![SRFT-Logo-Full_colour_[web500][1]]()

**Salford Royal Foundation Trust**

**Department of Urology**

**ST1/2 General Practice Vocational Training Scheme Post in Urology**

**1. Introduction**

This trainee will work within the well-established urological surgery team at Salford Royal NHS Foundation Trust (SRFT). The clinical team consists of; seven consultant urological surgeons, a nurse consultant, six nurse specialists, and, a junior doctor team of STRs, specialty doctors, core surgical trainees, and foundation doctors. We work closely with colleagues in oncology, radiology, palliative care, and, renal medicine.

The urology department is fully integrated with clinic, diagnostic, support, and, ward environments, all incorporated in a purpose built facility.

Salford Urology delivers core urology, including level 1 cancer, to the population of Salford, as well as level 2 specialist network cancer services to a population of 860,000 across Salford, Bolton & Wigan. In addition, we provide tertiary complex continence, urological reconstruction, and, neuro-urology including sacral neuromodulation services to the whole of Greater Manchester and Lancashire; as well as extracorporeal shock wave lithotripsy to the populations of both Salford and Bolton.

The post will support the development of; knowledge and clinical/practical skills in urology, closely aligned to the GP curriculum, and the individual learning needs of the trainee. Equally, it will provide significant opportunities for professional portfolio development.

There are established work streams and training opportunities in; clinical research, quality improvement initiatives, medical management and medical education. Clinical duties will include outpatient clinics, diagnostics sessions including; cystoscopy, urodynamics, and, prostate biopsies; as well as emergency assessment of patients with acute urological and general surgical conditions, and ward care of urology patients.

**2. Duties of the post**

**2.1 Clinical:**

1) Participate with the daily care of all urology in-patients including ward rounds, on-going review of inpatients

2) Clinical supervision of foundation trainees on the team

2) Supervised outpatient clinics – general and specialist urology.

3) Supervised flexible cystoscopy, urodynamics and haematuria clinics

4) Sessional attendance at allied clinics – sexual health, genital dermatology

5) On call – assessment and initial management of emergency urology and general surgery patients.

**2.2 Teaching, Research, Governance & Professional Development;**

This post will provide the trainee with excellent opportunities to develop and strengthen their professional portfolio for subsequent career progression. The exact direction would be dictated by the individual’s interests and development needs. The unit has a strong academic record and extensive experience of supporting trainees through successful periods of research. In addition, we have a very strong educational culture at both undergraduate and postgraduate levels, with experienced and credentialed teachers and trainers. Equally, there are significant training opportunities in medical management and quality improvement initiatives, supported by trainers with interests and expertise in these areas. An active involvement in the education and governance programmes would also be expected.

**2.3 On call:**

Participation in the Core Level on-call rota which is currently a partial shift format and cross covers general surgery emergency admissions.

**2.4 Support & Supervision:**

The trainee will continue to be supervised by an assigned GP educational supervisor throughout, ensuring a strong primary care and community direction. In house, they will be assigned a primary clinical supervisor, who will have overarching responsibility for their day to day educational and clinical supervision. All the consultant team are experienced and credentialed trainers, and they will input into clinical supervision.

The management of ward and acute care is delivered and coordinated by the registrar level doctors, supported by the consultant team. The ‘hot’ registrar of the week model, used in urology, ensures constantly available senior supervision, support, and, feedback for the core level & foundation year trainees. During their on call periods, the general surgical team, provide support and supervision in a similar fashion.

**3. Curriculum Mapping:**

What can a GP trainee get out of the post?

**Relationships to GP Contextual Statements:**

1. **The GP consultation in practice** – consulting and communicating skills are generic and transferable. Clearly, in this post they will be in the hospital rather than primary care environment, and the demands and context will be different, although highly relevant.
2. **Patient safety and quality of care** – SRFT is the safest hospital outside London, and a safety culture is key to its success. Quality improvement is a core Salford Value. The trainee will work within this culture, and, will be encouraged, indeed expected, to actively participate in various areas of governance, including; audit, quality improvement, adverse incident/harm management.
3. **The GP in the wider professional environment** – Our team is multidisciplinary in its core structure, thus our trainees learn how to utilise the resources, skills and knowledge of a wide range of healthcare professionals, in urology and allied areas, both in secondary and primary care. They will experience the interface and communication between hospital and community, appreciating the importance of coordination between services. Audit and QI projects will be encouraged in this area, (eg effective discharge planning, discharge communication, patient experience of discharge information, clinic communications).
4. **Enhancing professional knowledge** – learning, appraising evidence, and, teaching are generic skills/attributes, essential to all clinicians. The individual trainee’s learning needs will vary, however, in urology they will be exposed to patients with health care needs, in a range of the curriculum clinical examples. This will allow them to base their learning on specific clinical interactions, which will be used as the basis for WBA learning. In addition this will be supported by in house educational sessions covering core urology topics. They will also have the opportunity to develop their teaching and training skills through undergraduate teaching and foundation doctor supervision.

**Clinical relevance overview:**

Urological pathologies are common and becoming increasingly so; reflecting the changing demographics and lifestyles of the population. For example; 7% of all GP consultations relate to UTI; 6 million patients nationally have had an episode of urinary incontinence in the last 6 weeks; 30 to 40% of patients over 55 have LUTS; prostate cancer is the commonest male malignancy, bladder the 4th; metabolic syndrome is increasing and as a consequence so are the incidences of urinary stones, LUTS & erectile dysfunction. Inevitably, a significant proportion of GP consultations will have a urological slant, thus doctors in primary care must have training, knowledge and expertise in these conditions to ensure safe and high quality care, as well as effective use of resource. This post will provide this clinical experience as well as broader professional development of GP trainees.

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| **Clinical Activity** | **Experience, Case Mix & Curriculum Link** |
| One stop clinic | Case mix, all new patient referrals= 1. all general core urology =

LUTS, UTI, STI, urinary incontinence, urinary stones, haematuria, raised PSA, erectile & sexual dysfunction, genital & pelvic pain1. specialist stone
2. specialist reconstruction
3. specialist neuro-urology

*Aligned Curriculum Clinical Examples:**3.05 Care of older adults**3.06 Female Health**3.07 Male Health**3.08 Sexual Health*  |
| Oncology clinic | Cancer – prostate, bladder, kidney, testisNew referrals, diagnostics and treatment planning*Aligned Curriculum Clinical Examples:**3.05 Care of older adults**3.06 Female Health**3.07 Male Health* |
| Prostate cancerClinic | Prostate cancer follow up for a range of stagesClose link to community follow up – shared care pilot pending*Aligned Curriculum Clinical Examples:**3.05 Care of older adults**3.07 Male Health* |
| Continence clinic | Incontinence, TWOC, Bladder instillations, LUTSClose links with community bowel & bladder service*Aligned Curriculum Clinical Examples:**3.05 Care of older adults**3.06 Female Health**3.07 Male Health* |
| Haematuria clinic | Assessment and one stop investigation of haematuria*Aligned Curriculum Clinical Examples:**3.05 Care of older adults**3.06 Female Health**3.07 Male Health* |
| Urodynamics clinics | Assessment and treatment planning of urinary incontinence*Aligned Curriculum Clinical Examples:**3.05 Care of older adults**3.06 Female Health**3.07 Male Health* |
| On call | Assessment, diagnostics, &, initial management of the acutely ill surgical patient*Aligned Curriculum Clinical Examples:*3.03 Care of acutely ill people |
| Ward rounds & Ward care | Care of acute and elective urology patients, including significant links to palliative care, social care, and, allied specialties. Discharge planning and communication processesDevelop clinical decision making in closely supervised environment.Develop clinical supervision skills.Experience MDT working and importance of coordination between primary & secondary care, and health and social care providers.*Aligned Curriculum Clinical Examples:*3.03 Care of acutely ill people*3.05 Care of older adults**3.06 Female Health**3.07 Male Health**3.08 Sexual Health**3.09 End of Life Care* |

**4. Overview:**

This post offers an excellent opportunity for GP trainees looking to develop knowledge pertaining to common urological pathologies, and, gain experience in their assessment, diagnostic pathways, and, management. In addition, there is significant scope for broader development of their professional portfolio. This would occur within a well-established framework of educational and clinical supervision.

Provisional Timetable - Urology GPVTS ST

Clinical Director: Mr DG Ross

GPVTS Lead Educator: David Ross

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| --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | Thursday | Friday |
| 8 a.m | WR | WR | WR | WR | WR |
| Morning | Urodynamics | One Stop Clinic | Ward Care | One Stop Clinic | HaematuriaClinic |
| Lunch |  |  |  |  |  |
| Afternoon | Continence Clinic | Ward Care | VTS Teaching | Oncology Clinic | Portfolio Development |

Enquiries regarding the post are welcome. These should be directed to Mr DG Ross via his secretary: 0161 206 0120