Guide to Hospitals on the Wessex Anaesthetic Rotation

Wessex School of Anaesthesia 2023





PORTSMOUTH HOSPITALS UNIVERSITY NHS TRUST QUEEN ALEXANDRA HOSPITAL





Background

Portsmouth Hospitals University NHS Trust provides a range of acute services at Queen Alexandra Hospital (QAH). QAH is a very large, busy district general hospital and has gone through a major redevelopment in 2009, when three pre-existing hospitals were brought together to create a modern and spacious new block, where anaesthetics, obstetrics and intensive care departments are now all housed. There are over 7,500 full time equivalent staff, including Ministry of Defence employees, who are fully integrated into the activities of the hospital. The Emergency Department is one of the busiest in the UK, treating in excess of 150,000 patients each year. Similarly maternity services are responsible for the delivery of around 6,000 births per year, making it one of the largest maternity services on the south coast. The Trust is also home to the Wessex Renal and Transplant Unit and it holds prestigious Cancer Beacon Status for the Head and Neck Cancer Services. Queen Alexandra Hospital has around 1,200 beds, including cots (NICU), 30 theatres and superb critical care facilities with a 24 bedded ICU.

Anaesthetic Department

We have around 65 consultants, 12 SAS/ trust grades and can support 2 post- CCT fellowships in regional anaesthesia and difficult airway management. We also have 8 Anaesthesia Associate (AA) trainees (new programme started in Oct 2021, first 4 to complete training in October 2023).

The Anaesthetic Department gained ACSA accreditation in 2016.

ICU have around 18 consultants: background in anaesthetics (7), respiratory, renal, and ED.

Anaesthetics Training

We have between 35-40 anaesthetic trainees at all levels (novice/ ACCS to ST7), including military trainees.

Queen Alexandra is a large DGH covering all acute specialties except for cardiac, thoracics, neurosurgery and vascular. We run two emergency theatres (CEPOD) and two trauma theatres all day Mon- Fri, and one CEPOD and one trauma Sat/ Sun. In addition we have 23 elective theatres, 2 maternity theatres and 1 community dental theatre. Anaesthetic cover is also provided for interventional radiology, CT/ MRI, gastro/ endoscopy and cardiology.

A Duty Anaesthetist (Consultant Anaesthetist free of other clinical responsibilities) is available during the day to provide supervision and support to trainees working solo.

Modules/ training opportunities include (for all stages of training):

- Major general: colorectal, upper GI, bariatrics, gynae, urology. Includes plenty of opportunities for experience in robotic surgery (3 robotic theatres, with a fourth one planned to open later this year)
- Major head and neck, ENT
- Orthopaedics, including significant amount of regional anaesthesia
- Renal transplant and renal vascular access surgery
- Plastics
- Paediatrics
- Obstetrics
- Pain
- Non-theatre: interventional radiology, CT/ MRI, gastro/ endoscopy and cardiology.
- Periop Medicine: daily anaesthetic preassessment clinic, dedicated bariatric/ upper GI clinic and MDT, CPET, daily surgical high-care ward round, Surgery School (www.surgeryschool.co.uk)

<u>Advanced training/ SIA's offered</u>: Major General, Bariatric, Airway, Regional Anaesthesia, Obstetrics, Pain Medicine, Periop Medicine,

We have a busy 24-bedded ICM unit which offers training at all levels, including for advanced/ dual trainees. Please take the opportunity to also get your transfer and respiratory and cardiac arrest competencies signed during your ICM block.

Teaching

- weekly protected teaching for pre-FRCA trainees (half day)
- post-FRCA trainees will be supported to attend Wessex regional teaching programme
- monthly clinical governance meeting: M&M, audit, journal club, professional updates, etc
- large busy simulation centre with a dedicated sim team, as well as in-house theatre sim sessions during some CGM's

Out of hours

There is a large anaesthetic and critical care team on site 24 hours a day, thus there is always help available when needed.

Anaesthetic oncall team includes:

- 1st on anaesthetic trainee: CT1-CT3 trainee covering main theatres

- Maternity anaesthetic trainee: CT2+ trainee (once IACOA achieved) covering labour ward and maty theatre
- 2nd on anaesthetic trainee: senior trainee (ST4+), coordinates all theatre work out-of-hours and supports junior trainees
- 1st on anaesthetic consultant: oncall from home, but available to come in when required
- 2nd on/ in-and-working anaesthetic consultant: on site until 20:15 Mon-Fri, and between 07:45- 17:00 Sat/ Sun
- Extra anaesthetic consultant/ SAS on site between 07:45-17:00 Sat/ Sun as "emergency support" (to support CEPOD/ trauma/ labour ward as required)

ICU run a separate rota, and therefore have their own 24/7 oncall team, which includes ICU consultant, junior and senior trainees and ACCP's. They carry the cardiac arrest bleeps, and are also the first port of call for ED emergencies and referrals.

On call accommodation/ facilities

Second to none! There are two large anaesthetic on call rooms with ensuite in the main department for the 1st and 2nd on trainees, and a separate obstetric anaesthetic on call room adjacent to the maternity unit. These rooms are also available for sleeping in before driving home after a busy night shift if required (though we would recommend leaving a "Do Not Disturb" note on the door!).

There is a large dedicated trainees' room in the anaesthetic department, with several computers, sofa, etc

Rota

We are now using the electronic DB Rota system to write our oncall rota, which is being published for a whole 6-month period.

This gives you the opportunity to request your preferred not on call and leave periods prior to the rota being published, and your individual oncalls will be built around those requests, as well as your agreed non-working days if LTFT, thus enabling you to maintain a good work life balance.

Our weekly rota/ lists allocations is written around 2-3 weeks in advance, so specific training requests need to be planned ahead. Please discuss your training needs with the College Tutors before/ when you first start, and you will be placed in specific units of training accordingly.

Support/ Other Info

Everyone will be allocated an Educational Supervisor whom they will meet regularly and will also meet the College Tutors twice during your placement for an appraisal.

College tutors: Stefan Radauceanu and Adam Edwards.

Please contact the College Tutors to identify the current anaesthetic trainee rep, who can provide more info and add you to the trainees' WhatsApp group.

Wellbeing Champions: Amanda Edward, Nick Jenkins, Chris Watts

Oasis Centre: on site swimming pool and gym, competitive price



HAMPSHIRE HOSPITALS FOUNDATION TRUST

Hampshire Hospitals NHS Foundation Trust came into being in January 2012 as a result of the integration of Basingstoke and North Hampshire NHS Foundation Trust and Winchester and Eastleigh Healthcare Trust. This trust serves a population of approximately 600,000 across Hampshire and parts of West Berkshire and employs around 5,000 staff. The two main hospitals you will work in within this trust are Basingstoke and North Hampshire Hospital and Royal Hampshire County Hospital in Winchester.

Trainees do not cross cover both sites at once, however teaching is shared across the trust with location alternating between the sites. ID badges and IT systems are shared across the 2 sites, and induction only needs to be completed once a year even when swapping sites after 6 months.

BASINGSTOKE AND NORTH HAMPSHIRE HOSPITAL

Background

Basingstoke and North Hampshire Hospital has around 450 beds, from which it provides a full range of services for patients who need both planned and emergency treatment. This includes the Diagnosis and Treatment Centre (DTC) a purpose built, modern planned care centre, mainly providing day case surgery, which opened in February 2005. The hospital employs 2900 staff members.

Basingstoke has a unique patient mix and offers opportunities not available elsewhere in Wessex (or even the rest of the UK) as it acts as a regional centre for management of complex. Hepatobiliary and Carcinoid surgery and as a national centre for Pseudomyxoma surgery, the Peritoneal Mailgnancy Institute. We offer trainees opportunities for experience with liver resections, traumatic liver injuries, biliary reconstructions as well as intraperitoneal chemotherapy for pseudomyxoma patients. The colorectal surgery unit has the lowest mortality in the UK, offering the opportunity to observe best practice in colorectal procedures. We are also a supra-regional referral centre for low rectal cancers.

Anaesthetic Services

There are a total of 14 operating theatres (7 in main theatres, 4 in the DTC, 1 eye theatre, 2 obstetric theatres), and a critical care unit with 18 beds. There is a busy acute and chronic pain service and an acute angioplasty service with a brand new PCI unit completed in 2022.

Anaesthetic Training

Tutorials for the FRCA happen at the Basingstoke or Winchester site weekly. There are regular M&M, Audit and Trauma meetings – there are also a number of ad hoc evening meetings on anaesthetic topics. The department organises a 'Transfer of the Critically III' course and regular Primary FRCA courses. Post FRCA teaching is also organised centrally within the deanery.

Out of Hours

On site provision includes a senior registrar responsible for overseeing and supporting junior trainees in main theatres and ICU as well as providing obstetric anaesthesia, an SHO providing anaesthesia in main theatres and an ICU fellow (who may or may not be airway trained).

On Call Accommodation

This includes an ITU office on the unit with a bed usually used by the registrar, and a separate SHO on call room on the downstairs main corridor. There is also a large and comfortable doctor's mess on site.

Rota

There is a rolling rota, thus on call shifts must be swapped if annual leave is booked whilst due to be on long days or nights. The rolling rota is usually released quite far in advance to facilitate this.

Modules which can be fulfilled in this hospital include:

- General duties including major general surgery
- Out of theatre (on site ECT service)/Procedural sedation
- Pain
- Perioperative medicine
- Regional Anaesthesia
- Intensive Care, Obstetrics, Paediatrics
- Generic Professional Capabilities

Support

College Tutor: Dr Nina Ashraf-Kashani. Please contact college tutors at the start of placement to identify local training rep and ask which modules are easiest to complete here.

Regional Buddy and year group training rep system.

Research

The unusual case mix in Basingstoke does allow the opportunity for anaesthetic research. We are keen to involve trainees in research, quality improvement and management/leadership.

ROYAL HAMPSHIRE COUNTY HOSPITAL

Background

The Royal Hampshire County Hospital has approximately 400 beds and the site includes a Treatment Centre for day surgery and a multi professional Education Centre. Medical students attend RHCH from both Southampton University and St George's University, Grenada. Winchester is the main base for the Southampton BM4 course students in years 1,2 & 4, and it is possible to get involved with regular student teaching if you wish.

Anaesthetic Services

We have a departmental manager shared with the Basingstoke site and a departmental secretary. In addition to staffing the ICU, the department provides support to 10 theatre suites (3 day case theatres), MRI / interventional radiology, labour ward and 2 obstetric theatres on the RHCH site. There is a well-established acute and chronic pain service.

Intensive Care (ICU)

The ICU is a 10 bed unit, funded for 6 level 2 ("HDU") and 4 level 3 ("ICU") patients. However, in keeping with recommended practice, the unit is flexible, in accepting varying ratios of the different levels of care, up to the capacity dictated by nursing numbers. The ICU is recognised for Basic Level ICU training.

There is dedicated ICU Consultant level support 24/7. ICU staffing includes Clinical Fellows and an F2 doctor on rotation during the day and an anaesthetic SHO overnight.

Anaesthetic Training

Trainees are not asked to cover other trust locations and are supported by a "starred" anaesthetic consultant system 24/7. Pre-FRCA anaesthetic tutorials occur on a weekly basis (normally Wednesday) in addition to weekly ICU teaching, weekly departmental Tuesday lunchtime meetings, monthly anaesthetic and monthly anaesthetic & ICU M&M. There are Clinical Governance half days approximately four times a year. In addition, there is a dedicated novice training programme in place for the first three months.

Out-of-hours

Cover is provided by a 2nd on anaesthetist providing obstetric anaesthesia and urgent local support for theatres/ED/ICU when needed. An airway trained anaesthetic SHO or ICU fellow covers ICU with ICU consultant support from home. Anaesthesia for theatre cases overnight is provided by the on-call consultant.

On-call accommodation

This includes a bed in the obstetric anaesthetic office for the 2nd on and a bedroom in the ICU corridor for the ICU doctor. Rooms in the hospital accommodation are provided

free of charge for HHFT staff who are on-call or between on call shifts and too tired to drive home safely. There is also a large and comfortable doctor's mess on site.

Modules

RHCH is very lucky to have a number of consultants very experienced in regional anaesthesia. There are regional lists every day with a majority of operations undertaken under awake regional anaesthesia. In addition there is a good opportunity to become familiar and confident with TIVA with a number of experienced consultants. There is also an annual TIVA training course run from this hospital.

Other suggested modules include:

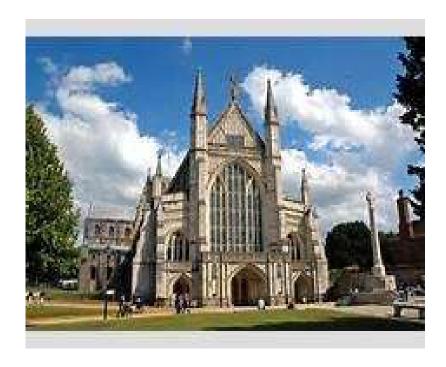
- ICU/Obs/Paeds/ General duties
- Regional
- Obstetrics and Paediatrics
- Major General
- Pain acute and chronic
- Ophthalmic lists under eye blocks
- Day Surgery and TIVA
- Perioperative medicine Weekly consultant lead clinic
- Out of theatre (there is an excellent paeds MRI list)
- Simulation and teaching there are many opportunities to get involved in teaching. We have a fantastic novice teaching programme which senior trainees are encouraged to assist with.

Rota

There is a rolling rota, thus on call shifts must be swapped if annual leave is booked whilst due to be on long days or nights. The rolling rota is usually released quite far in advance to facilitate this.

Support

College tutor: Jonathan Anns. Please contact college tutors at start of placement to identify local training rep and ask which modules are best to complete here.





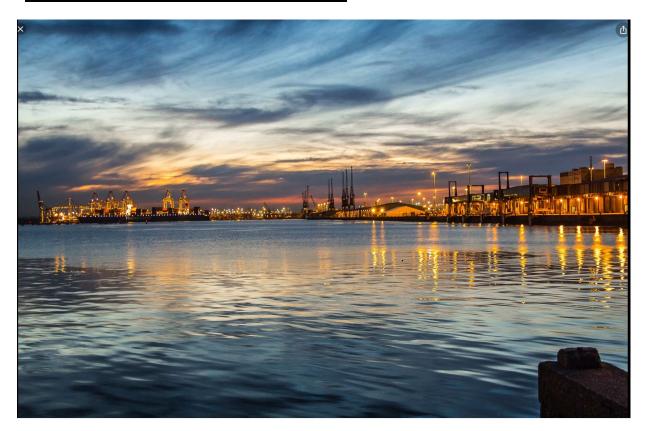
Research

There are many opportunities for anaesthetic/ICM research with a very active research team. There are opportunities available at local and national levels.

Opportunities in the Developing World

One of our Consultants is very active in anaesthetic education and provision in Africa. Many of our trainees have had the opportunity to lecture on international conferences as a result of this link.

SOUTHAMPTON UNIVERSITY HOSPITALS





Background

University Hospital Southampton NHS Foundation Trust is one of the largest acute teaching trusts in England. Our 12,000 staff provide services to around 1.9 million people living in Southampton and Southern Hampshire, plus specialist services including neurosurgery, cardiac surgery, major trauma and children's specialist services to more than 3.7 million people in central southern England and the Channel Islands.

The Trust is also a major centre for teaching and research in association with the University of Southampton and partners including the Medical Research Council and Wellcome Trust. As well as the main hospital Southampton General, the trust also runs the adjacent Princess Anne Hospital for obstetrics, gynaecology and neonatology. Significant recent developments include expansion of theatres, the Intensive Care Unit and Wessex Cardiac Centre. The trust has approximately 1350 inpatient beds. UHS gained foundation trust status on 1 October 2011.

Anaesthetic services

The Shackleton Department of Anaesthetics is part of the Critical Care Group within the Specialist Services Division A and is based at Southampton General Hospital. Anaesthetic and Intensive Care services are provided throughout the Trust including the Princess Anne Hospital. There is a large General Intensive Care Unit, and separate Cardiac, Neuro, Paediatric and Neonatal Intensive Care units on site.

Anaesthetic Training

Many of the specialty training requirements for completion of stage 2 are only available at this site, thus all anaesthetic trainees will spend time at UHS. This is a very large hospital and sees many patients with complex health needs and a significant amount of polytrauma as UHS is the Major Trauma Centre for Wessex. The department is large and the hospital is very busy, there are plenty of learning opportunities!

Modules that can only be completed here include: Neuro, Cardiac & Thoracics. For SIAS: Paeds and at present part of Obstetrics must be completed here. Other SIAs include Cardiac, Neuro, Acute pain, Complex Orthopaedics, Major General, Opthalmics, Airway, Thoracics, Vascular, POM, Regional, Trauma (as part of PHEM), ICM, Pain, and most of HPB.

Please discuss the areas you are aiming to get experience in during your rotation with the college tutors/educational supervisors at the start of the year so that they can help you achieve your goals.

Out of Hours

There is a large anaesthetics and critical care team on site 24 hours a day, thus there is always help available when needed! Onsite support out of hours includes:

On call general consultant who is resident until 9pm. Trauma consultant in trauma theatre till 8pm Obstetric Anaesthetics till 8pm.

- Anaesthetics Coordinator: Senior Anaesthetic registrar- hold coordinator bleep & MTC bleep
- Reg 1: Core or Junior registrar. Commonly supports trauma theatres +/- paeds bleep
- Reg 2: Usually a registrar- second support for obstetrics +/- neuroanaesthesia bleep
- Reg 3: Usually a registrar-provides emergency support for NeuroICU +/-neuroanaesthesia bleep
- Obstetric Anaesthetist: Obstetric competent Core/Registrar. Cover obstetric theatres and maternity suite in Princess Anne, just across the road from SGH, with support of

Reg 2/Coordinator when required

- GICU: 31 funded beds, minimum staffing 3 'airway' competent CT3+ and 4 non-airway for gicu, 2 for shdu during the day one twilight and one on nights
- Cardiac ICU: One anaesthetic registrar and one cardiac fellow (fellows are usually anaesthetic trained and very experienced)
- Neuro ICU: Neuro ICU fellow, usually at core+ level with consultant support from home

On Call Accommodation:

There is a coordinators office with a bed, and there are 3 fold-out beds for use by the rest of the oncall team. For sleeping during the day (in between nights), there is accommodation outside the main hospital which can be booked in advance or the morning after a busy on-call. In Princess Anne there is a dedicated obstetric anaesthetist on call room with a bed. There are reclining chairs available in the cardiac and general ICU shared doctor's offices.

Sources of Support

College Tutors: Lucy Marshall and Kate Donovan.

Educational supervisors: You will be allocated one at the start of your rotation to UHS.

Fellows Tutor: Tsitsi Madamombe looks after those who are in Trust fellow posts CESR leads: Poppy Mackie and Delia Hopkins are the CESR programme leads Wellbeing champions: Carolyn Way and Angela Denner are leads for the Anaesthetic

department

There is an optional Buddy Scheme matching up new arrivals in SGH with a trainee of similar grade to help you settle in.

Anaesthetic Reps: There are 2 reps one senior and one for ACCS and Core

Further information

You will be sent the UHS Anaesthetic Trainee Handbook shortly before you start which has a wealth of information about training opportunities, on-calls, booking leave, SDT, wellbeing etc. We look forward to welcoming you and helping you to get the most out of your time with us!

<u>University Hospitals Dorset (Poole and Bournemouth)</u>

Background

Poole and Bournemouth Hospitals are part of University Hospitals Dorset NHS Trust, providing acute medical services to Poole, Bournemouth and the surrounding area.

The hospitals are approx. 7 miles apart. Major transformation is in process with clinical services being relocated, in 2025 Poole will become a major elective centre and RBH will become the acute site.



Poole Hospital

is currently the major acute hospital for East Dorset. It serves East Dorset for all major trauma, paediatrics, maxillofacial. **ENT** and obstetrics in addition to its district general hospital role for acute general medicine, surgery and gynaecology. The airway service provides many specialist services and gives opportunity for learning advanced skills in THRIVE, jet ventilation and awake intubation.



There is a 12 bed critical care unit cares for level 2 and 3 patients.

4 state of the art barn theatres, house trauma and eventually elective orthopaedic work. These run alongside 8 main theatres and 2 obstetric theatres. Cover is also provided for endoscopy, ECT at St Anne's Hospital and Wimbourne hospital.

Poole has a busy obstetric unit with 4000 births/year based at the St Mary hospital, opposite the main hospital site. This is planned to move to RBH in 2025.

The Royal Bournemouth Hospital

RBH provides all elective and emergency vascular, urology, ophthalmic and elective orthopaedics for East Dorset alongside general DGH workload. There are 8 main theatres, 2 eye theatres, 5 day theatres and 3 orthopaedic fast track joint replacement theatres.

Critical Care unit at RBH includes the Intensive Care Unit cares for over 800 patients a year. Twenty per cent of patients are planned admissions following major surgery; the others are emergency admissions with a wide variety of conditions. Critical Care also provides an outreach service, supporting patients who have been discharged from critical

care to other areas within the hospital.

Anaesthetic Services

Trainees at UHD work flexibly across Poole and Bournemouth Hospitals during their training to get a broad experience.

There is a large perioperative department with anaesthetic led preassessment clinics and CPET service.

There is a department of Anaesthesia at both Poole and Royal Bournemouth Hospitals with administrative managers and secretaries on both sites.



Anaesthetic Training

Teaching

Pre-FRCA teaching on Thursday mornings are chaired by a consultant and coordinated by one of the senior trainees. Topics are sent out to trainees in advance so they can prepare a talk. Trainees that attend find the sessions well-organised and useful for exam preparation. Consultants provide regular viva practice for those undertaking exams. There is a yearly post-FRCA teaching day, with many popular topics relevant to senior training and preparation for consultant posts.

Recommended Modules

- All stage 1 modules
- Obstetrics all levels including SIA
- ICM stage 1 and 2
- Pain- Acute pain training and hospice visits are available through Poole— Bournemouth. Chronic pain clinics are currently not available at Poole/Bournemouth, but there is a well- established arrangement by which trainees organize chronic pain clinics at Salisbury/Basingstoke/Winchester, the college tutors will give you further information regarding this when you start.

Stage 3 special interest areas:

- airway
- Perioperative medicine
- Ophthalmology
- Vascular
- Bariatrics
- Acute pain

- Major general
- Complex orthopaedics (need to visit UHS for pelvic list)
- · Regional anaesthesia

Out of hours

The emergency rota for the general on-call consultant staff is organised so that there are always two consultants on call, one for Poole and one for Bournemouth, in addition to the consultants for intensive care.

Currently there are four resident staff on-call at Poole Hospital.

AZ- SHO level anaesthetist covering Emergency theatres 08:00-21:00 on weekdays and 08:00-21:00 on weekends

A1 – junior ITU trainee

A2- ITU trainee CT2+

A3- St4-7 trainees/Consultant coordinates work, provides support to Obstetric

& ITU colleagues and covers emergency theatre after 9pm.

Obs- CT2 trainees/SAS: based on a different site but supported by A3 where needed

Currently at RBH out of hours anaesthetic service is run by consultants and staff grades. There is an ST3-7 covering ITU, who is the only senior trainee in the hospital so may assist in theatre if a second anaesthetist is required.

The oncall system will change significantly once the clinical services move sites in 2025, with most trainee oncalls being based on the RBH site.

On Call Accommodation

Dedicated oncall rooms for all trainees, within the units for Obs and ITU trainees. A3 on-call room is on the 6th floor of the hospital 'penthouse'.

Support

College tutors: Rachael Ford (Poole- Core Trainees/ACCS) and Tom Hutley (RBH- ST3 and above).

Please contact college tutors at start of placement to identify local training rep and confirm which modules you'd like to complete with us.

SALISBURY DISTRICT HOSPITAL



Background

Salisbury NHS Foundation Trust provides excellent clinical care to approximately 240,000 people in Wiltshire, Hampshire and Dorset. Specialist services such as burns, plastic surgery, genetics and rehabilitation extend to a wider population of 3 million across Southern England. The Duke of Cornwall Spinal Treatment Centre at Salisbury District Hospital covers most of southern England with a population of approximately 11 million people. The Trust employs approximately 4,900 staff, including full and part-time staff.

Anaesthetic Services

Located immediately adjacent to the main theatre complex, the Anaesthetic Department houses office space as well as a large coffee/seminar room complete with flat screen TV with projector and daily newspapers. Services provided by the Trust of relevance to the anaesthetic trainee include the following:

- 14 Operating theatres o
- Regional Burns unit, plastic and reconstructive surgery centre
- Orthopaedics and Trauma, including elective spinal, surgery o
- Maxillofacial Surgery including Cleft lip and palate service o
- Major colorectal surgery and urological bladder reconstruction surgery. o
- Onsite obstetric service including emergency and elective caesarean sections o
- Acute and Chronic pain service o
- Critical Care Unit: 8 bed unit including ICU and HDU level patients.
- Dedicated Block theatre, Mon-Fri- for awake upper limb surgery



Anaesthetic Training

Teaching

There is a weekly teaching program for trainees preparing for the Primary FRCA and 10 clinical governance meetings each year, encompassing audit, M & M and professional development updates. There are also numerous opportunities in simulation, with a recent refurbishment of the simulation suite.

Recommended Modules

Salisbury is the regional centre for burns and has developed a superlative plastic surgery service. It is therefore ideal for completing the Burns and Plastics module and also Regional Anaesthesia modules with the opportunity to sign of regional anaesthesia as one of the specialist areas in Stage 3 training. Being the home to the Wessex Rehabilitation centre, there is also opportunity for Acute and Chronic Pain modules to be completed. Stage 2 Obstetrics can usually be completed. There is opportunity for large exposure to paediatrics cases (plastics/burns/ENT/cleft palate/urology), which can contribute to Stage 2 paediatric sign off.

Out of hours

Week Days - Monday- Friday

17:30-20:30 - Senior trainee (2nd on) covers Intensive Care and Obstetrics

17:30-20:00- Consultant on- call covers emergency theatres and recovery.

20:00-20:30- Handover

20:00-08:30 -Core trainee (1st on) covers emergency theatres (+ ITU)

20:00- 08:30 -Senior trainee (2nd on) covers ITU/ Obs, supports junior trainee.

Weekends: Saturday-Sunday.

08:00-20:30 Senior trainee ITU + Obs

08:00- 18:00 Consultant Emergency theatre

08:00- 20:30 Junior trainee Trauma theatre (Emergency theatre after 18:00)

20:00-08:30 Senior trainee ITU +Obs

20:00-08:30 Junior trainee Emergency theatre.

There is an on-call general anaesthetic consultant and on- call ITU consultant, available for support throughout the out of hours period.

On Call Accommodation

There are two on-call rooms, both within the anaesthetic department adjacent to ITU and theatres. Each has a relatively comfortable single bed. Linen is provided. They also contain a workstation with computer as the rooms are used to provide computer access during the day. If you are too tired to drive home after a night shift the on-call rooms can be used, but there are also emergency on-call rooms available on-site.

Support

Clinical lead: Simon Williams

College tutor: Suzanne Coulter

Please contact College Tutor at start of placement to identify local training rep and ask which modules are best to complete here.



DORSET COUNTY HOSPITAL



Background

Dorset County Hospital was established in 1991 as part of a long-term project to bring together all the local services for acutely ill patients onto one hospital site. The new hospital, just outside Dorchester town centre, was completed in 1997. We were awarded Foundation Trust status in June 2007. Our busy, modern hospital provides a full range of district general services, including an emergency department, and links with satellite units in four community hospitals.

We are the main provider of acute hospital services to a population of around 270,000 living within Weymouth and Portland, West Dorset, North Dorset and Purbeck. We have approximately 400 beds and provide renal services for patients throughout Dorset and South Somerset; a total population of 850,000. We are also the provider for special care dentistry across Dorset. We are a major trauma unit within the Wessex Trauma Network. The hospital is recognised as a Cancer Unit within the Dorset Cancer Network for the provision of services for patients with breast, colorectal, urological, upper gastro-intestinal, lung and haematological malignancies. Dorset and Somerset Air Ambulance (DASS) is based at Henstridge Airfield on the Dorset/Somerset border and provides acute medical care to the Dorset and Somerset population. The DCH anaesthetic department has strong links to the DSAA as two of the DSAA doctors are Anaesthetists and Critical Care doctors from our department. We are usually able to offer taster days to trainees rotating through our department. Dorset healthcare university NHSFT also provides the Dorset Pain Management Service to the Dorset population and therefore we can provide Pain training for all stages of anaesthetists rotating through DCH.

Anaesthetic Services

Our anaesthetic department has had RCOA ACSA accreditation since 2018. The departmental offices are in the centre of the hospital close to the 12 bedded Critical Care

Unit. There are seven main theatres, two day-case and one obstetric theatre. There is a surgical admission ward next to one of the theatre complexes, and the preoperative assessment service is based a few minutes' walk away. All theatres are equipped with brand new Draeger anaesthetic machines and Mindray monitors with integrated BIS monitors and neuromuscular monitoring. There are several new U/S machines dedicated to the department for line placement and ultrasound guided regional blockade. We are in the process of upgrading our TCI pumps.

Surgical specialities include:

General and Laparoscopic surgery

Urology – including nephrectomy

Orthopaedics & Trauma including day-case arthroplasty service

Vascular/Regional

ENT. Dental and MaxFax

Obstetrics & Gynaecology (approx 1800 deliveries/yr)

Endoscopy Unit

General, orthopaedic and dental paediatric lists (general and orthopaedic surgery provided by visiting surgeons)

Pre-assessment clinics, perioperative medicine clinics and CPET testing

Critical Care (Richard Jee is Faculty Tutor and Duncan Chambler is TPD)

Anaesthetic Training

Teaching

There is term time weekly bleep-free consultant facilitated Primary and Final FRCA teaching and monthly ICU teaching. There are 12 clinical governance meetings each year, encompassing audit, M & M, journal club and professional development updates.

We have a modern and recently refurbished simulation suite with a dedicated sim technician. We run the West Wessex Novice course and critical incidents course for core anaesthetists. We provide two paediatric and adult airway simulation afternoons (one for core anaesthetists and one for registrars). There are also regular trauma and PICU sims.

We have strong links with our ENT surgeons and the Respiratory team for opportunities learning nasendoscopy and chest drains.

Recommended subspecialty areas/ HALOs

All Stage 1 training including pain, critical care, regional, perioperative medicine

Stage 2 training including pain, intensive care, regional, sedation; general including obstetrics and some paediatrics (no cardiac or neuro)

Stage 3 training including general, regional, perioperative medicine, pain, intensive care, resuscitation and transfer

Stage 1 to 3 ICM programme training

We pride ourselves on supporting the Generic Professional Capabilities (non-clinical HALOs) with leadership opportunities, active research, teaching and quality improvement.

Out of hours

The core anaesthetist (CT1/2) covers critical care, cardiac arrests and referrals. Registrars (ST4+) provide support to the core anaesthetist and additionally cover maternity, emergency theatre, and trauma calls. Core anaesthetists also work long days covering emergency theatre (and obstetrics when competent) until 8pm on weekdays. There is a doubled-up starred consultant until 6pm carrying a phone, and then the first

oncall consultant is resident until 9pm. From 6pm until 8am the consultant oncall covers critical care and theatres and there is a second oncall consultant available from home for exceptionally busy times. At weekends there is a critical care doctor or CT3+ anaesthetist covering critical care long days in addition to the core anaesthetist and anaesthetic registrar. This tier is in development ready for our brand new 16 bedded critical care opening in a few years' time. There is a consultant covering trauma Saturday and Sunday until 1pm.

On Call Accommodation

There is a fold out bed for the core anaesthetist in anaesthetic department and an oncall room in the doctors' mess for ST4+ registrars. It is also usually possible to book accommodation in advance for antisocial shifts if you have a long commute.

Support

College tutor: Claire Joannides/Katharine Barr. Please contact college tutor at start of placement to identify local training rep and ask which competencies are best to complete here.

We also run a buddy system for our core trainees.

All DCH employees have access to the Trust's free and confidential counselling service.

Clinical Lead for Anaesthetics: Jonathan Chambers

Administrator: Emma Wyatt

