

Specialist Registrar Recruitment Unit (Eastern)

Postgraduate Medical and Dental Education
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JOB DESCRIPTION

**EASTERN HIGHER SPECIALIST REGISTRAR TRAINING SCHEME
IN**

REHABILITATION MEDICINE

October 2004

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INTRODUCTION

This Specialist Registrar post in Rehabilitation Medicine commences either at the Colman Hospital, Norwich or the Lewin Unit at Addenbrooke's Hospital, Cambridge. The training programme lasts for 4 years. The appointee should have completed both parts of the MRCP or equivalent post graduate qualification.

PERSON SPECIFICATION

TRAINING PROGRAMME REQUIREMENTS	ESSENTIAL	DESIRABLE
Qualifications Basic Postgraduate	MRCP Part I & II Or equivalent	
Experience	Completed General Professional training A career pathway that demonstrates potential for consultant status	Experience in one or more of the following specialties: Rheumatology, Psychiatry, Neurology, Geriatrics
Ability Knowledge Clinical skills and Technical Skills	Good clinical skills Able to prepare and give a well organised presentation To be clear, fluent and articulate in communication in English	Strong interpersonal skills
Motivation	Committed to the treatment of disability	
Personality	To show evidence of initiative in CV	Patience and understanding
Audit		To have completed an audit project
Research	Able to critically assess published work	Ability to perform clinical and/or scientific research
Management Ability	To demonstrate organisation abilities	Knowledge of NHS management
Other Requirements	Registered with the GMC * Eligible for registration * To be considered for shortlisting you must provide the reference number received from the GMC to	

confirm that you have submitted an application, or if you are Sponsored by the Royal College, the letter from the College confirming that Registration will be issued upon the offer of appointment

Pre-employment health screening

Willing to enter and be bound by training agreement with the Postgraduate Dean

Prepared to rotate as specified

Car Driver or ability to arrange own transport

SUMMARY

There are 3 specialist registrar posts in rehabilitation medicine in the Anglia Region rotating between Addenbrooke's Hospital, Cambridge and at the Colman Hospital, Norwich. The training programme usually lasts 4 years. Applicants should have completed both parts of the MRCP or equivalent higher medical degree.

The posts are approved for higher medical training by the Joint Committee on Higher Medical Training and will lead to accreditation in Rehabilitation Medicine. Both the post and the postholder are regularly appraised, following JCHMT guidelines. Research leading to a higher medical degree will be encouraged, as will completion of the European Diploma in Rehabilitation Medicine.

The post is designed to offer comprehensive training in rehabilitation medicine. It takes advantage of opportunities available in specialist rehabilitation units in Norwich and Cambridge, intermediate and acute hospitals, disablement services centres and variety of community settings. In Cambridge there are many opportunities for combined research projects with the medical school and other university departments. In Norwich there is a collaborative multi-trust research and development programme and growing links with the University of East Anglia where the Department of Health Policy and Practice includes the combined occupational and physiotherapy school and departments of psychology and social work and new medical school.

CURRENT POSTS

The Eastern Specialist Registrar training rotation in rehabilitation medicine comprises the following 3 posts already approved by the SAC.

SpR 1

1	Addenbrookes NHS Trust Musculoskeletal rehabilitation service The Lewin Rehabilitation Unit Disablement Services Centre	Dr. J. R. Jenner MD FRCP Dr. S G B Kirker FRCPI MD Eur Dip PMR JCHMT: Rehab 4/132 EAN/084/001/N
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This part of the rotation provides core training in neurorehabilitation, prosthetics, locomotor and rheumatological rehabilitation. Modules of training are also available in sports medicine and cardiac rehabilitation.

The timetable includes one day per week for research and a half day for continuing medical education.

SpR 2 and SpR 3

2	Norwich Primary Care NHS Trust Colman Hospital Disablement Services Centre Julian Hospital Bowthorpe Road	Dr K A McGlashan MRCP Dr. B. Ramakrishna MB FRCS EAN/084/002/N EAN/084/003/N
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This part of the rotation provides core training in neurorehabilitation, prosthetics, locomotor rehabilitation (chronic back pain), amputee care, wheelchair and assistive technology, psychological aspects of rehabilitation and organisation of management and rehabilitation services in the community and 3 months secondment to Stoke Mandeville Spinal Injuries Centre.

Modules of training are also available in Urology, Community Paediatrics, Palliative Care and Pain Management and Neuropsychiatry.

The timetable includes one day per week for research and protected time for continuing medical education.

THE PROPOSED ROTATION

Each of the 3 specialist registrars will spend 29 months in Norwich, 16 months in Cambridge and 3 months at the Spinal Injuries Unit in Stoke Mandeville.

REHABILITATION MEDICINE

SPECIALIST REGISTRAR ROTATION FOR THREE DOCTORS

2 NORWICH POSTHOLDERS 1 CAMBRIDGE POSTHOLDER

	Year 1			Year 2			Year 3			Year 4		
Months	4	4	4	4	4	4	4	4	4	4	4	4
Cambridge SpR	← 16/12 Cambridge →			← 32/12 Norwich →								
Norwich SpR I	← 32/12 Norwich →						← 16/12 Cambridge →					
Norwich SpR II	← 16/12 Norwich →			← 16/12 Cambridge →			← 16/12 Norwich →					

Notes

1. In theory an SpR can join at any point in this rotation but less than 6/12 placement at either centre would be inappropriate. Sensible adjustment will need to be made according to the time of entry of each new SpR.
2. 3/12 secondment for spinal injuries should take place during the Norwich part of the rotation whenever possible. This module is best undertaken February - April inclusive.
3. There is opportunity at Addenbrookes to apply for 1 year SpR post in Stroke Medicine. Encouragement will be given to candidates who are seeking dual accreditation eg rehabilitation medicine and neurology or rheumatology or medicine for the elderly.
4. The rheumatology and musculoskeletal core training is done at Addenbrooke's only

It is expected that the components of the curriculum will be completed as follows:

Year 1:

- Prosthetics, orthotics, wheelchairs, seating
- Rheumatology and musculoskeletal (if Cambridge/Norwich/Norwich)

Year 2:

- Rehabilitation process

Year 3:

- Neurorehabilitation, spinal cord injury, environmental control assessments, social and community aspects of rehabilitation
- Rheumatology and musculoskeletal (if Norwich/Cambridge/Norwich)

Year 4:

- Management, research and psychological aspects of rehabilitation
- Rheumatology and musculoskeletal (if Norwich/Norwich/Cambridge)

The timetabled research and optional modules are inter-changeable according to the optional module availability

**SpR II and III
Rehabilitation training in Norwich**

Consultants

Dr K A McGlashan Consultant in rehabilitation medicine (whole time) based at the Colman Hospital with a special interest in neurorehabilitation.

Dr. B. Ramakrishna, Consultant in Rehabilitation Medicine (whole time) who runs the prosthetic/orthotics/wheelchair/environmental control service at the DSC at the West Norwich Hospital.

Weekly Programme of 2 Rehabilitation Medicine Consultants

(number of fixed sessions)

	Dr McGlashan	Dr. Ramakrishna
Multidisciplinary ward round	2	1.5
Rehabilitation Assessment Clinic	2	0
Case Conferences	1.5	0.5
Orthotics/Prosthetics/Wheelchair/Clinics	0	5.5
Rehabilitation referral assessment ward round	1	1
Teaching/clinical/audit	1	0
Community	0.5	1
Special Interest Clinic	0.5 Mus.Dys clinic	0.5 (Bot.Tox. Injs)
Admin	2	1

Junior medical staff 1 SHO in Rehabilitation Medicine

1. Services are provided at:

District Rehabilitation Centre, Colman Hospital, Norwich

(Caroline House/Jubilee House)

The 28 bedded unit provides rehabilitation for younger adults with complex disabilities. 15 beds for neurorehabilitation, 7 for brief and slow stream rehabilitation and 6 for continuing care. The unit also provides day patient, outpatient and outreach specialist rehabilitation services for central Norfolk strip of PCTs (N. Norfolk, Broadland, Norwich & S. Norfolk)

**Norwich Community
Hospital**

15 beds for amputee rehabilitation for all ages.

St. Michael's Hospital,
Aylsham, Norfolk.
Rehabilitation for
younger adults.

Day patient and outreach specialist
rehabilitation services for north
Norfolk.

Disablement Services Centre

This day-patient wheelchair, prosthetics and orthotics service covering all ages is based at the Julian Hospital, Norwich. In-patient rehabilitation following amputation is offered at Norwich Community Hospital. The environmental control assessment service is also run from the DSC. service

Kelling Hospital, High Kelling

Norfolk

Disablement Services Centre Lascelles Ward, Neuro-rehab, 2 ward rounds per month.

Queen Elizabeth Hospital

King's Lynn

Hospital clinic for people with amputation.

6. **Combined Clinics**

Bi-monthly combined clinic with Vascular Surgeons for people with amputations.

SPECIALIST REHABILITATION SERVICES, COLMAN HOSPITAL, NORWICH.

REHABILITATION MEDICINE SPECIALIST REGISTRAR TRAINING MODULES

If not doing a block module in prosthetics, wheelchairs and seating in the DSC, the SpR will divide their time between 2 core neurological rehabilitation modules, one of which is 'in-patient' based and the other 'community-based'. Optional modules will be conducted in parallel with the core module, in blocks of approximately 3 months duration according to the module being undertaken. The core timetables are outlined below:

DSC core module

	Monday	Tuesday	Wednesday	Thursday	Friday
9AM-1PM	Amputee rehab clinic	Orthotic clinic/ botulinum clinic	Amputee rehab clinic	<i>Research</i>	Ipswich amputee rehab clinic
2PM-5PM	Pre-amputation consultation clinic	Kelling hospital ward round	Amputee ward round	<i>Research</i>	Wheelchair clinic Env. Control assessments

SPECIALIST REGISTRAR TRAINING MODULES AT COLMAN HOSPITAL, NORWICH

REHABILITATION PROCESS (CORE ACTIVITIES)

1 in 4 NEUROREHABILITATION ON CALL

SpR 1

1-14.5 MONTH

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
	8AM-9AM		WARD ROUND AT CAROLYN HOUSE			
	9AM-1PM	OPTIONAL MODULES		OPTIONAL MODULES	CASE CONFERENCE	OPTIONAL MODULES
	1PM-2PM			HOME VISITS/ NEUROREHAB CLINIC~3/4 patients	RESEARCH	RESEARCH
ALTERNATE WEEKS	2PM-5PM	CME WARD WORK				

SpR II

14.5 -29 MONTH

		MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
	8AM-9AM					
	9AM-1PM	NEUROREHAB CLINIC~3/4 Pts at Jubilee	OPTIONAL MODULES	RESEARCH	NORWICH & NORFOLK UNIVERSITY HOSPITAL REFERRALS	OPTIONAL MODULES
	1PM-2PM					ADMISSION MEETINGS/ HOME VISITS
	2PM-5PM	CME	OPTIONAL MODULES	RESEARCH		

BOTH REGISTRARS WILL SPEND 3 MONTHS IN A SPINAL UNIT WHICH WILL ALSO INCLUDE 3 SESSIONS/WEEK OF OPTIONAL MODULES

CORE TRAINING

1. **Neurological Rehabilitation** with Consultant

Weekly outpatient clinics, assessment of patients in acute hospitals and community who are referred for inpatient rehabilitation: weekly ward rounds with consultant and SHO, weekly multidisciplinary case conferences for inpatients at Caroline House. Patients have a mixture of problems mostly relating to strokes, head injury, spinal cord damage and progressive neurological conditions.

2. **Amputee care, wheelchairs, assistive technology**

This training module may be based in the Norwich Disablement Services Centre with Dr. B. Ramakrishna FRCS, Consultant in Rehabilitation Medicine. The trainee would attend prosthetics outpatient clinics with consultant and prosthetist, inpatient ward rounds and therapy services weekly at Norwich Community Hospital, specialist and general wheelchair clinics and specialist orthotic assessments. Environmental control assessments would be attended as they arise. The directorate speech and language therapists, in conjunction with Clare Special School for children with physical disabilities, also conduct expert assessments for communication aids which the trainee would attend. The district medical physics department provides ad hoc support for special equipment and switches as well as routine equipment servicing.

4. **The Psychological aspects of Rehabilitation, Disability and Handicap**

The trainee has opportunities to work with the neuropsychology team within the District rehabilitation Centre (DRC). This includes assessment, counselling, cognitive rehabilitation, individual and group work and team work and training in behavioural management, particularly for people with head injury.

5. **Organisation and Management of Rehabilitation**

This is a continuing activity throughout the service with which the trainee will be involved. Neurorehabilitation has been developed in Norwich over the last 8 years through a clinical management team. This group develops operational policy continuously. The team process includes assessment, goal setting, review, use of outcome measures, conflict resolution and team member support. The trainee will be an integral part of the rehabilitation team and also of the Trust senior medical group. Management and IT courses are available locally. The Trainee will have access to local and nationally arranged IT and management courses.

6. **Research**

The trainee is encouraged to work for a higher medical degree. Support is given from the specialist rehabilitation services in conjunction with an appropriate university department.

OPTIONAL MODULES

Neurology Module

Attachment to the Neurology Department at the Norfolk and Norwich Acute Trust with Dr. J. Pilling and 3 consultant colleagues. Includes weekly CNS x-ray sessions, ward rounds, ward assessments, clinical meeting, general neurology outpatients, EMG clinic and botulinum toxin injection clinic.

Community Based Rehabilitation

The trainee will be able to work with 2 specialist neurological support workers, with the head injury co-ordinator and with therapists and other staff in social services day care and residential care and in patients homes. Further involvement with the tissue viability service will be part of this programme.

The trainee will also have an opportunity for work with local further education services, the disability employment advisory service and PACT, charitable agencies such as Papworth and the Prince of Wales Trust, local social services run pre-employment services, Headway and other self help groups.

Driving for Disabled People

The driving ability centre, in Thetford, is run by a local charity and serves Norfolk, Suffolk, Cambridge, Essex and beyond. The trainee will undertake medical assessments with the consultant prior to driving assessment and will attend assessment sessions at the centre.

Incontinence and Sexual Function

The trainee works with the community continence advisory service, urodynamics clinic (Mr. Webb, Consultant Urologist, Acute Trust) and male and female sexual function clinics.

This module overlaps with services to adolescents and many aspects of the core module. Sexual counselling for disabled people is available in Norfolk through SPOD (Sexual Problems of Disability) and RELATE.

School Leavers and Young Adults

We have started collaboratively, within the Trust, appraisal of statemented children at 14 years + in order to determine who will need which adult services. Initially this module will involve working with our three community paediatricians. There are now also regular handover clinics with the paediatricians (Acute Trust) at the local school for children with physical disabilities. Teachers and the psychologist from the children's directorate support personal development programmes.

Palliative Care and Pain Management

This module introduces the trainee to the palliative care team, multidisciplinary inpatient, daypatient and community care. People with terminal conditions are helped to have as good a quality of life as possible through skilled medication for symptom control and help and support over the difficult issues of diagnosis and progress. Within the module are opportunities to attend pain management clinics at the Norfolk and Norwich University Hospital NHSTrust and at the local hospice.

Neuropsychiatry and Epilepsy

This new module offers the trainee opportunities to work with the Neuropsychiatry and the psychogeriatric teams. The trainee will work in inpatient and clinic settings in both services, participate in clinical meetings, multidisciplinary meetings and domiciliary assessments with

psychiatrists, community psychiatric nurses and specialist therapists. Experience will be gained in the challenging behaviour unit and in epilepsy management. These areas are all highly relevant to the rehabilitation of people with acquired brain damage, particularly head injury.

Sensory Support

This service, provided by Norfolk County Council, is a new addition to the optional modules available in Norwich. There will be the opportunity to join with the Sensory Support team, which is a county-wide resource, in their assessment and training of people with a sensory disability.

ADDITIONAL ACTIVITIES

Education

1. Local training
Rehabilitation medicine CME sessions are timetabled monthly in Norwich.
2. Multidisciplinary educational days are arranged biannually on a regional basis
3. Special courses

The specialist registrar is encouraged to attend meetings of BSRM, SRR and BSR, and to participate in training courses such as orthotics at Strathclyde University and Rehabilitation Medicine at Nottingham University.

Audit

This is undertaken yearly in the DSC, quarterly in the DRC (neurorehabilitation) and quarterly with the multidisciplinary team. The trainee will undertake at least one audit project independently.

Teaching

The School of Health Policy and Practice based at the University of East Anglia provides the specialist trainee an opportunity to be involved in teaching medical, nursing and therapy staff and students throughout his/her time in the post.

DUTIES OF THE POST

1. Contribution to day to day management of rehabilitation for inpatients and day patients.
2. Rehabilitation Medicine on call rota 1:4.
3. Responsibility for correspondence, admission, progress and discharge summaries.

4. Participation in supervision and support for junior medical staff. One full-time SHO (4 month rotation) on general medical rotation.
5. Participation in assessment of patients referred from acute and other hospitals and community.
6. Contribution to liaison with other hospitals, trusts, districts, statutory services and other agencies.
7. Participation in audit, training and educational programmes in directorate and trust.
8. Participate in preparation of strategic development plans for specialist rehabilitation in Norfolk.

LOCATION

Norwich is a city with approximately 125,000 population, with much of historical and geographical interest and a fair degree of industry and commerce. It is situated about 20 miles from the East Coast, 110 miles from London and 65 miles from Cambridge.

Historically, it is the best documented city in England, with an exceptional balance between development and preservation. Its civic amenities provide for a large area of East Anglia and are generous for a city of fairly small size. Entertainment and the Arts are well catered for with one of Europe's most thriving provincial theatres. There is a full range of sporting and recreational facilities and the Norfolk Broads are nearby. The East Norfolk Coast is a combination of resorts, National Trust coastlines and wildlife sanctuaries.

Norwich has a large number of schools, including private fee-paying schools and comprehensive schools which have a wide varied curriculum. The University of East Anglia is situated on the western edge of the City.

The service covers a large rural area of approximately 1,800 square miles in the central part of Norfolk; from Wells on the North Norfolk coast to Thetford in the South and from Fakenham in the West to Acle in the East. The Trust's area of responsibility includes four District Councils: Norwich, North Norfolk, Broadland and South Norfolk, along with part of Breckland. The population served is approximately 550,000.

October2004

SpR 1 Rehabilitation training in Cambridge

BRIEF DESCRIPTION OF ADDENBROOKE'S NHS TRUST

Addenbrooke's is a thriving, modern NHS hospital with more than 6,000 members of staff, 1,087 beds and in this year, a budget of £247 million. In 2002/03 more than 55,000 men, women and children were treated as inpatients, there were 59,000 attendances at A&E and 369,000 visits to outpatient clinics.

The hospital fulfils a number of important functions. It is the local hospital for people living in the Cambridge area, it is a specialist centre for a regional, national and international population, it is the teaching hospital for the University of Cambridge, and it is a world-class centre for medical research.

The Trust is now a flagship NHS hospital working in partnership with the University and other major scientific and charitable organisations, aiming to create a biomedical campus for research and scientific development of international stature.

Addenbrooke's shares its site with a range of other organisations including the University Clinical School, the Medical Research Council, the Wellcome Trust, Glaxo SmithKline and the National Blood Authority. Building is currently underway on the University of Cambridge Hutchison/Cancer Research UK (CRUK) Cancer Centre, which will house 30 research groups using the latest techniques to target cancer.

Addenbrooke's commitment as part of the wider health community is to examine, evaluate and explore new ways of working: with our partners in health services, social care, and the city; with each other as colleagues; and with patients and the public. The agenda for modernisation drives forward this commitment; modernisation is not perceived as a separate issue, but rather as something which informs the whole structure, thinking and culture of the Trust.

Our relationship with our patients and our community is as an open, accountable and responsive organisation that fosters patient and public involvement as crucial to the development of a modern hospital fit for the 21st century.

We pride ourselves on the teamwork, energy and commitment of our excellent staff - they are our most important asset. Recognising this, we have taken a positive approach to supporting them in their work through schemes to help their work/life balance, improvements in the working environment and initiatives to make it easier for staff to explore new career opportunities and to develop professionally and personally.

Mission and values

Purpose

The purpose of Addenbrooke's NHS Trust is to provide:

- * accessible, high-quality health care to the people of Cambridge and the surrounding area;
- * specialist hospital services to the people of the east of England and beyond;
- * support for the education and training of clinical professionals;
- * a workplace where all staff have access to continuing learning and personal development;
- * support for research and development, generating new knowledge that will lead to improvements in population health and in health care delivery;
- * a contribution to economic growth, sustainable communities and a

good quality of life for those we serve.

Vision for the Trust

Addenbrooke's NHS Trust is an academic clinical centre of international stature, contributing to the health and well-being of the communities we serve through the provision of care; the generation of new knowledge; and the education of healthcare professionals."

UNIVERSITY OF CAMBRIDGE SCHOOL OF CLINICAL MEDICINE AND DEPARTMENT OF MEDICINE

The School of Clinical Medicine admits about 130 students a year to the clinical course. It has introduced the first MB.PhB programme in any UK medical school: selected students complete both their medical degree and a PhD in a five year course. In addition it has instituted a "parallel track" general practice based clinical course for limited numbers of students.

The head of the Clinical School is the Regius Professor of Physic, Sir Keith Peters, and the undergraduate programme is directed by the Clinical Dean, Dr Christopher Allen. Also on the Addenbrooke's campus, in addition to the teaching hospital and the Clinical School, are the Medical Research Council's (MRC) research centre which contains the Laboratory of Molecular Biology, and Research Council Interdisciplinary Research Centres - in Protein Engineering and Brain Repair. The campus is emerging as one of the most favoured sites for medical research in the UK. In the most recent University Funding Council Research Selectively Exercise, Cambridge shared the highest score for any Medical School in the country.

The University Department of Medicine is one of 10 constituent departments of the Clinical School. It consists of a number of divisions, each involved in research related to human disease. The Department has a total of around 200 personnel (including research staff). In addition to its established staff, this includes about 60 graduate students, 15 holders of clinical research training fellowships, and 10 senior clinical and non-clinical fellowships. The main source of the department's research funding is its grant income from the MRC and research charities (which currently amounts to about £1.5 million per annum). The Neurology Unit, Clinical Pharmacology Unit, Wellcome Immunology Unit and Anaesthetics Unit are also part of the Department, although geographically separate from its main accommodation on level 5 of the hospital. The department's clinical staff work in Addenbrooke's Hospital in close association with their NHS colleagues, with whom they are aligned by specialty interest. The current Department Chairman is Professor Patrick Sissons.

GENERAL INFORMATION

Within the University City of Cambridge is to be found an unrivalled range of educational facilities and diverse cultural, sporting and other leisure activities. The Arts Theatre is being rebuilt and there are many musical activities to enjoy. The Fitzwilliam Museum is world renowned.

For children, there is a full range of public and private educational institutions covering all age groups.

Communications with the rest of England have much improved in recent years, particularly by road, so that Cambridge is now served by the national motorway network. Regular train services to King's Cross have a journey time of under one hour.

In 1989, a shopping Concourse was opened at the Hospital with excellent shopping facilities - an Advice Centre, Bank, Café, Clothes Boutique, Dry Cleaners, Financial Advisory Services, Florist, Hairdressing Salon, Mini Market, Newsagents/Confectioners, Shoe repair/Gift shop, Solicitor and Travel Agents.

In addition, the Frank Lee Leisure Centre provides comprehensive facilities for swimming, squash, a multisports hall, a floodlit outdoor multisports facility and a Profiles Fitness Suite.

2 Lewin Rehabilitation Unit (10) beds

Consultants

Dr J R Jenner, Consultant in Rehabilitation Medicine (1/2 time) and Rheumatology (1/2 time). Service Centre Director of the Lewin Rehabilitation Unit with interest in musculoskeletal rehabilitation, management of spinal pain and neurophysiology .

Dr S G B Kirker, Consultant in Rehabilitation Medicine (full time). Director of the Disablement Services Centre with a specialist interest in neurological rehabilitation and management of spasticity. (1/2 time Neurological Rehabilitation and _ Disablement Services).

Junior Medical Staff 1 SHO WTE working almost exclusively with stroke service.

Weekly programme of 2 main consultants based at Addenbrookes' in Cambridge

(No of fixed sessions)

	Dr Jenner	Dr Kirker
Multidisciplinary Ward Rounds	1	1
Rehab Assessment Clinic	0.5 (musculoskeletal)	1 (neurorehab)
Case Conferences	As required	1
Rheumatology Out patients	3.5	0
Sports Injury Clinic	1	0
Teaching	1	1
Orthotics/Prosthetics/Wheelchair Clinics	0	4
Special interest Clinic	0.5 (EMG)	
Research	0.5	0.5
Rehab Referral Assessment Ward Rounds	0	1

Services Provided at:

The Lewin neurorehabilitation Unit

This 10 bedded unit is directed by Dr Kirker and admits patients requiring intensive rehabilitation from the neurology and neurosurgical wards. The unit employs a highly experienced multidisciplinary team of physiotherapists, occupational therapists, speech therapists, psychologists and social workers who work closely with the rehabilitation nursing team. There are approximately one to 2 new admissions per week. The SpR is expected to oversee the day to day medical care and rehabilitation of the patients in the unit.

Low Back Pain Management Programme

This programme is run on a residential / out patient basis. It comprises a 3 week intensive programme of graduated exercise and instruction on self help to enable the patient to manage their low back pain. The programme is run by physiotherapy, occupational therapy and psychology staff and is overseen by Dr Jenner. The SpR will be expected to take an active part in assessment and follow up of these patients as well as attending the weekly review.

Out Patients

The SpR's participate in at least 2 outpatients per week seeing 2 – 3 new patients and 6 – 10 return patients in the Rheumatology / low back pain / sports injury clinics and neurorehabilitation assessment clinic. All these out patients are supervised by one of the consultants.

Combined Clinics

Low Back Pain Clinic. A combined clinic with Mr Laing (Consultant Neurosurgeon) who has an interest in spinal surgery is held monthly in conjunction with Dr Jenner.

The Stroke Unit

The 25 bedded acute stroke unit is situated adjacent to the Lewin Neurorehabilitation Unit. Patients are admitted to these beds as soon as possible after being admitted to Addenbrookes Hospital with a stroke. These beds are run by Dr Warburton, Consultant in Stroke Medicine and Professor Baron, Professor of Stroke Medicine. The unit has its own SpR post for a limited tenure of a year. SpRs from disciplines interested in stroke medicine are encouraged to apply for this one year optional module which would count towards CCST in rehabilitation medicine. This post is not a guaranteed option on this rotation and can be applied for in open competition with other interested SpRs usually from care of the elderly or neurology. For SpRs not wishing to apply for this post opportunities are available to attend ward rounds and gain experience in stroke medicine.

Suffolk Brain Injury Rehabilitation Centre (Icanho Centre, Stowmarket)

This day rehabilitation service has been created for people between the age of 18 and 65 with acquired brain injury. This unit has a full complement of physiotherapy, occupational therapy and social work staff with medical and neuropsychology input provided by the Lewin Rehabilitation Unit. The SpR is involved on one day a fortnight in assessing new patients and providing medical input and discharge planning for the patients attending the unit. This is a developing service and the SpR is expected to take an active part in planning future development with management.

Core activities		16 months				
		Monday	Tuesday	Wednesday	Thursday	Friday
Week 1 & 3	9am-1pm	Rheumatology clinic				
Week 2,4 & 5	9am-1pm	Rheumatology clinic			Neurorehab clinic	
	1pm-2pm			Grand round		
Week 1 & 3	2pm-5pm	TBI clinic		Lewin ward round	Referral round	
Week 2,4 & 5	2pm-5pm			Lewin ward round	Referral round	

Supervising Trust fellow and Lewin in-patient management / in-patient referrals / discharge summaries / undergrad teaching / audit

**4
months**

Acute hospital neurorehab

	Monday	Tuesday	Wednesday	Thursday	Friday	
Week 1 -5	9am-1pm	Rheumatology clinic	Research		Referral round	Research
	1pm-2pm			Grand round		
Week 1 & 3	2pm-5pm	TBI clinic	Neurology teaching	Lewin ward round		
Week 2,4 & 5	2pm-5pm		Neurology teaching	Lewin ward round	Neurorehab clinic	
	5pm	NCCU round				

Supervising Trust fellow and Lewin in-patient management / in-patient referrals / discharge summaries / undergrad teaching / audit

Neurosurgery & NCCU teaching/theatre/EMGs/neuropsychology, visits to other services: Icanho, Oliver Zangwill, Peterboro, Papworth, Headway

Prosthetics / orthotics / wheelchairs / ECUs

**8
months**

	Monday	Tuesday	Wednesday	Thursday	Friday	
	8am-9am		DSC meeting			
Week 1 & 3	9am-1pm	Rheumatology clinic	DSC clinic	DSC clinic		Pboro clinic & ECUs
Week 2,4 & 5	9am-1pm	Rheumatology clinic	DSC clinic	DSC clinic	Neurorehab clinic	Pboro clinic & ECUs
	1pm-2pm			Grand round		
Week 1 & 3	2pm-5pm	TBI clinic	Research	Lewin ward round	Referral round	Research
Week 2,4 & 5	2pm-5pm	Orthotics	Research	Lewin ward round	Referral round	Research

Supervising Trust fellow and Lewin in-patient management / in-patient referrals / discharge summaries / undergrad teaching / audit

Observe at joint foot clinic, child development clinic, scoliosis clinic. Present case at Norwich prosthetic teaching sessions

Musculoskeletal

**4
months**

	Monday	Tuesday	Wednesday	Thursday	Friday
Week 1 & 3	9am-1pm Rheumatology clinic	Research	Sports injury		sports injury
Week 2, 4 & 5	9am-1pm Rheumatology clinic	Research	Sports injury	Neurorehab clinic	sports injury
	1pm-2pm		Grand round		
	2pm-3pm Back Programme	Research	Lewin ward round	Referral round	
	3pm-5pm Rheum teaching				

Supervising Trust fellow and Lewin in-patient management / in-patient referrals / discharge summaries / undergrad teaching / audit

Combined back clinic with neurosurgeon. Observe at pain clinic. Epidurals list

The core modules

- 1 **Neurological Rehabilitation**
 - i) Daily in-patient experience obtained from a 10 bedded hospital based multidisciplinary neurorehabilitation unit
 - ii) Day case community based neurorehabilitation at Stowmarket (2 sessions/fortnight)
 - iii) Out patient experience in the fortnightly assessment clinic

- 2 **Amputee Care, Wheelchair and Assistive Technology**
 - i) Weekly clinic in prosthetics
 - ii) Weekly clinic in orthotics for 2 months
 - iii) Weekly clinic in special seating

- 3 **Rheumatological and Locomotor Rehabilitation.**
 - i) Weekly spinal clinic
 - ii) Monthly combined spinal clinic with neurosurgeons.
 - iii) Weekly rheumatology out patients.
 - iv) Weekly ward rounds, assessment and post discharge clinic of low back pain management programmes.
 - v) 1 in 4 on call rota with rheumatology SpRs, seeing emergencies from ward or from GP referrals.

Optional Modules

Sports Medicine

The sports injury clinic provides a service mainly for acute sports injuries less than 24 hours old. A small number of chronic injuries are also seen with GP referral letters. The SpR will usually see one chronic case and 6 – 10 new acute injuries under the supervision of one of the clinical assistants specialising in Sports Injuries.

Cardiac Rehab Module (6 sessions)

The SpR is expected to follow a coronary patient from admission to the coronary care unit through the coronary rehabilitation programme in association with Mrs Fiona Lough who runs the cardiac rehabilitation programme.

Environmental Control

The SpR accompanies Dr Kirker on domiciliary visits for environmental control as and when these referrals are made.

Duties of the Post

1. Contribution to day to day management of rehabilitation for inpatients and day patients.
2. Responsibility for correspondence, admission, progress and discharge summaries.
3. Participation in supervision and support for junior medical staff. One full-time SHO on general medical rotation.
4. Participation in assessment of patients referred from acute wards and other hospitals and community.
5. Contribution to liaison with other hospitals, trusts, districts, statutory services and other agencies.
6. Participation in audit, training and educational programmes in directorate and trust.
7. Attendance and active participation at clinical governance, service delivery unit and audit meetings.

Teaching

Educational Programme

The educational programme for the SpR is made up of 3 components

- 1 Local Training
This occurs on the weekly educational half day and comprises
 - i) a weekly joint meeting with the rehabilitation team including case presentations and journal club and 1 session /month dedicated to neurorehabilitation.
 - ii) Visits to associated units within the trust eg neurology, neurosurgery, urology etc.
- 2 Special courses
The SpR is encouraged to attend specialist courses to cover areas not fully covered in the training programme eg orthotics courses at Strathclyde University.

Research

The SpR is expected to be actively involved in research and is encouraged to take a year out of clinical work to study for an MD thesis.

Research Grants

Dr Jenner and Dr Kirker are joint grant holders for a research grant from the Stroke Association to study the effect of treatment training on fitness and outcome in stroke rehabilitation.

Research Interests

- 1 Balance Mechanisms after stroke.
- 2 Development of service for spinal pain.

Library Facilities

The Addenbrooke's Hospital medical library is situated close to the Lewin rehabilitation unit in the middle of the hospital complex and provides an unrivalled facility with journals, books as well as computerised learning facilities.

Office Accommodation

The SpR has access to a junior doctors office situated within the unit.

Teaching opportunities

The SpR is expected to provide weekly teaching for the undergraduate medical students who are attached to the Lewin Rehabilitation throughout the year.

Audit

- i) Alternate monthly multidisciplinary audit meetings are held in the Lewin Rehabilitation Unit.
- ii) Monthly audit meetings are also held in the DSC.

MAIN TERMS AND CONDITIONS OF EMPLOYMENT

1 BASIS OF APPOINTMENT

This appointment is on a whole-time basis, however applicants who wish to job share or undertake flexible training will be considered.

2 SALARY

The salary is within the Specialist Registrar salary scale.

3 HOURS

The shift and rota patterns for each placement of the rotation will be confirmed to you by the Trust at which you will be working. All such working patterns should comply with the New Deal and both Trusts and Specialist Registrars are obliged to work towards this aim.

4 OUTSIDE EMPLOYMENT

Specialist Registrars are reminded that they may not engage in any outside employment including locum work when on annual leave etc without the written consent of their employing Trust or Health Authority. They must also declare to their employing Trust/Authority any interests they may have which affect Trust/Authority policies and decisions.

5 COVER

The Specialist Registrar will be expected in the normal run of his/her duties, and within his/her contract to cover for the absence of colleagues and during occasional emergencies and unforeseen circumstances without additional remuneration.

6 RESIDENCE

The post is non-resident, but residence must be sufficiently near the hospital for each placement for the general duties to be undertaken without Health and Safety implications arising. Residence must also be sufficiently near for on-call duties to be undertaken, but there may also be a requirement to be resident when on-call in accordance with local policy or the requirements of the training programme. If the holder chooses to live in hospital accommodation, and it is available, a deduction from salary for lodgings will accordingly be made in accordance with the Terms and Conditions of Service.

7 STUDY LEAVE

Study leave will be granted in accordance with paragraphs 250-254 of the Terms and Conditions of Service for Hospital Medical and Dental Staff, subject to local conditions as agreed by the Trust Study Leave Committee. Applications must be made prospectively and are subject to the approval of the Trust Study Leave Committee. Trainees should be aware that the overall study leave budget is finite in each Trust and that study leave allowances and arrangements may vary between different hospitals on a training rotation.

8 RELOCATION

Removal expenses will be paid in accordance with the set limit of the Deanery Relocation Policy for Specialist Registrars. This information is attached in Appendix A. Those on Fixed Term Training Appointments or Locum Appointments are subject to the provisions of their employing Trusts.

9 REGISTRATION

The holder is required to maintain full/limited registration with the General Medical Council/General Dental Council. Medical Staff are advised to continue membership of one of the Medical Defence Organisations.

10 NATIONAL TERMS AND CONDITIONS

This appointment is governed by the Terms and Conditions of Service for Hospital Medical and Dental Staff (England and Wales) and by appropriate local terms and conditions, as amended from time to time.

11 CRIMINAL CONVICTIONS

This post is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are, therefore not entitled to withhold information about convictions which for other purposes are 'spent' under the provisions of the Act and in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Employer. Any information given will be confidential and will be considered only in relation to an application for positions to which the order applies. Checks will be made with local police forces over the possible criminal background of those applying for posts with substantial access to children (pending new arrangements through the Criminal Records Bureau).

12 NOTICE

The appointment is subject to three months notice of termination of appointment by either side.

13 IONISING RADIATION

The postholder may be involved in directing exposures under the terms of the Ionising Radiation (Protection of persons Undergo Medical Examination or Treatment) Regulations 1988. If he/she does not already hold an appropriate qualification under these Regulations, he/she may be required to attend training in order to obtain this, and to present a copy of the appropriate certificate to the employing Trust at the start of the appointment.

14 PENSION

You will be subject to the provisions of the NHS Pensions Scheme unless you opt out. The current rate of contribution is 6%.

15 CONFIDENTIALITY

In the course of your duties, you will have access to confidential material about patients, members of staff and other Health Service business. On no account must information relating to identifiable patients be divulged to anyone other than authorised persons. Similarly, no information of a personal or confidential nature concerning individual employees should be divulged to anyone without the proper authority having first been given. Failure to observe these rules may lead to further action under local Trust procedures. This requirement is not intended to conflict with the rights and principles under whistleblowing and data protection legislation.

16 DETERMINATION OF ROTATIONS

The job description will detail as far as possible the rotation applicable to individual trainees at the time of appointment. During the course of the training programme, it may be necessary for training or other reasons, for the Programme Director to make changes to the rotational arrangements. In determining amendments to the rotation, any proposed changes will be discussed with the trainee and consideration given to individual preferences. In the event of further representations from the

trainee, the Dean has the authority to determine the placements and to require a trainee to undertake the revised rotation.

17 ASSESSMENT OF PROGRESS

Trainees are required to participate in assessment and other review processes in accordance with Deanery procedures, with rights of appeal where progress is not judged satisfactory. Following an adverse assessment, the Dean has the authority to require a trainee to repeat training experience at the same or a different location, or to withdraw a trainee from a training programme in accordance with the Deanery review panel or appeal committee decision.

18 PLACEMENT OF SPECIALIST REGISTRARS FOLLOWING NOTIFICATION OF THE COMPLETION OF TRAINING

Under the national provisions Specialist Registrars can in certain circumstances remain in the grade after they have been notified that their training is complete and are no longer pursuing either a training programme leading to a CCST or undertaking sub-speciality training. It may not be appropriate for them to remain in the final placements they occupied before the award of the CCST. The Postgraduate Dean will, therefore, identify an appropriate location in the grade which will allow the Specialist Registrar to maintain their skills while seeking a consultant post, taking into account the expressed educational needs and personal wishes of the Specialist Registrar.

Appropriate locations will include:-

- A placement at the beginning of the rotational programme.
- Vacancies elsewhere in the programme, including those where trainees are undertaking research, or where cover is required.

19 RESEARCH AND SPECIALIST REGISTRAR TRAINING

Trainees wishing to undertake research during higher specialist training must submit details including the timing and duration of the research in writing to the Postgraduate Dean for consideration. In the case of a doctor wishing to undertake research before starting a training programme, the duration of research must be agreed with the Dean before the NTN/VTN is awarded.

20 CAR DRIVING

The post holder may be required to be a car driver/owner in accordance with the person specification. Disabled candidates able to meet this requirement by other means, or following reasonable adjustments to the job description, will be considered.

21 OCCUPATIONAL HEALTH

The successful candidate will be required to complete an occupational health questionnaire, and may also be required to supply further information to the Occupational Health Service or to attend a health interview. Offers of employment will not be confirmed until satisfactory occupational health clearance has been obtained. A further occupational health assessment may be required at the commencement of each separate employment during the training programme.

22 ANNUAL LEAVE

Entitlements and procedure for taking annual leave will be in accordance with Terms and Conditions of Service for Hospital Medical and Dental Staff and local terms and conditions. At each placement, the trainee will be allowed pro rata leave for the amount of time, spent working at that Trust. Days in lieu of Bank Holidays should also be taken at the Trust where the Bank Holidays were worked. Period of annual leave cannot be transferred between Trusts and must be taken before the end of each placement.

23 INFORMATION TECHNOLOGY

As an employee of a NHS Trust, you are expected to develop the IT skills necessary to support the tasks included in your post. You will, therefore, be required to undertake any necessary training to support this. This is to take account of the increasing need for all staff to be able to use the information systems relevant to their post.

24 TRAINING NUMBERS

Where entry to the training programme requires the allocation of a training number, continued employment will be dependent on the trainee continuing to hold their individual number.

25 HEALTH AND SAFETY

It is the general duty of every employee to take reasonable care for the health and safety of himself/herself and others, including the use of necessary safety devices and protective clothing and to co-operate with management in meeting its responsibilities under the Health and Safety at Work Act. Any failure to take such care or any contravention of safety policy or managerial instructions, may result in disciplinary action being taken.

26 SICKNESS ABSENCE

All sickness absence must be reported to the appropriate person in accordance with instructions issued by the individual Trusts. Full details of the allowances and the conditions governing the allowances are set out in the Terms and Conditions of Service.

LOCUM APPOINTMENT FOR TRAINING POSTS

Candidates should be aware that it cannot be guaranteed that training obtained in a Locum Appointment for Training post can be counted towards the CCST. Normally prospective approval for up to one year, can be sought from the College when a Type I Specialist Registrar post has been obtained following a locum appointment.

Following interview for such a post the successful candidate will be given a form which will help the College decide whether this post can count towards the CCST should you subsequently be appointed to a Type I Programme.

POSTGRADUATE DEAN'S APPROVAL

The Postgraduate Dean confirms that this placement and/or programme has the required educational and dean's approval.

October 2001

RELOCATION POLICY & PROCEDURE FOR SPECIALIST REGISTRARS

EASTERN DEANERY

POLICY

1 SCOPE

- 1.1 This policy will be applicable to all doctors in training as Specialist Registrars within the Eastern Deanery. Those on fixed term training appointments will be subject to the provisions of the employing trusts.

2 ELIGIBILITY

- 2.1 To be eligible for relocation assistance under this policy the following criteria relating to change of residence must be satisfied:-

- the main residence of an employee on appointment must not be within reasonable travelling distance from their new normal place of work.
- the employee must be relocating to a new main residence, which is within reasonable travelling distance of their new normal place of work (not applicable if claiming excess travel in lieu of removal expenses).

A reasonable travelling distance will normally be regarded as 25 miles or 45 minutes travelling time.

This definition may be varied by local agreement where on-call or other aspects of the post require residence closer to the new place of work.

- 2.2 Employing Trusts and trainees accept that there may be a requirement to move than once or incur excess travelling to complete posts on a rotation.

Trainees who relocate within the scope (2.1) above, whose new home is a greater distance from the subsequent trusts than the original home will normally have future eligibility limited to the original home, unless it is more convenient for the whole rotation.

- 2.3 Confirmation will be required from trainees that no financial assistance has been given to themselves, their spouse, partner or other person normally living with them from any other source in respect of the relocation. Should this be the case, support available will be subject to review of the individual circumstances.
- 2.4 The conditions of the policy as stated should be accepted by the trainee.

3 CONDITIONS

- 3.1 All costs for which reimbursement is sought, should have been reasonably incurred and be accompanied by relevant receipts or invoices, and be claimed in accordance with the policy. Claims should be signed by an authorised officer.
- 3.2 A signed undertaking will be required from all employees claiming relocation expenses that the employee undertakes to refund payments received, if they leave of their own volition within 2 years, or prior to the end of a fixed term contract. These repayments are linked to length of service as follows:

- 100% for employees leaving within 6 months
- 75% 6-12 months
- 50% 12-18 months
- 25% 18-24 months

The Trust will have the right to waive repayments in exceptional circumstances.

- 3.3** In the event of a trainee being unable to relocate within one year of commencing appointment, the situation will be reviewed in the light of their training programme.
- 3.4** Trainees will be required to provide evidence, as requested, that reasonable efforts are being made to relocate.
- 3.5** It is the aim of this policy to provide financial assistance for relocation to a property of a similar standard to that previously occupied (whether owned or rented). Where the doctor chooses to move to a property, which is substantially different, the amount of assistance may be reduced in discussion with the individual.

4 ALLOWANCES

The following categories of expenditure and maximum allowances will be applicable to eligible doctors.

<u>Category</u>	<u>Limit (inclusive of VAT)</u>
A Homeowners	Up to £6000
B Tenants who have been homeowners within the previous 12 months, and wish to purchase a further property	Up to £3000
C Tenants	Up to £1000

Miscellaneous expenses will be limited to £500 within the overall maximum above.

<u>Expenditure</u>	<u>Category</u>
(1) Legal Fees	A & B
(2) Estate Agents/Auctioneers fees/Private Advertisement	A
(3) Removals & Storage of furniture	All
(4) Temporary accommodation	A

Payment will be made for the lesser cost of the following:-

- Continuing expenses in the previous area (i.e. mortgage/community charge)
- and temporary accommodation (hospital or private) in the new area.

- (5) Travel paid at public transport rates, second class rail or bus fare, for the following:
- (i) Up to three return journeys while searching for accommodation All
or to superintend the move.
- (ii) Weekly return journeys where a previous property is retained.
- (6) Travel paid at an appropriate rate (normally public transport rate), for the following: A

i) Excess daily travel, for those practitioners eligible to move in accordance with section 2 but choosing to travel the excess mileage daily.

(7) Miscellaneous expenses All
Reasonable expenses associated with the relocation.

5 PROCEDURE

- 5.1** Applications for assistance in relocation should be completed and returned with acceptance of the post.
- 5.2** Claim forms should be submitted, as soon as possible following expenditure, to the Medical Staffing Department of the Employing Trust.
- 5.3** As VAT may be reclaimed by the Trust doctors should discuss with the appropriate officer the possibility of invoices being directed to the Trust.

March 2004