light.

Any information will be completely confidential and will be considered only in relation to an application for positions to which the order has been applied.

Applicants must be fully registered with the General Medical Council and have possession of the Certificate of Completion of Specialist Training (or equivalent) or an expectation of this, before commencement in post.

Completion of a health questionnaire is required, which may result in a medical examination.

Residence within either 10 miles of, or 30 minutes by road, from Queen Alexandra Hospital is usually required unless alternative arrangements are agreed with local management. The postholder must normally have a current driving licence and his/her private residence must be maintained in contact with the public telephone service.

Data Protection Act 1998

Under provision of the Act, it is the responsibility of each member of staff to ensure that all data, whether computerised or manual, is kept secure at all times. This includes data relating to patients and other members of staff. Data must not be disclosed to any unauthorised person and must be regarded as strictly confidential at all times. Failure to adhere to this instruction will be regarded as serious misconduct and could lead to dismissal.

Confidentiality

The job-holder will be in possession of personal details of staff and clients and other confidential information. This must not be discussed or divulged to any unauthorised person. Any such instance would result in dismissal.

Trust Policy and Procedures

It is the responsibility of all Trust employees to adhere to all Trust Policies and procedures.

Commencement of Duties

The appointee will be required to take up the post no longer than three months from the date of the offer of employment, unless a special agreement has been made between the appointee and the Authority. If you consider it unlikely that you will be able to take up the appointment within such a period, you are advised to point this out at the time of your application.

Interested candidates can discuss the post with either Dr. David Jarrett (Lead Consultant Geriatrician) on Dr Ian Reid (Medical Director) on or other Consultants in the department.

Comm Geri/31Oct03