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**JOB DESCRIPTION**

**ACADEMIC CLINICAL FELLOWSHIP**

**IN RESPIRATORY MEDICINE**

**AT CT1, CT2 OR ST3 LEVEL**

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**HEALTH EDUCATION ENGLAND EAST OF ENGLAND**

**AND**

**UNIVERSITY OF EAST ANGLIA, FACULTY OF HEALTH**

## ACADEMIC CLINICAL FELLOWSHIP IN RESPIRATORY MEDICINE AT CT1, CT2 OR ST3 LEVEL

**OVERVIEW OF THE POST**

Health Education East of England and the UEA Faculty of Medicine and Health Sciences (FMH) invite applications for the posts of Academic Clinical Fellow in Respiratory Medicine starting before 31/3/17. The post offers trainees of outstanding potential an excellent research and clinical environment to embark upon an academic career. As well as solid clinical training the candidate will have an outstanding opportunity to develop the skills and experience required to prepare and complete a training fellowship to undertake a higher degree (PhD or MD). This post attracts an academic national Training Number and is for a duration of 3 years with run-through training to consultant level.

**ACADEMIC RESPIRATORY TRAINING**

**Location**

Norwich Medical School, Norwich Research Park, University of East Anglia, Norwich.

**Time allocation**

25%

**Training in Research Methods:**

The fellow will be expected to complete Good Clinical Practice Training

UEA's research training programme has the following objectives:

1. To provide a structured and co-ordinated generic academic training programme which will fulfil the requirements and standards set by the NIHR MSc (120 credits) level equivalent research taught programme with option to register to MSc (Res) degree

2. To provide a nurturing learning environment to accommodate the academic fellows’ individual needs

The programme will allow trainees to obtain either MSc degree (optional) or a total of 120 credits over 2-3 years. It consists of 4 core modules (four out of five by choosing either further quantitative or qualitative research methods module) and 2 optional modules (out of 5).

Core modules are (1) Introduction to Research Methodology, (2) Further Quantitative Research Methods or Further Qualitative Research Methods; (3) Research Governance and Ethics, and (4) Writing Grants and Refereeing Papers. The trainee can choose two modules which will be most relevant to him/her out of five optional modules including self-directed literature review, systematic review/research synthesis, advanced statistical methods, and health economics modules. The trainee can complete a dissertation in the third year of the programme if an MSc degree is desired.

Additional training days and courses are also provided which are designed to facilitate the learning opportunities for other transferable skills essential for researchers/clinical academics. These will provide generic skills only and provision of specialty specific research training will be arranged by academic supervisors based on the individual trainee’s requirement to suit the nature of the trainee’s academic field.

**Research Environment**

The fellow will have the opportunity to join a dynamic group of clinical researchers driven to undertake the best possible clinical research designed to make a tangible benefit on the lives of patients with respiratory disease. The group comprises Andrew Wilson (Professor of Respiratory Medicine), five fellows undertaking PhDs (clinical fellows evaluating outcomes and biomarkers in sarcoidosis and non-clinical fellows evaluating breath biomarkers in asthma, exercise interventions in severe asthma and costs of severe exacerbations of asthma) and academic foundation doctors all ably supported by a study co-coordinator. Prof Wilson is currently either the lead investigator or co-investigator on grant income of more than £8M and the team undertakes up to 10 clinical studies at any one time. The team have a good track record for completing studies and Norwich is a preferred UK site for several commercial clinical trials. Current research focuses on the assessment and management of patients with airways disease and interstitial lung disease, with particular focus on exercise, nutrition and patient empowerment. This comprises both the physiological assessment including exercise testing and measurement of muscle strength, spirometry, impulse oscillometry and the use of surrogate markers of inflammation including bronchial challenge testing, exhaled breath gas and condensate markers and sputum examination. There is also an extensive programme of research and audit in other areas of respiratory disease including respiratory infections, lung cancer, respiratory radiology, pulmonary embolism and pleural disease. However, the fellow will be supported to develop and answer any suitable respiratory-related research question that is of interest to the fellow. An opportunity will be provided to undertake a systematic review and meta-analysis under the supervision of Professor Yoon Loke and collaborations with Professor Alastair Forbes (Gastroenterology, nutrition and dietetics), Professor Andy Jones (activity monitoring) and Dr Andrea Stockl (Qualitative research) are possible.

**Teaching experience**

The fellow can gain experience in undergraduate and postgraduate clinical teaching in respiratory medicine as well as curriculum development. Opportunities to deliver lecture based, internet based, small group and bedside based teaching are available.

**CLINICAL TRAINING**

**Location**

Department of Respiratory Medicine, Norfolk and Norwich University Hospital, NHS Foundation Trust, Norwich, NR4 7UY

**Time allocation**

75%

**Clinical Environment**

The Department of Respiratory Medicine has been designed to integrate inpatient care, outpatient clinics, radiological investigations and day procedures in one area. The department is adjacent to the Intensive Care Unit and the High Dependency Unit. There will be ten consultant respiratory physicians by the time the fellow is appointed. The department has three Foundation year 1 doctors, 1 Foundation year 2 doctor, two Core Medical Training doctors, one GP Vocational Training Scheme doctor and three specialist registrars in addition to this post. Specialist registrars are on the East Anglia Respiratory Medicine Training Scheme.

**Inpatient**

The beds for respiratory medicine are concentrated on Hethel and Coltishall Wards. These provide 72 beds including 20 side rooms, 2 of which have negative pressure facilities, and are equipped for arterial blood gas analysis, non-invasive ventilation and sleep studies. There are around 2,700 respiratory admissions per year. The beds are shared by the consultant physicians.

**Outpatients and day procedures**

The dedicated respiratory medicine outpatient clinic sees 2,500 new and 8,000 follow up outpatients annually. As well as many general respiratory medicine clinics, specialist clinics take place for the diagnosis and management of patients with interstitial lung disease, asthma, lung cancer, cystic fibrosis, HIV, TB, bronchiectasis and sleep apnoea. The clinic has an integral pulmonary function laboratory. The laboratory has equipment for measuring flow volume loops, transfer factor and lung volumes (plethysmography and helium dilution methods). It can also perform bronchial reactivity testing and cardiopulmonary exercise testing. Full pulmonary function tests are performed on around 4,000 patients per year. There are three bronchosopy lists per week in the endoscopy suite, which has state-of-the-art bronchoscopy equipment, fluoroscopic screening and endobronchial ultrasound facilities. We currently perform over 450 routine bronchoscopies and 100 endobrochial ultrasound examination per annum.

Close working links exist with the departments of Thoracic Surgery, Radiotherapy/Oncology, Intensive Care Medicine, Radiology and Imaging, Histopathology and Microbiology. A regular half day education and teaching programme runs on Wednesday mornings and follows the weekly interstitial lung disease and radiology discussion meetings. Once per month, these are followed by an interstitial lung disease clinicopathological radiology meeting.

**Indicative Job Plan for clinical work:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY |
| AM | Specialist Registrar led ward round | Research | X ray meeting  Educational Meetings  Clinico-pathology meetings (monthly) | Ward Round | Bronchosopy |
|  | Hospital Grand Round |  |  | Hospital Grand Round |  |
| PM | General Respiratory  Clinic | Research | Specialist Clinic or  Undergraduate Teaching | Research | Emergency Respiratory Clinic |

The post-holder will be expected to participate on Norfolk and Norwich University Hospital NHS Foundation Trust’s Specialist Registrar rota for the duration of the post.

**Arrangements for protected research time**

The trainee will have protected research time for one and a half days per week, 3 sessions overall. In the department of Respiratory Medicine NNUH, we are aware that junior doctors can sometimes be put under pressure to help with unexpected clinical demands. However, we have a strict policy that protected time for research is “protected” and every member of the department works to ensure this happens. The ACF will be working along-side an academic clinical fellow and 3 additional specialist trainees so that cover for clinical work can ensure that the ACF is free to undertake research.

**FURTHER INFORMATION**

Candidates seeking further information about the post should contact:

**Academic Programme Director:** Prof Andrew Wilson [A.M.Wilson@uea.ac.uk](mailto:A.M.Wilson@uea.ac.uk)

**Clinical Programme Director:** Dr Russell Phillips [russell.phillips@nnuh.nhs.uk](mailto:russell.phillips@nnuh.nhs.uk)

Dr Thomas Pulimood [thomas.pulimood@wsh.nhs.uk](mailto:thomas.pulimood@wsh.nhs.uk)

**For further information please contact:** Health Education East of England, 2-4 Victoria House, Capital Park, Fulbourn, Cambridge, CB21 5XB [heee.recruitmenthelpdesk@nhs.net](mailto:heee.recruitmenthelpdesk@nhs.net)

Alternatively, please visit the NIHR website: <http://www.nihr.ac.uk/funding/academic-clinical-fellowships.htm>

**TERMS AND CONDITIONS**

The appointment shall be subject to the Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales) and the General Council Conditions of Service as amended from time to time. Copies of the latest editions and amendments issued from time to time may be seen in the Medical Recruitment Office.

**Protection Of Children - DHS Circular HC(88)9**: Within the terms of the above circular, and in view of the substantial access to children, you are required when applying for this post to disclose any record of convictions, bind-over orders or cautions against you as an appendix to accompany this application form.

**Language Competency:** All applicants are required to demonstrate their competence to communicate in English and communication skills as being at a level necessary to do the job safely and effectively, in accordance with HSC 1999/137.

**Salary:** The salary is within the scale for the post appointed to and intensity payments. Payment for internal locum cover is at the standard rate if such cover is agreed.

**Professional Registration and Insurance**: The appointee must have current full registration with the General Medical Council with a licence to practise and continued basic membership of a recognised Medical Defence Organisation is advised.

**Accommodation:** Single and married accommodation may be available on request if required.

**Occupational Health:** The appointment will be subject to the completion of a satisfactory health questionnaire. All appointees will be required to attend Occupational Health within a month of taking up the post.

**Circular HSG (93) 40 - Protection of Health Care Workers & Patients from Hepatitis B.**

Within the guidelines of the above circular it is a contractual commitment of all medical staff to appointments involving Exposure Prone Procedures at this Hospital that you undergo a medical screening programme at the Occupational Health Department of this hospital prior to confirmation of appointment, or provide written evidence of recent successful vaccination.

You are required to produce official documentary evidence (from a GP/Occupational Health Department/laboratory in the UK or Eire) of either:-

1. A satisfactory Hepatitis B Immunity (anti Hbs 100 miu/ml or greater);

2. Evidence of naturally acquired immunity (Anti-HBc Pos & HBsAg neg)

OR

3. Evidence within the last 6 months that you are not a carrier of Hepatitis B e antigen (HBeAg positive). This can be demonstrated by:-

3.1 Assessment of Hepatitis B surface antigen (HBsAg) if negative - not a carrier

and may undertake Exposure Prone Procedures if positive - assess

Hepatitis B e antigen status.

* 1. Assessment of Hepatitis B e antigen (HBeAg) if negative - not a high risk

carrier and may undertake Exposure Prone Procedures if positive - may not

undertake Exposure Prone Procedures (seek local treatment and

occupational advice)

You are required to satisfy these criteria to undertake Exposure Prone Procedures before appointment can be made by the Trust.

All blood reports provided from other Trusts must be ID verified.

**GENERAL CONDITIONS OF APPOINTMENT**

1. All staff must safeguard the integrity, confidentiality and availability of sensitive information at all times. This includes information relating to patients, individual staff records and contract price and terms. Employees of the Trust are required to comply with the Trust’s Principles of Data Quality (see current Data Quality Strategy).

Employee’s responsibilities in relation to handling patient information are detailed in the Trust’s Code of Conduct on Patient Identifiable Information. In line with official guidance from the Department of Health, the Code specifies six principles, which staff should follow at all times. These are detailed below:

* 1. Justify the purpose
  2. Use patient identity only where absolutely necessary
  3. Use the minimum patient-identifiable information
  4. Access to patient-identifiable information should be on a strict ‘need to know’ basis
  5. All staff should be aware of their responsibilities
  6. Every use must be lawful

1. Employees of the Trust are required to participate in a system of appraisal and performance review to identify training and development needs.
2. Employees of the Trust are required to comply with all relevant policies both Trust-wide and departmental policies – any queries should be addressed to your Line Manager or Head of Department.
3. Employees of the Trust are required to attend mandatory training covering Risk Management, Health and Safety, Infection Control, Fire Safety and Manual Handling
4. Employees of the Trust have a responsibility to actively identify areas of risk in both clinical and non-clinical settings, using the Trust’s risk assessment and incident reporting systems as a framework in which to identify, analyse and control risks.
5. Under the conditions of the Health and Safety at Work Act 1974, staff have legal duties as follows:
   1. To co-operate with their employer, to enable the Trust to fulfil its duties under the Act
   2. Not to endanger themselves or others by their acts and omissions
   3. Not to intentionally or recklessly interfere with or misuse anything provided in the interests of health and safety
   4. Familiarise themselves with and comply with the requirements of the Trust Health and Safety Management System, the policies and procedures contained within and the Trust’s Incident Reporting Procedure
   5. Understand that the Trust actively encourages staff to raise health and safety issues and bring to the immediate attention of your line manager any hazard or control measure, which is failing to protect against any hazard.
6. Bring to the attention of your Line Manager and/or safety representative any other issue relating to health and safety.
7. Co-operate with management on ways to improve health and safety.
8. Participate actively in all programmes being implemented to improve health and safety.
9. It is required that all Trust employees will adhere to, and follow good infection control practices, as detailed in the Trust’s Infection Control Manual and other related policies and guidelines.
10. All Trust staff have a statutory duty to safeguard children in their care and promote the welfare of children and young people. Staff are expected to know about the Trust’s safeguarding procedures which can be found on the intranet. Staff must be familiar with the signs and symptoms of abuse and know what to do if any such concerns are raised.
11. Employees are expected to be aware of and carry out their duties in accordance with the standards in the Trust Equality and Diversity and Dignity at Work policies
12. The Trust operates a “Smoke Free Policy” across all sites

This job description indicates the main responsibilities of the post. It is not a complete list and may be amended and developed as necessary.

Revised: January 2010

**THE CITY OF NORWICH**

Norwich is the capital city in the county of Norfolk and the largest city in East Anglia. The City is well connected by road and rail to London. Trains run every 30 minutes from Norwich via Colchester with an average journey time of 1 hour to Colchester and 1 hour 50 minutes to Liverpool Street, London. Rail services also extend to Cambridge and the Midlands. Norwich airport offers travel to many UK destinations and over 70 European as well as 100 worldwide destinations via Schipol/Amsterdam. One of the major London airports (Stansted Airport) is 1 hours and 45 minutes drive from Norwich.

The Norfolk and Norwich University Hospital (NNUH) is situated four miles from the centre of Norwich, close to the University of East Anglia (UEA), to the South West of Norwich and off the A47 and A11. There is public transport by bus from the train station, city centre and several park and ride car parks.

The City of Norwich has a cultural and historic heritage. There are many medieval streets and historic buildings such as the Cathedral dating from the 11th century and the Norman Castle. Norwich is also a vibrant, modern city with new developments, numerous cultural and sporting activities, shopping, theatres and restaurants. There is a new River Leisure Complex designated for entertainment including theatres, cinemas (including 14-screen display and a 6-screen multiplex), night clubs, pubs, bowling alley and fitness centres. Norwich attracts many visitors every year because of its cultural events including music and arts festivals as well as exhibitions run by the Sainsbury Centre for Visual Arts. The Norfolk countryside is famous for its beautiful coastline, network of lakes, rivers and waterways known as ‘The Norfolk Broads’. The nature reserves are ideal for bird watching, sailing or just enjoyment of the peace and tranquillity.

**THE UNIVERSITY OF EAST ANGLIA**

At UEA our aim is to provide the highest quality environment for research and study. Since our foundation we have established a reputation for academic excellence and rigour within a supportive ethos. It is a reputation that we intend to maintain. Our campus lies in 320 acres of parkland on the outskirts of the medieval city of Norwich – the historical capital of East Anglia. This outstanding location, with its striking modern campus, enthusiastic atmosphere and willingness to explore new ideas make UEA a special place to work.

The University has a strong heritage of distinctive academic thinking. Gaining Royal Charter in 1962 and admitting its first undergraduates in 1963, UEA was established as part of the post-war boom in higher education. The city donated the old Earlham municipal golf course and leading architect Denys Lasdun was tasked with producing a design which would reflect and complement an innovative inter-disciplinary structure. The result was an architecturally striking, close-knit campus community in which academics from all disciplines could work in close proximity.

The legacy of that design is an enduring one. UEA has led the way in the development of disciplines such as environmental science, development studies, American studies and creative writing because its founding ethos and physical environment encouraged the cross-fertilisation of traditional academic subjects. Today’s students follow in the footsteps of Nobel prize-winning scientist Professor Sir Paul Nurse, Booker Prize winning authors Ian McEwan and Kazuo Ishiguro, and comedy writer Paul Whitehouse.

The University’s Corporate Plan 2008-2012 summarises the UEA’s mission in three succinct statements:

**Understanding:**

• To advance understanding through research, scholarly communication and research-led teaching, underpinned by a commitment to excellence, interdisciplinarity and creativity.

**Empowerment:**

• To empower our students by providing an exceptional education – and a wider experience that is second to none – equipping them with marketable skills and preparing them for global citizenship.

**Action:**

• To respond to the grand challenges of the 21st century through the fruits of our research, the talents of our graduates, our engagement with policy-makers, businesses and communities and our undertaking to be sustainable.

UEA has an international reputation for top quality research and teaching in a wide variety of subject areas. A clear majority of the departments at UEA that have been government assessed for teaching have achieved a rating of over 21 points, (including a number with the maximum score of 24 points). The 2008 Research Assessment Exercise (RAE) confirmed UEA's place as a top flight international research-led University, with over 50% of the University’s research activity deemed to be world leading or internationally excellent and 87% in total being of international standing. UEA's research income for 2007/2008 was £27.6m. The University currently has a total annual income of £168.3 million.

**The Norwich Medical School**

Head of School: Professor Michael Frenneaux

The Medical School at UEA was established in 2001 (Inaugural Head of School: Professor Sam Leinster) and has over 160 members of academic, research and support staff - and a large number of active NHS secondees and honorary appointees - from a wide range of disciplines (including medical specialties, biological sciences and a range of social and statistical disciplines, including health economics, psychology, epidemiology, and medical statistics). The School has grown with a current entry each year of 168 students. Its first students graduated in 2007 and in 2008 the Medical degree programme came sixth out of the 32 UK medical schools in the national Student Satisfaction Survey.

This is an exciting time for the medical school as it has opened a new £19M research and teaching building opposite the A&E department of NNUH. This building provides state of the art laboratory and office space and facilitate joint working between the medical school and the hospital. Furthermore, a new research institute, The Quadram Institute, is being established in a new building which will be adjacent to the new medical school building. This £75M building is at an advanced stage of planning and will open at the end of 2017. Gastroenterology, microbiology and nutrition will be major research themes in this new institute. Furthermore, the endoscopy department of NNUH will be housed within the new building. This juxtaposition of gastroenterologists and with scientists researching topics relevant to GI disease will create a national centre for gastroenterology and nutrition research.

The School promotes interdisciplinary teaching and learning and offers a wide range of programmes including:

* an innovative and highly integrated five-year MB/BS programme commenced in 2002 with an initial intake of 110 students per year, now 168 students per year
* a one year research intensive Masters degree in Health Research (MRes) supplying research experience and transferrable skills
* the modular MSc programme in Health Sciences for the continuing professional development of a wide range of health care professionals (currently attracting over 100 registered students including GPs and junior hospital doctors)
* a Masters in Clinical Education (MClinEd) degree
* a doctoral programme (ClinPsyD) in clinical psychology (with over 60 postgraduate students on the programme)
* the degrees of PhD, MPhil and MD, awarded by thesis or by portfolio of published work.

There are a growing number of clinical academics in the areas of stroke and ageing; respiratory medicine; gastroenterology; clinical pharmacology; cardiology; surgery; primary care; public health and epidemiology; rheumatology; diabetes and orthopaedics. The Medical School has received an allocation of Walport academic training posts amounting to two new Academic Clinical Fellowships and one new clinical lectureships for each of the next three years. There are exciting possibilities for appointees to develop clinical trials within the Clinical Trials Unit as well as experimental medicine within the seven bed Clinical Research Facility (CRF). The School is committed to appropriate multi-disciplinary working and the post holder will find excellent on-going collaborations across a wide range of disciplines.