

Sample Generic Work Schedule

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Training Programme: Obstetrics and Gynaecology run-through training
Specialty placement: Obstetrics and Gynaecology
Grade: ST4
Length of placement: 12 months
Employing organisation: St Elsewhere NHS Foundation Trust
Host organisation (if different from the above): N/A
Site(s): St Elsewhere District General
Educational Supervisor: Dr G. Smith
Clinical Lead/Rota Co-Ordinator: Dr C. Sultant
Name of Guardian: Dr J. Khan
Contact details of Guardian: g.angel@stelsewhere.uk , 01234 567890
Medical Workforce Department Contact Details: medicalstaffing@stelsewhere.uk , 0987 654321
Exception reporting: Trainees on this programme will be registered onto the exception reporting system used by this organisation. Log in details will be provided to trainees.
<p>Induction details:</p> <p>Include details for the local induction. This will be reflected as hours of work and paid accordingly during the trainee's placement.</p>
Mandatory Training requirements (Provide details of the required mandatory training)

Working pattern:

Shift rota

Rota Template:

Week	Mon	Tue	Wed	Thu	Fri	Sat	Sun
1	0900-1800				0900-2200	0900-2200	0900-2200
2	0900-1800		0900-2200	0900-1800	0900-1800		
3	2100-1000	2100-1000	2100-1000	2100-1000			
4	0900-1800	0900-2200	0900-1800	0900-1800	0900-1800		
5	0900-2200	0900-1800	0900-1800	0900-1800			
6		0900-1800	0900-1800	0900-1800	2100-1000	2100-1000	2100-1000
7				0900-1800	0900-1800		
8	0900-1800	0900-1800	0900-1800	0900-2200	0900-1800		

Your working pattern is arranged across a rota cycle of 8 weeks, and includes:

20 normal days – on normal days typically allocated doctors will attend clinics, maternity day units, elective caesarean patients, and antenatal and postnatal ward rounds.

7 long days (of which 2 are at the weekend) - on long days you will typically be doing an all day theatre list, antenatal and postnatal ward rounds.

7 night shifts (of which 2 are at the weekend) - on nights you will typically be providing emergency cover on the labour ward, maternity day unit, acute gynaecology and providing support to the on-call ST2 covering early pregnancy unit and acute gynaecology.

4 weekend shifts - on weekends you will typically be providing emergency cover on the labour ward, maternity day unit, acute gynaecology.

Average Weekly Hours of Work: 45.25

This figure is the **average weekly hours**, based on the length of your rota cycle. This may not represent your actual hours of work in any given week.

Your contract is a full-time contract for 40 hours.

As you are entitled to pay protection under Section 2 of Schedule 14 of the TCS, you will be paid a banding supplement of band 1A (50 per cent) to recognise the hours you work over 40 hours per week, and any unsocial hours worked, including at weekends.

Annual pay for role*

Basic Pay (MN37): **insert MN37 salary which will be between £31,841-£50,068**

Banding supplement (1A 50%): **insert banding cash amount based on basic pay point**

Total pensionable pay: **£XX,XXX (basic pay point)**

Total non-pensionable pay: **£XX,XXX (banding supplement)**

Total annual pay for this role: £XX,XXX (basic pay plus banding)

Should your placement be for less than 12 months, your pay will be pro-rated to the length of your placement.

*Please note- if you are entitled to pay protection in line with Schedule 2 of the TCS, then your actual salary may be greater than the above figure. Where this is the case, your salary will contain one or more additional pay protection elements so as to maintain your salary at its protected level.

Training Opportunities:

Insert the curriculum mapped outcomes that can be achieved whilst in this placement, together with the formal and informal learning opportunities available to the post-holder.

St Elsewhere NHS FT expects that the following should be able to be achieved whilst in this post, in line with the Royal College of Obstetricians and Gynaecologists expectation of educational progression:

- Curriculum progression (as evidenced in the log book on the ePortfolio) - progress with signing off intermediate competencies such that completion by end of ST5 is expected.
- Clinical skills - work on-call without direct supervision when competencies have been confirmed.
- Formative OSATS (SLE) showing evidence of training since last ARCP – operative laparoscopy (laparoscopic sterilisation/ simple adnexal surgery).
- At least 3 summative OSATS confirming competence by more than one assessor (can be achieved prior to the specified year) – hysteroscopy, laparoscopy, opening and closure of abdomen (gynaecology case).
- Evidence of at least one consultant observed summative OSAT for each item confirming continuing competency since last ARCP - caesarean section, operative vaginal delivery, basic ultrasound OSATS – at least one summative OSAT demonstrating ongoing competence, completed by a consultant or other accredited trainer, in transabdominal ultrasound scan of 8–12-week pregnancy, assessment of fetal size lie and presentation, assessment of liquor volume, placental assessment.
- Mini-CEX x8 and CbDs x8 - These should be obtained throughout the year, not just in the weeks before ARCP/RITA. The WBAs should reflect a level of complexity expected

at that year of training. Trainees should have a mixture of obstetrics and gynaecology WBAs and, in the first 5 years of training, there should be four in obstetrics and four in gynaecology. Thereafter, they should reflect the nature of the attachments undertaken.

- Reflective practice x8 - The number of reflective practice logs that have been revealed to the educational supervisor. Reflective practice logs should include reflection on all serious and untoward incidents and complaints that the trainee has been named in.
- Regional teaching - attendance at regional teaching programme as per regional guidelines.
- Team observation (TO) forms - TO1s at least twice per year as per RCOG recommendations.
- Clinical governance (patient safety, audit, risk management and quality improvement) - 1 completed and presented project, evidence of attendance at local risk management meetings.
- Teaching experience - Documented evidence of teaching (e.g. to medical students/foundation trainees/GPSTs), organising departmental teaching of medical students/FYs/ GPSTs.
- Leadership and management experience - evidence of departmental responsibility e.g. rota/ departmental meetings, working with consultants to organise (e.g. "office work") including clinical administration and dealing with correspondence, and including dealing with complaints.
- Presentations and publications (etc) - presentation outside own local department by ST4, Ensure CV is competitive for ATSM/subspecialist training interviews.
- Trainee evaluation form (TEF) - TEF completed on ePortfolio.

Departmental timetable

Employer to insert.

The following should be achievable through the formal and informal teaching opportunities provided above, with the following possible exceptions that are delivered outside the routine schedule.

<https://www.rcog.org.uk/en/careers-training/specialty-training-curriculum/core-curriculum>

Employers to insert possible exceptions.

Other:

In addition to the formal opportunities identified through the curriculum, opportunities may also arise in the post to gain experience teaching and supervising, and to participate in audits and quality improvement work.