



Hip Fracture Unit Job Planning

The REDUCE Study (REducing unwarranted variation in the Delivery of high qUality hip fraCture services in England and Wales) research programme identified a number of factors associated with patient outcomes post hip fracture. These research findings have directly informed the development of the following evidence-based job description essentials, which can be incorporated into individual hospital trust/board/board job description templates. Text will need to be deleted, added, and modified for use in individual trusts/boards.

Specialty Doctor in Orthogeriatrics role job description essentials

- Work as part of the multi-disciplinary team, acting as a liaison between emergency department, orthopaedic, anaesthetic, ward, rehabilitation, and community staff
- Facilitate cross-divisional communication networks, acting as a focal point for communication and information sharing across multi-professional groups
- Attend daily trauma meetings
- Assess and optimise patients for theatre, including providing diagnostic, pre-, and post-operative care
- Liaise with orthopaedic and anaesthetic teams to enable timely orthopaedic surgery
- Attend routine MDT meetings
- Undertake ongoing medical review during in-patient stay, including management of acute illness, VTE prophylaxis, analgesia, delirium, nutrition, falls and bone health assessment and treatment
- Ensure effective patient management plans are created and carried out in a timely manner
- Monitor and document rehabilitation progress and identify unexpected changes in progress
- Coordinate discharge planning including liaison with family/carers and community-based teams
- Undertake advance care planning
- Be able to manage patients palliatively where appropriate
- Identify and meet the training needs of hip fracture staff
- Participate in clinical audit and regular reviews of local NHFD audit data
- Attend monthly clinical governance meetings as a core MDT member

Example layout of a Job Description for a Specialty Doctor in Orthogeriatrics

Those elements highlighted in blue require modification for local use.

XXX Hospital NHS Trust/Board

Job title:	Speciality Doctor in Orthogeriatric Medicine
Grade:	Speciality Doctor
Managerial responsible to:	XXX Clinical Director
Base/Department:	Geriatric medicine
Location:	Name and address of hospital

The work of the department

Section 1: Hospital Trust/Board overview

Section 2: Summary of the post

Job plan: A proposed job plan is attached, although the appointee will be expected to adapt work to fulfil department and trust/board priorities. Individuals wishing to work part time or flexibly are welcomed.

On call: There are no on-call duties attached to this post; however, the appointee will be expected to contribute to bank holiday and 'long weekend' cover.

Timetable:

Section 3: Overview of the work of the department

The orthogeriatrics team is responsible for the acute perioperative management of approximately XXX hip fracture patients per year. We also provide medical care to older inpatients with other lower limb and pelvic fragility fractures within the trauma unit. You will be joining a team comprising XXX consultant geriatricians (XXX WTE), XXX trauma/geriatrician fellows (ST3+), XXX GPSTs, XXX trust/board grades, XXX FY1s and XXX specialist nurses (*delete/modify as necessary, and explain about configuration of junior doctor cover*).

The trauma unit is led by XXX experienced band XXX ward managers with the support of a matron. Rehabilitation is provided by experienced trauma physiotherapists, technicians and occupational therapists. Case managers are based on the wards to facilitate discharge of patients. In this locality, we are well supported with community-based rehabilitation pathways. The department has senior management support both within the XXX division and at executive level.

We are privileged to have XXX specialist nurses as part of the team. They are able to carry out clinical assessments, complete data collection and assessment for the NHFD, counsel patients for osteoporosis treatments, and arrange admission for drug treatment. The nurses also run a weekly follow up clinic (*delete/modify as needed*).

The team works collaboratively with senior orthopaedic surgical colleagues to provide shared care across both trauma wards. There are currently XXX orthopaedic consultants who provide acute trauma services. There is a daily multidisciplinary trauma meeting to discuss and prioritise acute trauma admissions and theatre lists. The orthogeriatrics team has a well-established presence at these meetings and has formed close links to the trauma anaesthetic team. We also provide clinical experience and/or medical attachments for anaesthetic and geriatric specialist registrars.

Since XXX, the trust/board has been a regional tertiary referral centre for major trauma. Currently there are XXX geriatricians who provide liaison review of older patients with major trauma across the trust/board. There are also several perioperative geriatrics clinics (predominantly within GI and vascular surgery) with multidisciplinary team clinic meetings, and recently established peri-operative medicine tutorials(*delete/modify as needed*).

Outpatient clinics in osteoporosis and bone health are run by XXX consultants. There is no expectation for the postholder to contribute to the running of these clinics, but individual interests can be accommodated.

The department provides undergraduate teaching for XXX - and XXX -year medical students, provides online material and tutorials, and supports student examinations.

Secretarial support and desk space are provided within the XXX offices. There is also access to a small team office and computers located near the trauma unit.

This post will be managed under the XXX Division. The postholder can expect to receive peer support and educational, teaching and governance opportunities from the Geriatric Medicine department as well as from within Trauma and Orthopaedics. The Division of Medicine operates an active postgraduate education programme and all professionals allied to the Division are encouraged to participate.

Section 4: Location of place of work

Insert details of the department, location within the hospital, office space, and site map if appropriate.

Section 5: Duties of the post

(i) Clinical

- Emergency duties (including emergency work carried out during or arising from on call)
- Assessment of acute admissions
- Pre- and post-operative care
- Ward rounds
- Family communication
- Team communication
- Multi-disciplinary meetings about direct patient care
- Outpatient clinics
- Administration directly related to patient care e.g. referrals, notes, etc.

All employees need to ensure their mandatory training is kept up to date. All have an individual responsibility to adhere to the Infection Control Policy and to protect themselves, patients, visitors and colleagues from the risk of infection. Individual responsibility includes the requirement to attend training at intervals determined by the trust/board, and understand infection control issues as they pertain to their workplace. They will report any identified infection risk and take necessary precautions/ actions to prevent transmission.

(ii) Teaching

The postholder will be expected to help teach aspects of diagnosis, treatment and management of diseases relative to older people, to junior medical staff, nursing staff, other allied health professionals and medical students. The post holder will be expected to undertake training in how to teach (see study leave below).

(iii) Continuing Medical Education and Research

It is important for the postholder to keep their practice up to date, ensuring they are abreast of current knowledge/legislation and developments in their speciality. The appointee is expected to participate fully in CME/CPD and will be actively encouraged and provided with protected time to pursue career progression through the *Certificate of Eligibility for Specialist Registration (CESR)* process.

Time off for study leave and to attend courses may be granted at the discretion of the Clinical Director and in accordance with the trust/board policy. This is subject to leave being planned well in advance – at least six weeks' notice is required – and provided the clinical service is covered. A Study Leave Approval Form must be completed, and authorised by the Consultant and Clinical Director.

Participation in postgraduate activities of the University of XXX is encouraged, including its very active postgraduate training department, led by the Dean of XXX.

Both personal clinical research and participation in current research programmes is encouraged – in particular, existing research activities linked to trauma, orthopaedics and orthogeriatrics. For this, good clinical practice (GCP) certification should be maintained.

There are professionally staffed medical libraries in the Medical Postgraduate Centre at the hospital, with a rapid service between these and the University Library. The libraries are at the forefront of developments in electronic knowledge delivery, with a (chargeable) computer literature search facility, as well as links to other networks.

(iv) Clinical Governance and Audit

The postholder will be required to participate in and contribute to clinical audit in line with the requirements of departmental clinical governance.

The postholder will need a sound understanding of clinical governance and clinical risk. They will attend monthly clinical governance meetings as a core MDT member and routinely review the Trust/board's NHFD audit data to monitor performance.

The postholder will need to be aware of and comply with the local risk management strategies and ensure any incidents/ complaints are managed and reported according to Trust/board policy.

They will strictly observe a personal duty of care in line with local and Trust/board infection control policies when carrying out all interventions with patients.

(v) Managerial and administrative responsibilities

The postholder will be responsible for undertaking managerial duties associated with the care of patients and the administration of the department.

Administrative duties may include:

- Management of ward rotas
- Clinical governance meeting administration
- Collation and presentation of audit data at governance meetings

Under the provisions of GDPR 2018, it is the responsibility of each member of staff to ensure that all personal data relating to patients, staff and others to which they have access in the course of employment is regarded as strictly confidential. Staff must refer to the trust/board's Data Protection Policy regarding their responsibilities.

(vi) Additional information

Travel as necessary between hospitals/clinics will be required but a planned and cost-effective approach will be expected.

The successful candidate is strongly encouraged to attend departmental meetings.

(vii) Local trust/board policies

The postholder is required to follow Trust/board policies and procedures which are regularly updated including:

List local trust/board policies if appropriate.