EAST ANGLIAN FOUNDATION PROGRAMMES

The Norfolk and Norwich Unit of Application

FOUNDATION YEAR 1 AND 2

ACADEMIC ROTATIONS

To commence August 2016
INFORMATION ABOUT THE ROTATIONS

There are twelve linked F1 and F2 rotations which each have an academic component in the F2 year.

The paired rotations are:

<table>
<thead>
<tr>
<th>F1</th>
<th>F2</th>
</tr>
</thead>
<tbody>
<tr>
<td>A1</td>
<td>Endocrinology NNUH</td>
</tr>
<tr>
<td></td>
<td>Urology NNUH</td>
</tr>
<tr>
<td></td>
<td>Colorectal NNUH</td>
</tr>
<tr>
<td>A2</td>
<td>Colorectal NNUH</td>
</tr>
<tr>
<td></td>
<td>Endocrinology NNUH</td>
</tr>
<tr>
<td>A3</td>
<td>Urology NNUH</td>
</tr>
<tr>
<td></td>
<td>Colorectal NNUH</td>
</tr>
<tr>
<td></td>
<td>Endocrinology NNUH</td>
</tr>
<tr>
<td>B1</td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td></td>
<td>Upper GI NNUH</td>
</tr>
<tr>
<td></td>
<td>Respiratory NNUH</td>
</tr>
<tr>
<td>B2</td>
<td>Respiratory NNUH</td>
</tr>
<tr>
<td></td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td></td>
<td>Respiratory NNUH</td>
</tr>
<tr>
<td>B3</td>
<td>Upper GI NNUH</td>
</tr>
<tr>
<td></td>
<td>Respiratory NNUH</td>
</tr>
<tr>
<td></td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td>C1</td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td></td>
<td>Breast/Endocrine NNUH</td>
</tr>
<tr>
<td></td>
<td>Neurology NNUH</td>
</tr>
<tr>
<td>C2</td>
<td>Neurology NNUH</td>
</tr>
<tr>
<td></td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td>C3</td>
<td>Breast/Endocrine NNUH</td>
</tr>
<tr>
<td></td>
<td>Neurology NNUH</td>
</tr>
<tr>
<td></td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td>D1</td>
<td>Respiratory NNUH</td>
</tr>
<tr>
<td></td>
<td>Surgery NNUH</td>
</tr>
<tr>
<td></td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td>D2</td>
<td>Gastro NNUH</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
<tr>
<td></td>
<td>Older Peoples Medicine</td>
</tr>
<tr>
<td>D3</td>
<td>Surgery NNUH</td>
</tr>
<tr>
<td></td>
<td>NNUH</td>
</tr>
</tbody>
</table>
THE NORFOLK AND NORWICH UNIVERSITY HOSPITALS NHS FOUNDATION TRUST

The Norfolk and Norwich University Hospital is a 1,000 bed teaching hospital with state-of-the-art facilities for modern patient care.

We work closely with the University of East Anglia’s Faculty of Medicine and Health Sciences to train health professionals and undertake clinical research. Our recently redeveloped Cromer Hospital on the North Norfolk coast is also a very important facility for us providing high volumes of care to the relatively isolated, predominantly older population of North Norfolk.

Our staff of more than 7,000, including those staff employed by our contractors, care for patients who are referred to us by around 100 local GP practices but also from other acute hospitals and from GPs around the country. We are well supported by an active and involved team of over 650 volunteers.

We have a range of more specialist services such as cancer care and radiotherapy, orthopaedics, plastic surgery, ophthalmology, rheumatology, children’s medicine and surgery, and specialist care for sick and premature babies.

We have world class facilities, highly skilled staff and low infection rates. Our patients rate us highly on quality of care and having friendly, approachable staff.

We were authorised as a NHS Foundation Trust on May 1 2008 in accordance with the National Health Service Act 2006. The NHS Foundation Trust succeeded the NHS Trust formed in 1994. Our turnover in 2013/14 was over £470m.

Our Vision
Our vision is to provide every patient with the care we want for those we love the most. The vision has been, and will continue to be, the highest priority for our staff and is supported by our strategic aims and our quality strategy.

Our Strategy
Everything that we do will be focused on providing what our patients really need. Our three overarching strategic aims are:

• To provide first class quality services and excellent patient experience
• To establish a national reputation for excellent education, teaching and research
• To enable staff to realise their potential.

INFORMATION ABOUT THE DEPARTMENTS

DEPARTMENT OF SURGERY

General Surgery:

There are 4 surgical firms:

  Breast and Endocrine
  Colorectal
  Upper GI and Hepatobiliary
  Vascular

The general surgical bed allocation is approximately 145 of which 36 beds are for emergency admissions.
There are 10 High Dependency Unit beds and there is also access to the 8-bedded Intensive Care Unit.

The F1 and F2 doctors currently participate on a shared full shift rota which has fixed leave built in to ensure fair allocation of all leave

**DEPARTMENT OF GENERAL MEDICINE**

Acute General Medicine comprises Cardiology, Endocrinology, Gastroenterology, Renal and Respiratory Medicine.

In addition to 7 medical/specialty wards, there is a coronary care unit, an acute renal unit, and a critical care complex. There is an Acute Medical Unit (AMU), where the majority of acute medical admissions are dealt with initially, and a busy Accident and Emergency department.

**Cardiology**

Cardiology provides a Sub-Regional service, with 3 fully equipped catheterisation/angiography laboratories delivering elective angiography and coronary intervention including Primary PCI for Myocardial Infarction. The Department also has full ambulatory monitoring, treadmill testing, and colour-flow, trans-oesophageal, 3-D and Stress echo facilities. The pacing service implants simple pacemakers, ICDs and CRT-D devices. The department also provides Electrophysiology and a comprehensive GUCH, Pulmonary Hypertension and maternal Cardiology service.

**Endocrinology/Diabetes**

The diabetes service is provided in the dedicated Elsie Bertram Diabetes Centre, the only UK Diabetes service to carry a Charter Mark for excellence in public service, and both the busy Endocrine service and the Diabetes service provide the full range of sub-specialist services. The Endocrine work is supported by a dedicated Clinical Investigations Unit.

**Gastroenterology**

There is a dedicated Endoscopy Unit performing gastroscopy, flexible sigmoidoscopy, colonoscopy, enteroscopy, capsule endoscopy, ERCP and endoscopic ultrasound. We are a bowel cancer screening centre. We provide therapeutic oesophageal, duodenal, biliary and colonic stenting and up to date endoscopic management for GI bleeding.

**Renal Medicine**

The Department provides renal services including acute and chronic dialysis for a population of 750,000. Chronic intermittent haemodialysis, home haemodialysis, peritoneal dialysis (CAPD, IPD, APD) and renal allograft follow-up are undertaken. In addition there are Satellite Units at the James Paget Hospital at Gorleston (near Gt. Yarmouth) and at Cromer. The Department plays an active part in the General Medical take with an emphasis on metabolic and salt & water disorders.

**Respiratory Medicine**

The Department has a dedicated ward and Chest Clinic and fully equipped Pulmonary Function Laboratory and Bronchoscopy Suite. One of the 6 Chest Physicians provides the dedicated AIDS Service in Norwich. The Unit has highly developed services for patients with asthma and cystic fibrosis and strong relationships with the other appropriate specialities.
Older Peoples Medicine

Apart from their acute workload, there are subspecialty interests in Stroke, Movement Disorders, falls and endoscopy. In addition each consultant carries clinical responsibility for patients admitted or transferred to one of the community hospitals.

The Directorate is developing outpatient services to offer GPs a range of emergency and multidisciplinary assessments as an alternative to admission as well as more routine treatments including rehabilitation.

There are important links with Orthopaedics and Old Age Psychiatry.

Medicine for the Elderly is integrated with acute general medicine.

The Foundation Year 1 Doctor in any General Medicine/Older Peoples Medicine post will be rostered into a period on AMU.

Emergency Assessment Unit

Most Medical Patients are assessed in the Acute Medical Unit (AMU) before being triaged to the various specialties or discharged. AMU also takes all out of hours admissions after midnight for the non-acute medical specialities prior to handing them on the following morning. Apart from the consultants, supervision and training is also provided by specialist registrars.

AMU sees approximately 2,000 patients per month and that it provides an excellent opportunity for clerking of unselected medical patients and subsequent review on a one-to-one basis with either a registrar or consultant

Current F1 and F2 doctors within the department of medicine work a full shift rota with some specialties electing to have fixed leave incorporated.

NORWICH MEDICAL SCHOOL, NORWICH RESEARCH PARK UNIVERSITY OF EAST ANGLIA, NORWICH RESEARCH PARK, NORWICH

The Norwich Medical School at the University of East Anglia was formed in August 2001. It has over 80 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 health economics, psychology, epidemiology, statistics, biological sciences, medicine and surgery). The staffing complement is expected to double over the next five years.

The School promotes interdisciplinary teaching and learning and runs an innovative and highly integrated five-year MB/BS programme which now takes in 170 students per year.

The School takes a multi-dimensional approach to research, with a strategy to pursue the following broad research themes (to which a number of disciplines contribute), all involving collaboration across UEA and with our partners:

- biological, psychological and social determinants of health and disease
- potential benefits of new interventions (e.g. first in human studies)
- complex interventions for long-term conditions
- Individuals’ health decisions and behaviour education for lifelong professional and practice development.

Our ability to deliver this strategy is enhanced by the fact that the School is operated through a partnership between:
• the University of East Anglia
• the Norfolk and Norwich University Hospital NHS Trust
• the James Paget Healthcare NHS Trust
• the Norfolk Mental Health Care NHS Trust
• the NHS Norfolk
• General Practitioners in Norfolk and Suffolk.

ACADEMIC F2 PROGRAMME

You will be applying to the academic F2 programme in Norwich and will be allocated one of 4 academic F2 speciality attachments according to your expressed preferences.

You will gain experience in a broad research experience which depending on the attachment could include both laboratory and clinical academic research through both structured teaching and hands on experience. It is expected that you will be able to learn how to formulate a research question, review the literature and write a research proposal including an appropriate power calculation. You will have formal structured teaching sessions on obtaining regulatory approval and issues of informed consent, The Human Tissue Act, confidentiality, Caldicott and data protection issues. Depending on the research project selected you will gain experience of patient recruitment, data collection and case record form completion according to good clinical practice. Experience in research techniques and data analysis will be gained as well as presentation skills and report/manuscript writing. It is envisaged that you will be involved in the teaching of the Norwich Medical School, University of East Anglia medical undergraduate course and will therefore gain an understanding and practical experience of different methods of teaching and assessment.

It is expected that while attached to the academic F2 placement the clinical commitment will be small, however speciality related clinical experience may be available if required. There will be no on-call commitment required during the academic F2 placement.

How this placement meets the outcomes as set out by the academic foundation programme

This placement provides the successful applicant with key academic competences in line with the UK Foundation Programme’s Compendium of Academic competences. In particular, you will complete the following: critical appraisal; question formation and literature searching; and a component of a population-based study.

The UKFPO Compendium of competences also include protocol development, grant writing and ethics approval. Experience over the last three years suggests these are unrealistic expectations for most F2s within a four month attachment. However, it would be possible, to develop a research protocol for a small discrete project that is taken through ethics approval and then carried out during the F2 attachment, but this requires considerable planning and motivation by the F2 doctor concerned and needs to be started a minimum of 12 months ahead of the attachment. You supervisors will be happy to support this so please contact them early to discuss potential plans.

The teaching described below allows you to gain experience of larger group teaching (30-40 students) as well as small group teaching (problem based learning or consultation skills). You will also gain experience of assessment – both formative (tutor report writing) and summative (OSCE assessment).
Academic Opportunities

The following compulsory academic specific courses are:

1) Norwich Academic F2 induction course

<table>
<thead>
<tr>
<th>Academic F2 overview</th>
<th>Research Environment in Norwich</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>How to get the most from the attachment</td>
</tr>
<tr>
<td></td>
<td>Norfolk AF2 Required Objectives</td>
</tr>
<tr>
<td>How to write a research protocol</td>
<td>How to write a protocol: introduction, methods, patient</td>
</tr>
<tr>
<td>Literature Searching</td>
<td>inclusion and exclusion criteria, analysis etc</td>
</tr>
<tr>
<td>Statistics</td>
<td>How to conduct a literature search and review</td>
</tr>
<tr>
<td>Critique paper</td>
<td>How to think critically about your own research</td>
</tr>
<tr>
<td>Dissemination</td>
<td>How to review a paper</td>
</tr>
<tr>
<td>Overview and wrap up</td>
<td>Consort statement requirements</td>
</tr>
<tr>
<td>Overview and wrap up</td>
<td>Factors of good and bad report writing</td>
</tr>
<tr>
<td>Overview and wrap up</td>
<td>How to present data from a research project</td>
</tr>
<tr>
<td>Overview and wrap up</td>
<td>Key aspects of oral and poster presentations</td>
</tr>
<tr>
<td>Overview and wrap up</td>
<td>The ups and downs of academic medicine</td>
</tr>
</tbody>
</table>

2) Objective Structured Clinical Examination (OSCE)

This half day course will explain the practical aspects of examining at OSCEs. Following this course you will be able (and expected to) examine at Norwich Medical School undergraduate OSCE’s.

3) Problem Base Learning Tutor (PBL)

This half day course will explain the background and rationale of PBL teaching. You will gain the skills needed to tutor a PBL group.

Other training opportunities will be self-led and you will be required to take responsibility for your learning by being involved in the research and teaching activities of the supervisors. It is expected that you will write a protocol and conduct a piece of research. This may include protocol design, regulatory approval application, study co-ordination, data analysis, report preparation and data presentation. You will also be expected to review a research paper and write a case history or audit.

Education opportunities
You will have the same clinical educational experience as the clinical F2 post in the respective specialities. You will be expected to attend the structured academic teaching programme described above. Attendance at multidisciplinary radiology, pathology and journal club meetings will be expected. You will be expected to complete a reflective diary and develop adult learning techniques.

Teaching opportunities
Norwich Medical School has an innovative undergraduate medical curriculum which is highly ranked in student surveys. Over the course of the year you will experience tutoring, seminar teaching and examination. You will be expected to act as a PBL tutor and as an examiner for Objective Structured Clinical Examinations (OSCEs) after suitable training. The PBL tutor will give you the opportunity to lead a group of students through a complete module within the course. You will also have the opportunity to deliver seminars and ward based teaching, and
involvement in other medical student assessments e.g. marking critical appraisal essays or written examinations.

Mentoring Programme
There is an ongoing formal peer support and mentoring programme within the academic foundation community in Norfolk. Academic Foundation year 2 doctors (AF2) support their year 1 colleagues.

CLINICAL ACADEMIC ATTACHMENTS

DIABETES and ENDOCRINOLOGY – Dr Jeremy Turner (jeremy.turner@nnuh.nhs.uk)

Centre Overview
The Directorate is the largest Diabetes & Endocrinology service in the East of England, and one of the largest in the UK, and information on the services and quality markers in this NHS University teaching hospital, the associated UEA medical school and UEA biomedical schools (www.uea.ac.uk), and a new functional and well-staffed Clinical Research and Trials Unit (CRTU) at these sites are available (www.nnuh.nhs.uk). The Directorate supports a full range of specialist and general clinical services, for a stable local population of 600,000, and a local diabetes population of 42,000 people with known and unknown diabetes (2011). There are active programmes for DAFNE, CSII, outreach services, primary care support, and mobile retinal screening, as well as among the largest and best described antenatal, paediatric and foot services in the UK. The Trust and UEA are part of the larger Norwich Research Park (NRP) which also includes the John Innes Centre, the Institute of Food Research, the Sainsbury Laboratory and the Genome Analysis Centre and houses over 30 science and IT based companies and is one of Europe’s largest concentrations of research in Health, Food and Environmental Sciences. An analysis of the most highly cited scientists in the UK over the past 20 years reveals that Norwich is ranked 4th in the UK after London, Cambridge and Oxford. The Acute Trust and Directorate staff have a long history of clinical – basic science collaboration with colleagues across the NRP, and research in this Directorate is integrated with and fully supported by the East of England DRN.

Clinical Research Experience
The Consultant team in the Elsie Bertram Diabetes Centre are the most research active Directorate in this large University Teaching Hospital (www.nnuh.nhs.uk) and offer a substantial range of expertise and in depth support for academic and industry associated studies. Since the original diabetes research unit (DRU) opened in 1995 (since moved into the CRTU) the diabetes team have undertaken more than 60 research studies with industry, or externally funded with local and UK collaborators. The research team are highly experienced in clinical trial recruitment, GCP, participant retention, eCRF and database management, and in dealing with the regulatory pressures and obstacles in clinical research in the UK. We are aware of the intense recruitment pressures that many industry studies require, and are committed to realistic and accurate recruitment estimates, and have recruited to target in all industry and academic studies in the last decade. Recruitment sample sizes have ranged from up to 6,000 sample size for some studies (Norfolk Diabetes Study, UEA – IFG etc), with 10,000 planned for NDPS down to small numbers in highly specialist trial recruitment and intense recruitment effort. Recruitment locally is supported by excellent research working relationships with local practices individually and through PCRN support. The Consultant team are all research active and offer a range of expertise and research outputs and are Dr Ketan Dhatariya (clinical and research interest in DAFNE, foot disease, clinical therapeutics, and hypertension in diabetes), Dr Swe Myint (clinical and research interest in clinical therapeutics, obesity management, transitional care and hypertension management), Professor Mike Sampson (PI or CI on most Norwich studies since 1995 , with £3.54M in external grant income in last 5 years from Diabetes UK or NIHR, and Deputy Lead East of England DRN), Dr Francesca Swords (Clinical Director, with a
clinical and research interest in adrenal function, ACTH receptor function and pituitary disease and CLRN metabolic medicine co - lead locally), Dr Rosemary Temple (clinical and research interest in preconception care and diabetes pregnancy), Dr Jeremy Turner (clinical and research interest in obesity and adipose tissue inflammation with recent BHF and DRWF funding), Dr Tara Wallace (clinical and research interest in insulin resistance, insulin sensitivity and vascular risk and CSII). All provide internal cover and a pool of local co investigators.

**Therapeutic and research areas**

- Obesity and adipose inflammation
- Metabolism, insulin sensitivity, hypertension
- Paediatric care and insulin management and T1DM prevention
- Retinopathy outcomes
- Neuropathy management
- T2DM prevention & Screening
- Education (DAFNE and new patient education)
- Clinical therapeutics, oral agents and insulin management in T2DM
- Clinical therapeutics, oral agents and insulin management in T1DM
- Diabetes Pregnancy management and outcomes
- Foot disease management in diabetes
- Nutrition, exercise and T2DM
- Service Delivery

**GASTROENTEROLOGY Prof A Watson (alastair.watson@uea.ac.uk)**

Professor Watson has a long-standing interest in the regulation of cell death in intestinal epithelial cells with a more recent interest in interested intestinal epithelial cell shedding, a special form of cell death which arises as a consequence of the high flux of epithelial cell which arise from stem cells at the base of crypts and migrate up to the villi in the case of the small intestine or intestinal surface in the case of the colon. When a cell is shed a discontinuity is created in the epithelial monolayer that has been named a “gap”. Under normal conditions the “gap” is short lived and barrier function is maintained at sites of cell shedding. However, during inflammation cell shedding is increased and can become confluent leading to the formation of micro-ulcers. Barrier function is also sometimes lost during inflammation, creating sites for the potential entry of microorganisms and luminal antigens.

Recent projects focus within the Gut Health programme at Institute of Food Research (IFR) focus on the regulation of cell shedding by the gut microflora. This has wide ranging applications to gut inflammation and inflammatory bowel disease. We are also particularly interested in how cell shedding from the villus tip is coordinated with cell division and the base of the crypt. We are taking a systems biology approach to this combining mathematical modelling with colleagues in Oxford with experimental observations.

Projects are available in:
- Clinical Nutrition (Professor Alastair Forbes)
- Gut Immunology (Professor Simon Carding)
- Gut Microbiota and intestinal inflammation (Dr Lindsay Hall)
- Gut Infection (Dr Stephanie Schuller)
- Risk factors for Gastrointestinal Disease (Dr Andy Hart)
- Genetic risk factors for Sclerosing Cholangitis (Dr Simon Rushbrook)
- Clinical Trials in IBD (Dr Mark Tremelling)

For more information see http://www.uea.ac.uk/medicine/research
**Overview of placement:**

Within Norwich, there is a close collaboration between Respiratory Medicine (Resp Med) and Older Peoples’ Medicine (OPM). In particular both groups have a strong interest in Chronic Obstructive Pulmonary Disease (COPD), idiopathic pulmonary fibrosis, exercise in lung disease and pneumonia. Andrew Wilson is currently applicant or co-applicant on grants totalling £8M including studies to evaluate therapeutic interventions in patients with COPD, pulmonary fibrosis and asthma. He is the investigator for a further 4 clinical trials or investigational studies in COPD or idiopathic pulmonary fibrosis. This is in addition to an extensive research portfolio including asthma, rhinitis, bronchiectasis. Helen May along with Martyn Patel and Kelly Waterfield are specialty clinical research network leads for Ageing Research for the Eastern Region giving us support to do multi-centre portfolio studies and support other specialties with their research. Older peoples’ medicine (OPM) have research interests in hypertension, physiology of cardiovascular ageing, syncope, stroke, movement disorders, mental health, physical and mental comorbidities. OPM have ongoing trials in dementure and hip fracture, pharmacological studies in collaboration with UEA (eg liquid alendronate); hip fractures imaging studies of patients with hip fracture, relatives of patients and patients with hip fracture and stroke; postural hypotension in older people and memory impairment and depression in stroke disease. An academic F2 doctor is able to benefit from the research generated by these projects and to participate in aspects of these research projects.

The group currently have a Clinical Academic Chair, 1 Clinical Senior Lecturers, 1 Academic Clinical Fellows, 5 Research Nurses and 1 Research Assistant. In addition there are close links with other academic researchers including Prof Yoon Loke (clinical pharmacology, drug safety and systematic reviews) and Prof Ian Clark (matrix metalloproteinases)

The post holder will have access to:

1) **Clinical laboratory facilities:** OPM Cardiovascular Laboratory (including Transcranial Doppler, BP monitors, Tilt table, Pulse wave velocity measures); Physiology Research Laboratory (including Spirometry, Impulse oscillometry, Airways resistance, Muscle strength and endurance, Exercise challenge tests); Clinical Respiratory Laboratory (including Body Plethysmography, and cardiopulmonary exercise testing)

2) **Studies:** At present there are 4 multicentre studies hosted by OPM and 6 studies hosted by Respiratory. These offer the experiences only available by well-resourced large scale studies including electronic data capture, electronic case record forms and independent specialist monitors. There are an additional 20 studies on going in the two departments providing a wide choice of studies in which an academic F2 can be involved.

3) **Registers:** there are currently registers in stroke, TIA, hip fracture and interstitial lung disease. These provide opportunities for data analysis

4) **Meta-analyses, Audit and Reviewing Journal Articles:** Researchers within Resp and OPM have experience undertaking meta-analyses, undertake audit regularly and frequently review articles for peer reviewed journals. This provides a resource for training in these areas.

**Examples of work undertaken & outputs**

Previous academic foundation doctors have been involved in a wide range of projects including assessment of lung function using novel and experimental techniques including breath condensate, impulse oscillometry, airways resistance measurements; assessment of in patients with COPD and interstitial lung disease using laboratory walking tests and accelerometry,
meta-analyses and reviews in the following topics: pneumonia scoring, dysarthria, oral anticoagulants and antiplatelets, pulmonary rehabilitation, non-lipid lowering effects of statins

PUBLIC HEALTH/PRIMARY CARE Group
Dr Bob Fleetcroft (r.fleetcroft@uea.ac.uk)
Prof Richard Holland (r.holland@uea.ac.uk)
Prof Amanda Howe (amanda.howe@uea.ac.uk)
Dr Nick Steel (n.steel@uea.ac.uk)

Primary care
The Primary Care Group brings together expertise in social and health services research, where the primary focus and data source is the individual patient. This accords with the definitions of the role of general practice and primary care (for example, “an approach to the delivery of health care which routinely applies a broad and holistic perspective to the patient’s problems”). The essential quality is that our focus is health and ill-health in the context of people’s wider lives, recognising and accepting wide variation in the way those lives are lived, and in the context of the whole person.

The group has 3 clinical and 3 social science academics, and uses research methods which range from epidemiology to discourse analysis. Current research interests include the relevance of NICE guidelines to primary care, the epidemiology of quality in health services (English Longitudinal Study of Ageing), primary care interventions to reduce secondary care utilisation, statin use, the impact of the Quality and Outcomes Framework, resilience, adherence to medication, and chronic disease prevention, as well as condition-focused studies in diabetes and osteoporosis. There are opportunities to work with the local NHS to evaluate interventions, current examples being referral management, case management, and obesity services. You will be supervised by a member of our group, and will have clinical primary care experience within easy reach of UEA to permit attendance at core UEA meetings. You will gain experience with primary care consultations and home visits under supervision of an experienced Primary Care physician and their specialist nurse practitioners and multi-disciplinary team.

Public health post:
This rotation will allow one of three appointed F2s to focus on academic public health, whilst the other two posts will be in academic primary care. All posts will include one clinical day per week with Dr Young and partners in North Walsham. This incorporation of a clinical component is a new and very positive development. It will mean that the F2 will have exposure to general practice as well as academic public health, and will be able to maintain their clinical skills during this placement.

Overview of placement:
The public health F2 appointment will work with Professor Richard Holland under day-to-day supervision of one of our Public health lecturers or Academic Clinical Fellows (currently Dr John Ford). This placement gives the successful candidate the opportunity to undertake Public Health/Health Services research with the aim of working towards 1-2 potential publications; broadening your knowledge of the application of Public health principles within an academic environment and extending your teaching skills. You will develop key clinical research skills, of use in any future academic role. In addition, training and experience is provided in NHS public health.

Key research knowledge and skills covered:
- basic study design and critical appraisal
- literature searching and review writing
- basic data handling and statistical methods
- report writing
Key public health skills covered:
- Health needs assessment
- Health protection and communicable disease (up to 5 days with Health Protection Unit)
- Health promotion (opportunity for experience with the smoking cessation team)

Other NHS public health experience can include experience with the Exceptional treatment panel, or Therapeutics advisory Group at the PCT.

The application of these knowledge and skills is demonstrated as follows:

- You will undertake approximately two projects during your placement. These projects may include the opportunity to undertake literature review tasks, systematic review, data analysis, and report writing. In general, these will involve attaching the F2 to on-going studies undertaken within the Population Health Group’s research team that are currently either in their final stages of completion, or are completed. The aim is to complete 1-2 reports of which at least one should be prepared for publication.

- You will participate in the monthly Journal Club in association with the Norfolk NHS Public Health F2. You would be expected to present at least once at this journal club.

- Presentation of work undertaken to the Regional Public Health F2 group (this group meets monthly for a half-day training session in Cambridge).

- Teaching on our innovative MB BS programme, as follows (all delivered after suitable training):
  - Acting as a PBL tutor on our undergraduate programme for one rotation (8 half-day sessions) or working as a Consultation Skills tutor
  - Potential to undertake clinical skills teaching work – including prescribing seminars, or Clinical Case Based Discussions (so-called ‘long-case teaching) with year 3-4 Undergraduate students
  - Potential to undertake research methods seminars (these are parallel seminars delivered to approximately 30-40 students, all material is pre-planned by the research methods team):
    - literature searching
    - descriptive statistics
  - assessment experience, in particular as an OSCE assessor

Examples of work undertaken & outputs
Previous work undertaken by UEA F2’s in public health has included analysis of data from RCTs, cross-sectional studies, and health needs assessment work. Work has encompassed topics in heart Failure, osteoporosis, substance misuse, and most recently work with those in police custody. Previous F2s have used both quantitative and qualitative research methods and have succeeded in gaining publications or conference abstracts from their attachments.