



Public Health Registrars
East of England

Rough Guide to Placements

2020 Edition

Version	Author	Date
1.0	Sally Cartwright	01/06/2015
1.1	Rachel Bath and Constance Wou	2016
1.2	Grace Norman	2017
1.3	Nicola Ainsworth and Liz Marchant	2018
1.4	Hasna Dulfeker	June 2020

Introduction

There is a wide range of placement opportunities in the East of England for Public Health Registrars.

This document aims to give an overview of options to assist registrars in placement move planning, through giving summaries of placements from first-hand experience from trainees.

The health system and organisations are changing constantly, and subsequently placement opportunities are also subject to change. This is current as of May 2020.

Other opportunities may become available, and areas of interest can be discussed, and further opportunities developed where possible. Placement ideas and options should be discussed with educational supervisors in the first instance.

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1. Local authority placements

1.1 Bedford Borough Council and Central Bedfordshire Council Public Health

Address		
<p>Bedford Borough Council: Borough Hall, Cauldwell Street, Bedford, MK42 9AP www.bedford.gov.uk</p> <p>Central Bedfordshire Council: Priory House, Monks Walk, Chicksands, Shefford, SG17 5TQ www.centralbedfordshire.gov.uk</p>		
Demography		
<p>Bedford Borough: Unitary Authority (Lib Dem elected Mayor with Liberal/Labour Executive) Portfolio Holder for Public Health: Cllr Louise Jackson (Lab) c.172,000 population (ONS 2018- mid-year pop) HWB Strategy: https://bbcdevwebfiles.blob.core.windows.net/webfiles/Social%20Care%20Health%20and%20Community/Bedford%20Borough%20Joint%20Health%20and%20Wellbeing%20Strategy%202018_final.pdf JSNA: https://www.bedford.gov.uk/social-care-health-and-community/bedford-borough-jsna/</p> <p>Central Bedfordshire: Unitary Authority (Conservative majority, 'strong leader' model) Executive Member for Health: Cllr Stock (Con) c.284,000 population (2018 mid-year population) HWB Strategy: https://www.centralbedfordshire.gov.uk/migrated_images/health-wellbeing-strategy-2018-2023_tcm3-15510.pdf JSNA: https://www.jsna.centralbedfordshire.gov.uk/ Most recent annual DPH Report: https://www.jsna.centralbedfordshire.gov.uk/jsna/info/17/additional_reports/99/dph_reports</p>		
Public health team		
<p>Single DPH across Bedford Borough (BB), Central Bedfordshire (CB) and Milton Keynes Council.</p> <p>Bedford Borough, Central Bedfordshire and Milton Keynes Council have a shared PH team c. 50-60 staff including Bedford Borough and Central Bedfordshire specific teams, and a shared 'core team' providing public health evidence and intelligence, health protection, NCMP and some commissioning/business support.</p> <p>Single Senior Management Team for BB, CB and MK comprising of the DPH and four Assistant Directors (Consultants in PH). Some services are commissioned on behalf of both authorities by one, e.g. sexual health and weight management services are commissioned by BB; healthy child programme and substance misuse services by CB.</p>		
Clinical supervisors		
Name	Email	Key projects/interests
Vicky Head	Vicky.Head@bedford.gov.uk	DPH
Celia Shohet	Celia.shohet@centralbedfordshire.gov.uk	AD for Central Bedfordshire

Ian Brown		Ian.Brown@bedford.gov.uk	Chief Officer for PH, Bedford Borough
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Marimba Carr	ST1-3	2018-2020	ST1-3 <ul style="list-style-type: none"> • CYP-Mental Health Needs Assessment • Deputy for improving outcomes for children and young people workstream • Evidence review for CVD prevention • Increasing uptake of pre-school boosters • Holiday Hunger Programme • Evaluation of pilot of young people's online counselling and wellbeing support programme. • Stop smoking service evaluation • Business case for a commissioned service • COVID-19 Specific: Lead of Public Health Advice Cell
Megan Gingell	ST1-ST3	2017-2020	<ul style="list-style-type: none"> • Baseline trends and targets for the Children and Young People's service reprourement • Armed Forces Community Needs Assessments • Population segmentation and PHM • Air Quality lead- AQ steering group, engine idling lit review, options appraisal and co-developed a school campaign • Outcomes Framework for the BB Place Based Plan • Public Health lead for the Bedfordshire Violence and Exploitation Unit- led HNA and strategy, SPOC for community projects, national and local evaluation, chaired national registrar bi-weekly teleconferences • Self-care strategy
Hasna Dulfeker	ST1-3	2016-2020	ST2/3 (part time) <ul style="list-style-type: none"> • Evaluation of LTBI screening in Bedfordshire • JSNA- Early Access to Antenatal care • Academic evaluation of changing integrated review from 2 ½ years to 3 ¼ • Audit to understand the increasing rates of Gonorrhoea in Bedford Borough, Milton Keynes and Central Bedfordshire • Deep dive of signposted referral from Bedfordshire CAMHS • Impact of COVID-19 on CYP
Grace Norman	ST5	2019-2020	<ul style="list-style-type: none"> • Multi Agency Information Cell Deputy Chair • Acting Head of PHEI
Useful information re location, parking, etc			
<p>Bedford Borough's Borough Hall is situated on the river, a 10-minute walk from the town centre. Registrars are eligible for free parking permits through the policy for "work experience placements, student placements and volunteers". It is also a short walk from the railway station.</p> <p>Central Bedfordshire's Priory House has permit parking. Registrars are eligible for free permits. The office is difficult to access by public transport. Laptops are provided to registrars at Bedford Borough and Central Bedfordshire, generally during induction which allow remote access working. Central Bedfordshire uses a 'hot desk' system, and Bedford Borough has allocated desk space. Both BB and CB have on site cafes with a card machine.</p> <p>Senior Management Team meeting rotates between BBC, CBC and MKC. Registrars may be expected to go to meetings in MKC related to their project work.</p>			

1.2 Cambridgeshire County Council

Address			
Shire Hall, Castle St, Cambridge CB3 0AP www.cambridgeshire.gov.uk https://cambridgeshireinsight.org.uk 0345 045 5200			
Demography			
<p>The population of Cambridgeshire is approximately 650,000. It is split into 5 districts: Cambridge City, South Cambs, East Cambs, Huntingdonshire and Fenland. Peterborough is also within Cambridgeshire but operates as a unitary city council (though the public health team are shared across the 2 organisations).</p> <p>Cambridgeshire is a relatively affluent county, and generally performs better than the national average on fingertips metrics, but significant pockets of deprivation exist across the area, most notably in the North of the county.</p>			
Public health team			
Liz Robin (DPH) is DPH for both Cambridgeshire County Council and Peterborough City Council. Within the public health team, the public health intelligence team and the joint commissioning unit are joint teams across the two councils, and all members of staff are likely to work across both councils to some extent.			
Clinical supervisors			
Name	Email	Key projects/interests	
Liz Robin	name.surname@cambridgeshire.gov.uk	DPH	
Val Thomas (not accredited CS)		Public Health Consultant (Health Improvement, joint commissioning unit)	
Raj Lakshman		Public Health Consultant (Children and Maternity, Clinical Prioritisation)	
Kathy Hartley (not accredited CS)		Public Health Consultant (Mental Health)	
2 new consultants due in post soon			
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Seb Walsh	ST1-2	2018-2020	<ul style="list-style-type: none">• HNA and recommissioning of the integrated lifestyle service across Cambridgeshire and Peterborough• Service evaluation of active school travel services• Design of 50,000 reasons social media loneliness campaign• MPhil 2018/19

Vasiliki Kyriakidou	ST1-3	2018-2020	<ul style="list-style-type: none"> • Multidisciplinary approach to TB, including housing and health protection
Vickie Braithwaite	ST1	2018-2020	<ul style="list-style-type: none"> • MPhil 2019/20
Kathryn Faulkner	ST5	2019-2020	<ul style="list-style-type: none"> • Working primarily at local mental health trust supporting development of MH pilot in Peterborough
Ben Brown	ST5	2018-2019	<ul style="list-style-type: none"> • Bringing together all strands of children's policies. • Writing of Best Start in Life strategy.
Sarah Weir	ST1	August 2016 to February 2018	<ul style="list-style-type: none"> • Review of literature on delivering perinatal mental health services to support bid for funding to improve services • Supporting the review of clinical policies, particularly surgical threshold policies for the CCG
Katie Johnson	ST5	August 2016 - 2018 then continued as consultant, now left	<ul style="list-style-type: none"> • Acting up to cover consultant maternity leave, incl. lead for older people • Pharmaceutical needs assessments • Public health and district council's strategy • Health improvement communications (press releases, written material, radio) • Evaluation of community engagement programme

Useful information re location, parking, etc

The county council has several offices across the county. Currently, registrars (and the wider PH team) are generally based at Shire Hall, Cambridge. However, within 2020 it is expected that the team's primary office will transfer to a new office in Huntingdonshire. The new office will not have enough desk space for the whole team, and an increase in remote working is therefore expected. There are not great public transport links to the new office, but there will be a big car park. Some members of the team are planning to work from Peterborough and Ely. It is recommended this is discussed with the proposed CS before the placement. The IT equipment is quite good and does allow working remotely/agilely.

1.3 Essex County Council

Address			
Essex County Council, County Hall, Market Road, Chelmsford, CM1 1QH http://www.essex.gov.uk/Health-Social-Care/Health/Pages/Our-Services.aspx			
Demography			
Essex County Council covers the majority of the historic county of Essex with the exception of Southend and Thurrock which are separate unitary councils. The council serves a population of around 1.6 million making it one of the largest local authorities in England. It works with five CCGs and there are four major hospital trusts in the geographic area.			
Public health team			
The Public Health Team in Essex is small with a DPH, 2 consultants and 5 heads of service. The consultants cover the 5 CCG areas and hold key area portfolios. The support team are currently situated in other teams within the council e.g. Commissioning Support, policy, evidence and intelligence etc.			
Clinical supervisors			
Name	Email	Key projects/interests	
Maggie Pacini, CPH	Maggie.pacini@essex.gov.uk	Teaching and education Falls prevention, PH economics, CCG liaison	
Danny Showell, CPH	Danny.showell@essex.gov.uk	Health protection, CCG liaison	
Mike Gogarty, DPH	Mike.gogarty@essex.gov.uk		
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Theresa Cullip	ST1	2019-2020	<ul style="list-style-type: none">• Comms Campaign around World Suicide Prevention Day• Suicide Audit• Lit search and options appraisal for West Essex CCG on<ul style="list-style-type: none">○ grommets in adults○ commissioning/provision of psychosexual services
Fiona Simmons-Jones	ST1-ST2	2018-2020	<ul style="list-style-type: none">• Childhood immunisation evaluation (ST2)• Essex Coronavirus Action Support (ST2)• Families who are just about managing programme (ST2)• Healthier Wealthier Children project aimed at reducing childhood poverty (ST2)• Suicide audit and World Suicide Prevention Day Communications (ST1)• Essex air quality evidence review (ST1)
Anna Starling	ST1-ST2	2018-2020	<ul style="list-style-type: none">• COVID-19 Care Home Pilot (ST2)• Community-based needs assessment (ST2)

			<ul style="list-style-type: none"> ● IFR Panels at West Essex CCG (ST2) ● Health and Justice Evaluation (ST2) ● Suicide audit and World Suicide Prevention Day Communications (ST1) ● Population Health Management Review (ST1)
Arrthi Pangayatselvan	ST2	2017-2018	<ul style="list-style-type: none"> ● Homeless Health Needs Assessment (ST1) ● Contribution to Self-Harm Management Toolkit development (ST1) ● Qualitative analysis of hospital never events (ST2)
Molly Thomas-Meyer	ST2	2014-2018	<ul style="list-style-type: none"> ● Maternity services scoping HNA (ST1) ● Cervical screening technical briefing and public oriented FAQ for screening and imms team, Essex (ST2) ● Smoking in pregnancy HNA (ST2) ● Travellers HNA (ST2/3) ● Audit Hep B vaccinations in children born to Hep B positive mothers (ST1/2/3 -- Essex Screening and Imms team)

Useful information re location, parking, etc

This is a good placement due to the small numbers of staff: meaning as a registrar you are likely to get to do projects of some complexity and depth, and things which will actually be used! It is also a placement where the political and financial realities for PH are very apparent and is a good learning ground for experiencing life at the coal face.

Maggie Pacini in particular tends to look after all the registrars and their movements within the Essex placement, and is very good at involving and making sure that each registrar's needs are addressed and that suitable projects are found.

The main negative aspect is the 'hot desk' model of working, which means the PH team are often not around every day, and there is no PH area in which to 'soak up' information and learning opportunities. It requires the registrar to be proactive about finding work.

Each Monday there is a PH team meeting where registrars are expected to attend, and where you are most likely to find out what is going on, and to contribute.

DPH, Mike Gogarty is very supportive of registrar involvement, and very keen to get the team working together so it's easy to speak up and contribute. However, because of severe economic cuts the PH resources such as a library etc are non-existent, and again a very self-reliant model of working is necessary to get the most out of the placement.

There are good opportunities for CCG working, Consultants usually spend a day a week at their nominated CCG and registrars work at the CCG(s) that their Clinical Supervisor is assigned to for part of the week.

Additionally, there are good opportunities to work with and from other local organisations. These include organisations such as NHS foundation trusts, Healthwatch Essex and the EoE Screening and Immunisation Team.

1.4 Hertfordshire County Council

Address			
Hertfordshire County Council, County Hall, Pegs Lane, Hertford SG13 8DQ https://www.hertfordshire.gov.uk/services/health-in-herts/health-in-herts.aspx			
Demography			
<p>There were 1, 116 000 people living in Hertfordshire according to the 2011 census. It is estimated that the population of Hertfordshire will increase by 11% between 2012 and 21 which is higher than the projected increase in England (9%). Hertfordshire is split into 10 district areas. There are 2 CCGs (Herts Valley CCG and East and North Herts CCG).</p> <p>Although Hertfordshire consistently performs above the average for England in terms of health and wellbeing and life expectancy indicators, significant inequalities exist across the county between districts.</p>			
Public health team			
<p>Jim McManus is the DPH. Oversees all strands of work:</p> <ul style="list-style-type: none">• Prevention and healthcare public health,• Children and young people,• Health improvement and mental health – includes a health psychologist in training, tobacco control team, Consultant support to the 2 CCGs, Health protection, drugs & alcohol, sexual health,• Evidence and intelligence – with a team of 6 <p>There is a project management approach to public health work with a team of 6 project managers.</p>			
Clinical supervisors			
Name	Email	Key projects/interests	
Linda Mercy (also ES)	Linda.mercy@hertfordshire.gov.uk	East and North Herts CCG	
David Conrad	David.conrad@hertfordshire.gov.uk	Evidence and Intelligence	
Sue Matthews	Sue.matthews@hertfordshire.gov.uk	Children and young people	
Louise Savory	Louise.Savory@hertfordshire.gov.uk	Health Improvement and Mental Health	
Miranda Sutters	miranda.sutters@hertfordshire.gov.uk	Herts Valley CCG	
Recent registrars (last 2 years)			
Name	ST level	Years of placement	Key projects
Nicola Ainsworth	ST1-3	2016-2019	<ul style="list-style-type: none">• Stop smoking medication guidance (ST1)• Hertfordshire stop smoking services annual report 2015/16 (ST1)• Promoting physical activity in over 65s (ST1)

			<ul style="list-style-type: none"> ● Provision of nalmefene – options appraisal (ST2) ● JSNA looked after children (ST2/3) ● Spire audit was to review procedures where there is a CCG clinical policy to assess whether the provider was compliant (ST2) ● Business case and trade press article- campaign to encourage physical activity in over 55s (ST2) ● Social prescribing briefing paper and action plan (ST2) ● Herts Warmer Homes exit plan (ST2/3) ● Herts Warmer Homes evaluation (ST2/3) ● Tender evaluation panel - pharmacy needs assessment (ST3)
Constance Wou	ST1-3	2015-2018	<ul style="list-style-type: none"> ● JSNA of musculoskeletal disorders in Hertfordshire (ST1) ● Literature review of minor ailment pharmacy services (ST1) ● Updating JSNA of healthy weight and physical activity (ST1) ● Modelling the impact of prevention on disease burden in Hertfordshire (ST1) ● Self-management strategy (ST2) ● Mapping of child weight management services (ST2) ● JSNA for healthy weight (ST3) ● Evaluation for children's weight management service (ST3) ● Implementation of Fitness for Surgery policy (ST3) ● Implementation of workplace health service (ST3) ● Priorities forum service restrictions (ST3)
Harriet Edmonson	ST1-3	2017-2020	<ul style="list-style-type: none"> ● Learning Disabilities data review (ST1) ● Assisted heroin treatment evidence review (ST1) ● Learning Disabilities JSNA (ST2-3) ● Making Every Contact count for Young People (ST2-3) ● Stoptober comms (ST2) ● Public health response to A414 corridor strategy (ST2) ● Community Dermatology Service options appraisal with HVCCG (ST3) ● Sexual health service evaluation (ST3) ● Sexual health service options appraisal (ST3)
Gabi Woolf	ST1-3	2016-2020	<ul style="list-style-type: none"> ● Self-management website (ST1) ● Rapid response service evaluation (ST1) ● CCG low priority procedure policies (ST1) ● Literature review on adult safeguarding for JSNA (ST1) ● Premature mortality report (ST1) ● Children and young people mental health and wellbeing strategy (ST2) ● Mainstreaming health assessment tool (ST2) ● Cancer JSNA (ST2) ● Herts warmer homes options appraisal (ST2) ● Recovery plan for family centre services after covid-19 situation (ST3)

Oliver Mytton	ST4-5	2017- 2020	<ul style="list-style-type: none"> • Whole systems approaches to obesity (ST4/5) • Healthy streets (ST4/5) • 20mph limits (ST4/5) • Supporting Health Select Committee scrutinizing the government's childhood obesity plan (ST4/5)
Sugha Murugesu	ST1	2018-2019	<ul style="list-style-type: none"> • Oral Health JSNA (ST1) • ESWT for Orthopaedic Indications Policy IFR (ST1) • Letchworth and Baldock HNA (ST1) • Late HIV Diagnosis (ST1)

Useful information re location, parking, etc

Registrars and consultants are generally based at County Hall in Hertford, but some of the public health team is also based in Farnham House, in Stevenage. Hot desking in both locations. Remote desktop access is also available. There is free parking available in both locations. There are reasonably sized canteens on both sites. There are other potential lunch options in Hertford town centre, which is a 10 min walk from County Hall.

1.5 Luton Borough Council

Address		
Arndale House The Mall Luton LU1 2LJ		
Demography		
<p>Luton is a vibrant, exciting town to live and work. Luton is home to circa 203,201 people forming a mix of communities speaking as many as 122 languages and dialects. Luton has a highly dense population and has high levels of deprivation, similar to many London Boroughs. Situated 30 miles north of London, the town has excellent road, rail and airport connections. Luton is a unitary authority, has one CCG and one main hospital provider (Luton & Dunstable).</p>		
Public health team		
<p>The public health team in Luton is part of the Public Health, Commissioning and Procurement Department.</p> <p>The directorate covers Public Health, Commissioning (joint children's and adults) and community wellbeing (Heritage, and leisure as well as community investment). The department is led by the Director of Public Health Commissioning and Procurement, with 3 service directors, 2 of which are consultants in public health. All are based in one office in the town centre council offices.</p> <p>Luton's Public Health team works closely with the CCG and across the council. The public health team is very much part of the council and the council prides itself on being a "public health council". There are also good working relationships with both the CCG and Luton & Dunstable Hospital with opportunities to undertake audits and pathway redesign etc.</p>		
Clinical supervisors		
Name	Email	Position
Lucy Hubber	Lucy.Hubber@luton.gov.uk	Director for Public Health
Sally Cartwright	Sally.Cartwright@luton.gov.uk	Deputy Director for Public Health
Recent registrars (last 2 years)		
Name	Email	
Jennifer Wilburn	Jennifer.Wilburn@nhs.net	
Beth Capper	beth.capper1@nhs.net	
Ele Powers	eleanor.powers@nhs.net	
Examples of recent projects		
<ul style="list-style-type: none"> Leading a health needs assessment for children and young people with a learning disability and subsequent strategy development leading an audit of A&E attendance notifications based on safeguarding criteria leading the evaluation of an intervention to reduce harmful sexual behaviour in children and subsequent pathway redevelopment 		

- leading a rapid literature review and evidence gathering (from providers, neighbouring commissioners etc.) into children's sensory processing services to inform local commissioning decisions

Useful information re location, parking, etc

No onsite parking. Local parking is at a range of different sites. Many staff use a local temple, costing £50 per month. Street parking is a ten-minute walk away. Luton is well served by rail and major roads.

Luton Borough Council works agile with a hot desk policy. Being located in the town centre (right above the mall) there are a range of shops and local amenities available right outside the office. In the mall, there is a post office, Tesco's, Greggs and two Costa Coffee's, including a range of other shops. There are nice cafes a short walk away from the mall.

Luton and Dunstable Hospital a 15-minute bike ride away or 10-minute drive.

Luton train station is a 5-10-minute walk from the Council office, which is located inside the shopping centre.

1.6 Norfolk County Council

Address
County Hall, Martineau Lane, Norwich, Norfolk, NR1 2DH https://www.norfolk.gov.uk/care-support-and-health/health-and-wellbeing
Demography
<p>Norfolk has a population of 859,400, it is a largely rural county with only 40% of the county's population living in four major built up areas: Norwich, Great Yarmouth, Kings Lynn and Thetford.</p> <p>The health of people in Norfolk is generally better than the England average. Many indicators, including life expectancy, deaths due to smoking and early deaths caused by cancer, heart disease and stroke are similar or better than the England average. However, some health behaviours are worse than the England average, including smoking in pregnancy, suicide, diabetes diagnosis and physical activity in young people.</p> <p>Some areas in Norfolk, notably the urban areas of Great Yarmouth, King's Lynn and Norwich often experience much poorer health outcomes compared to the rest of Norfolk.</p>
Public health team
<p>Norfolk Public Health team has over 50 employees based at County Hall. The department is part of the Directorate for Community And Environmental services, under the Communities Committee.</p> <p>The Director of Public Health (DPH) is supported by two deputy DPH's and an Assistant Director. The DDPHs lead Public Health services (supported by three Consultants in Public Health) this includes children, young people and NHS Commissioning. The DDPH for Health Protection and Health Improvement covers vulnerable people, health improvement, and community safety. The Assistant Director / Head of Public Health Delivery and Performance leads performance, commissioning and from Spring 2017 Emergency Planning and Resilience for the Council.</p> <p>The team is very friendly and supportive, supervision is excellent and there is support for undertaking projects that align to your learning needs and interests. All consultants seem genuinely interested in supporting learning for registrars and looking for opportunities to get you involved in interesting work. At Norfolk the emergency planning team and road safety team are part of the public health directorate and so there is opportunity for projects with these teams.</p> <p>The Norfolk Public Health strategy 2016-2020 involves:</p> <p>Promoting Health improvement</p> <ul style="list-style-type: none">• healthy living and healthy places• Joint working with district councils to address wider determinants of health• Rolling out workplace health offer to reduce sickness absence and improve productivity• Addressing obesity and access to health checks• Road safety <p>Protecting Health</p> <ul style="list-style-type: none">• Delivery of drug and alcohol recovery services in the community and reducing smoking• Taking a multi-agency approach to mental health, domestic abuse and substance misuse• Community Safety• Emergency planning and resilience <p>Providing Services</p>

- High quality healthy child programme and sexual health services
- STP: strategic support to NHS commissioners

Partnership working

- Leading the Health & Wellbeing Board and JSNA
- Developing a single, fit for purpose approach to information and analysis across teams at the council

Clinical supervisors

Name	Email	Key projects/interests
Suzanne Meredith	suzanne.meredith@norfolk.gov.uk	<p>Healthcare public health, STP and ICS work Sexual health commissioning Children's services, healthy child programme Child death overview panel</p> <p><i>NB projects can be undertaken across all areas of the team with different project managers, so you are not limited to the areas that Suzanne covers</i></p>

Recent registrars (last 2 years)

Name	Stage of training	Year of placement	Key projects
Sarah Weir	ST3-ST4	2019-2020	<ul style="list-style-type: none"> • Mental Health Prevention Board - workplace wellbeing project, in conjunction with STP Mental Health Prevention Group • Preventing suicide in higher education settings • Tobacco control health needs assessment and strategy refresh • Proving public health support for the council's climate change response • Supporting arrangements in the event of excess deaths associated with COVID-19 outbreak
Sarah Gentry (ACF)	ST3	August 2017-Present	<ul style="list-style-type: none"> • All age autism needs assessment and engagement exercise • Embedding planning for extreme weather events associated with climate change • Safe sleep campaign and Child Death Overview Panel • Evaluation of arts and theatre activities for improving mental wellbeing and reducing mental health stigma • Health needs assessment for unaccompanied asylum-seeking children
Rachel Bath	ST1	2015-July 2017	<ul style="list-style-type: none"> • Sleep safe campaign including Baby boxes • Oral Health action plan for Norfolk • Late HIV diagnosis in Norfolk • Child Death Overview Panel • TB Needs Assessment • Child deaths due to septicaemia, meningitis and sepsis

- | | | | |
|--|--|--|---|
| | | | <ul style="list-style-type: none"> • MPhil in Public Health – Cambridge University |
|--|--|--|---|

Useful information re location, parking, etc

County Hall is very accessible by foot (20 mins) or on bike (10 mins) from Norwich train station. Buses go to County Hall from Norwich bus station in the city centre.

There aren't a lot of shops around County Hall, as it is away from the city centre. On site there is a canteen/restaurant offering breakfast and lunch, with hot and cold options, as well as a cafe selling hot drinks, snacks, cakes, sandwiches, soup and salad. Tuesday is scone day! There are extensive grounds in which to walk including meadows and woodland, and a sunny terrace popular with staff in the warmer months.

The council operates a hot-desking policy and desks with the Public Health area are limited. You're advised to start early and finish early if you want to be guaranteed to get a desk.

If you choose to use active travel options there is undercover cycle parking and changing facilities, including showers, available for your convenience.

Parking at County Hall is oversubscribed, you will require a permit that will allow you to park 3 days of the week if you are full-time, 2 days for part-time. You will be allocated "non-parking days" when your permit is granted, if the days you are allocated do not suit you, you can try swapping them using the Council's online marketplace forum. On your non-parking days, you are expected to use other means to get to work.

There is also a shuttle bus that runs from the Harford Park and Ride (Ipswich Rd, Norwich NR4 6US). The bus runs to County Hall every 30 minutes and costs £2.

1.7 Peterborough City Council

(Last updated 2016)

Address			
Peterborough City Council, Sand Martin House, Bittern Way, Fletton Quays, Peterborough, PE2 8TY			
Demography			
<p>Peterborough City Council is a unitary authority serving a population of 196,640 at (mid 2015). Peterborough has a young population with a higher than average number of children and young people and is also one of the fastest growing cities in the UK. The city is ethnically diverse, with 29.1% of residents not self-identifying as White English/Welsh/Scottish/ Northern Irish/British. There are socio-economic inequalities within the local authority area, with areas of significant deprivation close to central Peterborough.</p> <p>For more information see https://www.peterborough.gov.uk/healthcare/public-health/JSNA/</p> <p>Peterborough is a unitary authority. The public health team is shared with Cambridgeshire County Council.</p> <ul style="list-style-type: none">In Nov 2016 seven councils across Cambridgeshire and Peterborough voted to approve a devolution deal. By confirming the deal, councillors agreed for their council to become a constituent member of the Combined Authority for Cambridgeshire and Peterborough. The authority is led by the elected Mayor for Cambridgeshire and Peterborough. On Friday 5 May 2017 James Palmer was elected the Mayor of Cambridgeshire and Peterborough			
Public health team			
<p>The Public Health Team works across the county with a shared Director of Public Health for Peterborough City Council and Cambridgeshire County Council. There are 3 full time Consultants in addition to the DPH with another 4 working part time. There is a knowledge and intelligence team comprising 8 members. Both areas are served by Cambridgeshire and Peterborough CCG.</p>			
Clinical supervisors			
Name	Email	Key projects/interests	
see list for CCC			
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
see list for CCC			
Useful information re location, parking, etc			
<p>Sand Martin Hse is located in the centre of Peterborough and is a 15 minute walk from Peterborough Train Station. Parking is available in a number of pay and display car parks, the cheapest being £3 per day</p>			

1.8 Suffolk County Council

Address		
<p>Endeavour House, 8 Russell Road, Ipswich, IP1 2BX (Main address and location of Public Health team, however option to work from Bury St Edmunds or Lowestoft)</p>		
Demography		
<p>Suffolk is a rural county and has borders with Norfolk to the north, Cambridgeshire to the west and Essex to the south. It has a total population of 738,512 roughly 22% of which is aged 65 or older.</p> <p>Almost 12% (52) of the 441 LSOAs in Suffolk are classified as having nationally high levels of deprivation, being in the top 20% most deprived LSOAs in England. Twenty-one of these LSOAs are in the top 10% most deprived nationally; these are LSOAs exclusively located in either Ipswich or Waveney.</p> <p>Suffolk County Council is the Local Authority. There are 7 districts with borough/district councils.</p>		
Public health team		
<p>Public Health has recently been merged with Children & Young People to form a new Directorate of Health, Wellbeing and Children's Services. Following a restructure in April 2018 there are now more opportunities for registrars to choose their area of interest/priority.</p> <p>Public Health incorporates the following service areas:</p> <ul style="list-style-type: none"> - Population Healthcare and Health Protection - Knowledge and Intelligence team - Health Improvement - Localities and Partnerships <p>Since September 2019, the DPH is Stuart Keeble. There are 5 PH consultants and 2 full time health and care programme managers in the Population Healthcare & Health Protection team. On average 2-4 PH registrars, 1 Sports medicine registrar, 1 GP trainee and 1 FY2 on PH rotation at a time.</p> <p>Excellent library services provided by a London NHS Trust, but on site there is still a stock of useful books/textbooks, and relevant journals/publications. Large team of analysts provide support (e.g. statistics, maps etc.).</p> <p>For details of JSNA reports, Annual report, HWB strategy etc see the newly redesigned Healthy Suffolk website: www.healthysuffolk.org.uk</p>		
Clinical supervisors		
Name	Email	Key projects/interests
Dr Mashbileg Madraig (Mash)	Mashbileg.Maidrag@suffolk.gov.uk	Children & Young People; ES and TPD for Quality
Dr Padmanabhan Badrinath (Badri)	Padmanabhan.badrinath@suffolk.gov.uk	Healthcare Public Health; Health Protection, Lecturer at Cambridge
Dr Jeptepkeny Ronoh (Jep)	Jeptepkeny.ronoh@suffolk.gov.uk	Older people, integrated care, prevention

Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Eleanor Powers	ST1-3	August 2016-Jan 2019	<ul style="list-style-type: none"> • Young People's Sexual Health, Drugs and Alcohol Needs Assessment (ST1) • Evaluation of a voluntary family befriending service in Suffolk County (ST1) • Analysis of characteristics of children attending A&E and using ambulances in Suffolk (ST1) • JSNA in Young People and Substance Misuse (ST2) • Options appraisal for Freestyle Libre (ST2) • Promotion campaign to reduce NAHI (ST2)
Bev Griggs	ST1-3	August 2017-current	<ul style="list-style-type: none"> • Children in Care Needs Assessment • Healthy Hospital 0.4 wte for 7 months • Planning in Public Health Framework • Veterans Mental Health Needs Assessment • CYP Emotional Wellbeing Hub Service Evaluation • Clinical Litigation Research Project
Helen Benson	ST2	2019-current	<ul style="list-style-type: none"> • Evaluation of a voluntary family befriending service in Suffolk • Evidence Review of Integrated Neighbourhood Teams • Media Launch of an asthma inhaler use app • Epidemiological Support to the ICS National Diabetes Prevention Programme
Useful information re location, parking, etc			
<p>The train station is a 5-10 minute walk – direct trains from London (80 mins), Cambridge (80 mins), Norwich (40 mins).</p> <p>There are free park and ride services based at London Road and Martlesham both of which have stops close to the council building in Ipswich</p> <p>There is a secure staff multi-storey car park next door (although this can fill up) which is free for StRs. Electric pool cars are available to book online.</p> <p>Secure bicycle storage & pool bikes available. Showers available.</p> <p>10 minute walk to town centre (free shuttle bus several times per hour).</p> <p>Free tea and coffee (and milk) at every floor plate.</p> <p>Good onsite canteen and café; no shops immediately nearby.</p> <p>We are based on the 2nd floor (Lime block) and use hot desks; have our own SCC laptop, which enables remote working at other council/CCG sites or (ad hoc) home working. A locker or pedestal should be available to securely store your laptop and any other items. Unlike some councils Suffolk usually has a busy office of public health staff, with most people only WFH one day per week and a friendly, chatty atmosphere.</p>			

1.9 Thurrock Unitary Council

Address		
New Road, Grays, RM17 6SL		
Demography		
<p>Thurrock lies on the River Thames, just to the east of London. With over 18 miles of riverfront, it covers an area of 64 square miles with more than half defined as Green Belt.</p> <p>Thurrock has a population of 165,000 residents. The area is undergoing a major programme of regeneration which is bringing many opportunities for public health, including influencing the environment and place. Thurrock Unitary Council has the added advantage of being co-terminus with Thurrock CCG and links between the Public Health team, council and CCG colleagues are strong, with good relationships built between them.</p> <p>There is a large proportion of young people living in Thurrock, with a growing population of elderly residents. Thurrock's most deprived areas include Tilbury and Purfleet. There are currently some challenges with primary care provision in these areas as well as across Thurrock as a whole. One of the other concerning PH issues in Thurrock is the increasing tide of obesity both in children and adults; over a third of Year 6 children are overweight or obese and this figure increases to 70% in adults.</p>		
Public health team and council		
<ul style="list-style-type: none"> Thurrock's PH team has grown in recent years with about 25 members of staff in the team. This is very encouraging for the specialty as we have seen trends of the reverse happening in neighbouring councils. Thurrock has only one unitary council and one CCG, which makes it easier and quicker to get things done. However, the CCG are facing considerable financial challenges and GP recruitment across Thurrock is difficult. There are frequent PH team meetings where there is an opportunity for staff development and registrars will be encouraged to get involved in developing the team. We have PH practitioners, a registrar, 3 public health graduate trainees and an apprentice in the team, which makes it an excellent environment for learning and development. There are weekly Public Health Leadership Team (PHLT) meetings where registrars automatically become members and have an opportunity to help shape the direction of our work streams as well as to take advice from senior colleagues on their projects. The Council is led by the Conservative party. 		
Clinical supervisors		
Name	Email	Phone number
Teresa Salami-Oru (lead project supervisor and soon to be accredited CS)	TSalami-oru@thurrock.gov.uk	
Ian Wake	iwake@thurrock.gov.uk	Mobile: 07742602261
Maggie Pacini	Maggie.pacini@essex.gov.uk	Mobile: 07921397122
Previous registrars		

Current registrar	
Rachael McCarthy ST1	RaMcCarthy@thurrock.gov.uk MPhil 2019/20
Examples of previous projects	
<ul style="list-style-type: none"> • There has been much work done by public health to inform the development of Integrated Healthy Living Centres (IHLCs), bringing health and social care services closer to the communities that need them. • Writing the Health and Wellbeing Strategy and gaining agreement from various partners for the direction of travel for the PH team as well as council and CCG colleagues from 2016-2021. • Creating an Accountable Care Partnership (Organisation) within the Tilbury Locality between the council, CCG, various providers and key stakeholders. • Writing a Joint Strategic Needs Assessment product for Mental Health • Working with the CCG to develop a cancer action plan and implement the recommendations of a cancer deep dive in order to improve cancer services from prevention, screening, diagnosis and referral through to treatment and increasing cancer survival rates • Working with the CCG by using public health modelled data to “find the missing thousands” of patients in Thurrock who have not been diagnosed with hypertension, depression and various other Long Term Conditions • Working with social care colleagues to screen for depression in those aged 65+ with a heart condition • Redesign and re-procurement of 0-19 services • Redesign and re-procurement of sexual health services • Redesign and re-procurement of healthy lifestyle services (stop smoking, healthy weight, NHS Health checks) • Supporting a refresh of our tobacco control strategy by working with the local acute trust and CCG to improve smoking quit rates • Working with third sector colleagues (Health Watch and CVS) to remain informed on the views of the public 	
Useful information re location, parking, etc	
<ul style="list-style-type: none"> • Office style. PH registrars hot desk with the rest of the PH team, in the same area as social care colleagues. Lockers are available for personal items. There are fixed land lines in hot desk areas which automatically change as you log in from desk to desk. • Rail travel. The Council is based on New Road, 5 mins walk from Grays rail station, a 25min train journey from London’s Fenchurch Street. • Parking is available in the multi storey in Grays Shopping Centre nearby (£5 a day or £60 per month). • Other. The council building has its own café and the building is based in Grays town centre where there are numerous eateries, a shopping centre and a large Morrisons. 	

2. Clinical Commissioning Group (CCG) placements

2.1 Bedfordshire CCG

Address			
Capability House, Silsoe, Bedfordshire, MK45 4HR Email: enquiries@bedfordshireccg.nhs.uk Telephone: 01525 864430 www.bedfordshireccg.nhs.uk			
Demography			
<p>BCCG serves the populations of Bedford Borough and Central Bedfordshire unitary authorities – please refer to their combined placement profile for further info.</p> <p>The CCG is divided into five locality groups. Main providers are Bedfordshire NHS FT (which incorporates both Bedford Hospital and The Luton & Dunstable Hospital) and the mental health provider is East London NHS FT.</p> <p>Hot issues:</p> <p>The CCG is in the process of reforming into a new commissioning organisation, along with Luton CCG and Milton Keynes CCG. This aligns to the existing ICS footprint. The two principle acute providers serving the population of Bedfordshire (Bedford Hospital and Luton & Dunstable Hospital) merged in 2020 to form one Trust.</p>			
Public health team			
Please refer to Bedford Borough and Central Bedfordshire council’s placement profile			
Clinical supervisors			
Name	Email	Key projects/interests	
Sanhita Chakrabarti (works across from local authority and then moved to BCCG as Clinical Lead for Children)	Sanhita.chakrabarti@nhs.net	Child health; women’s health	
Kiran Loi (works across from Local authority)	kiran.loi@bedford.gov.uk		
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Sandra James	ST4	2019/2020 (7mths)	<ul style="list-style-type: none">• System wide review of oral health and dental access in care homes• IFR Panel and associated evidence reviews• Audit of non-elective respiratory admissions (adults and paed)• Provided public health support to the commissioning of new community specialist nursing posts for epilepsy and MS• Undertook the NHSE&I Quality, Service Improvement and Redesign (QSIR) Practitioner Programme

Useful information re location, parking, etc
Location is Wrest Park Enterprise Centre in rural Bedfordshire http://www.wrestparkenterprise.co.uk/ Parking on site is free. The site is poorly served by public transport. Good café in the building and nice grounds for exercise.

2.2 Cambridgeshire and Peterborough CCG

Address			
Lockton House, Clarendon Road, Cambridge, CB2 8FH http://www.cambridgeshireandpeterboroughccg.nhs.uk			
Demography			
Cambridgeshire is broadly affluent, though there are pockets of deprivation particularly in Fenland, north Cambridge and Huntingdon. Peterborough has much more widespread deprivation, with large Pakistani and Eastern European communities. Health outcomes are generally good, with some exceptions, but health services are overstretched and underfunded. Focus of projects likely to be on either the CCG’s clinical priority areas or on projects to reduce system-wide costs.			
Public health team			
Fiona Head leads the small Improving Outcomes team and is the only clinical supervisor. May only be capacity for a single registrar. Likely to be opportunities to work autonomously and an expectation that you will scope much of your own work. Environment is fast paced and can be very reactive. Links to Cambridgeshire County Council PH Team (incl Peterborough). Best suited to a confident / relatively senior registrar.			
Clinical supervisors			
Name	Email	Key projects/interests	
Fiona Head	Fiona.head@nhs.net	<ul style="list-style-type: none">Recently led the system-wide System Transformation ProgrammeSubstantive role is head of the CCG’s Improving Outcomes team but currently acting up as CCG medical directorExperienced and supportive consultant with interest in registrar education	
Recent registrars (last 2 years)			
Name	Stage of training	Year(s) of placement	Key projects
Vicki Peacey	ST4/5	2019-2020	<ul style="list-style-type: none">Rough sleepers’ health needsbereavement care during covid19inclusion healthsupporting GP traineesNHS action on prevention of ill health
John Ford	ST4	2018-2020	<ul style="list-style-type: none">National evaluation of health inequalities RightCare packsHealth inequalities strategy develop and implementation
Useful information re location, parking, etc			
Close to Cambridge railway station and with good bus links to city centre. No free parking on site. Bike parking and shower available. Co-op and Costa 2 minutes’ walk. Likely to be moving to a location outside central Cambridge			

3. Academic placements

3.1 CLAHRC East of England

(Last updated before 2016)

Address			
http://www.clahrc-eoe.nihr.ac.uk/			
Demography			
The CLAHRC collaboration encompasses some thirty-six organisations, with research hubs in the Universities of Cambridge, Hertfordshire and East Anglia			
Department structure			
Cross-cutting elements of the collaboration include researching the best ways to involve patients and the public in health research, health economics and patient safety where we enjoy a strong partnership with the Eastern Academic Health Science Network. Our research themes are: <ul style="list-style-type: none">• dementia, frailty and end-of-life care• enduring disability and disadvantage• patient safety• health economics• patient and public involvement• innovation and evaluation			
Eligibility /suitability criteria			
Post part B			
Clinical supervisors			
Name	Email	Key projects/interests	
Carol Brayne	Cb105@medschl.cam.ac.uk	Dementia, academic public health.	
Christine Hill	Cmh86@medschl.cam.ac.uk	Health policy, public health leadership	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
No recent registrars			
Useful information re location, parking, etc			
Attachment would be based at Douglas House, Trumpington Road or the Institute of Public Health, Forvie Site. Parking is available at both sites.			

3.2 MRC Epidemiology Unit, University of Cambridge

Last updated June 2018

Address		
Institute of Metabolic Science, Level 3, Box 285, Addenbrooke's Hospital, Hills Road, Cambridge CB2 0QQ Website http://www.mrc-epid.cam.ac.uk/		
Background of placement		
<p>The research of the MRC Epidemiology Unit is aimed at understanding the aetiology of obesity, type 2 diabetes and related metabolic diseases and translating that epidemiological knowledge into preventive action. Using a national and international network of studies, the Unit has a major focus on the genetic and developmental origins of these conditions, with a particular focus on studying gene-lifestyle interactions. This work is aided by the location of the Unit in the Institute of Metabolic Science in Cambridge. Its programmes in nutritional and physical activity epidemiology include methodological and aetiological studies. The Unit's research on the translation of epidemiology into prevention includes work at the individual and the societal level. The Unit is part of the Institute of Public Health and leads the Centre for Diet and Activity Research (CEDAR : www.cedar.iph.cam.ac.uk) a UKCRC Centre of Public Health Research Excellence. This provides a unique training opportunity in interdisciplinary public health research spanning epidemiology, public health, health economics and health geography, aimed at changing population level behaviour. The projects are not predetermined, but subject to discussion and negotiation with potential supervisors. For an idea of the sorts of research/public health areas we might engage with please visit our Unit's website (www.mrc-epid.cam.ac.uk)</p> <p>Broadly speaking we will have opportunities for the following types of work.</p> <ul style="list-style-type: none">• Developing understanding of research methods involving descriptive and analytical epidemiology, population-based intervention studies and evidence synthesis;• Analysis and communication of scientific observations;• Understanding how to translate observational findings into preventive action;• Translation across the research policy interface;• Supervision in writing up of papers for publication.		
Department Structure		
The Unit is organised around 8 core MRC –funded programmes and an additional 5 programmes in dietary public health and modelling in CEDAR and global public health research, with the new Global Diet and Activity Research group headed by Prof. Nigel Unwin.		
Eligibility/Suitability Criteria		
Post part A and B		
Clinical supervisors		
Name	Email	Phone number
Professor Nick Wareham	Nick.wareham@mrc-epid.cam.ac.uk	01223 330315
Dr Nita Forouhi	Nita.forouhi@mrc-epid.cam.ac.uk	01223 769145
Dr David Ogilvie	David.ogilvie@mrc-epid.cam.ac.uk	01223 769197
Professor Martin White	Martin.white@mrc-epid.cam.ac.uk	01223 330315

Professor Nigel Unwin	Nigel.unwin@mrc-epid.cam.ac.uk	01223 330315	
Dr Claudia Langenberg	Claudia.langenberg@mrc-epid.cam.ac.uk	01223 330315	
Dr Raj Lakshman	Rajalakshmi.Lakshman@mrc-epid.cam.ac.uk	01223 330315	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
Eleanor Turner-Moss	ST1-3	2016	<ul style="list-style-type: none">• Work with the Global Diet and Activity Research group.
Ahmed Razavi	ST2-3	2016-2018	<ul style="list-style-type: none">• Trends in cardiovascular disease and diabetes mortality in the Caribbean and possible explanatory correlates.• General work with Prof. Nigel Unwin examining global health and non-communicable diseases.
Constance Wou	ST2-3	2016-2018	<ul style="list-style-type: none">• Various pieces of work with Prof Wareham - scoping exercise on international diet and nutrition survey data, contributing to case study of a move to a value based care model for prostate cancer patients, report on epidemiology of diabetes in Singapore, cost of prevention and treatment of diabetes in developing and developed countries (with Prof Unwin).
Oliver Mytton	Post part B	2013	<ul style="list-style-type: none">• Undertaking PhD aimed at improving our understanding of how the built and social environment influences walking and cycling, and how this affects health. Currently an Academic Clinical Lecturer at the MRC Epidemiology Unit.
Claudia Langenberg	Post part B	2016	<ul style="list-style-type: none">• Projects in molecular and genetic epidemiology on National Treasure placement.
Useful information re location, parking, etc			
See http://www.mrc-epid.cam.ac.uk/contact/find-us/			

3.3 University of East Anglia

Last updated 2018

Address			
Norwich Medical School, Chancellor’s Drive, Norwich, NR4 7TJ Website of organisation: www.uea.ac.uk			
Demography			
Not relevant			
Department structure			
UEA undertakes both national UK research (N. Steel) and international PH research (M. Bachmann, P. Hunter). UEA provides support for many local evaluations including drugs related work, and most recently work with Norfolk and Suffolk Constabulary.			
Eligibility /suitability criteria			
Post Part A or Academic Clinical Fellow			
Clinical supervisors			
Name	Email	Key projects/interests	
Prof Nick Steel	n.steel@uea.ac.uk	Prof Nick Steel is interested in quality of care and primary care https://www.uea.ac.uk/medicine/people/profile/n-steel	
Prof Max Bachmann	m.bachmann@uea.ac.uk	Prof Max Bachmann undertakes South African research looking at HIV and TB https://www.uea.ac.uk/medicine/people/profile/m-bachmann	
Prof Paul Hunter	Paul.hunter@uea.ac.uk	Prof. Paul Hunter is a Professor of Health Protection and honorary Consultant Medical Microbiologist. He undertakes health protection research, focused on waterborne disease https://www.uea.ac.uk/medicine/people/profile/paul-hunter	
Prof Veena Rodrigues	v.rodrigues@uea.ac.uk	Prof Veena Rodrigues is interested in educator development and mentoring and technology enhanced learning. https://www.uea.ac.uk/medicine/people/profile/v-rodrigues	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
John Ford	ST3 (OOPR)	2014 to present	<ul style="list-style-type: none">Undertaking a PhD looking at access to primary care for deprived older peoplehttps://www.uea.ac.uk/medicine/people/profile/john-ford
Sarah Gentry	ST1-2	2016 to present	<ul style="list-style-type: none">Evaluation of Norfolk and Suffolk NHS Foundation Trust smoke-free policy

			<ul style="list-style-type: none"> • Quantitative analysis of survey data on e-cigarettes for smoking relapse prevention • Mixed-methods systematic review on e-cigarettes for vulnerable groups • Qualitative systematic review on smoking cessation for people who misuse substances • Regular teaching including taking over from John Ford as co-lead for the year 1 Research Methods module for 2018-19
Tara Berger-Gillam	ST2	2016 to present	<ul style="list-style-type: none"> • Master's in Public Health –London School of Hygiene and Tropical Medicine • Women's attitudes towards NRT in pregnancy: a qualitative systematic review

Useful information re location, parking, etc

Matching registrar's interests with supervisor is key. Therefore, if you are interested in a placement get in touch early with Nick Steel to discuss what's going on.

Contact Karen Milton for public health specific teaching opportunities (k.milton@uea.ac.uk)

Parking ok as long as you have a permit.

Pleasant 20-30 mins cycle from train station (along river, through cathedral close, down colgate and then follow google maps cycle route up the avenues).

No. 25 bus goes from train station to UEA but quite slow

3.4 Cambridge Institute of Public Health

Address			
Institute of Public Health, Forvie Site, Robinson Way, Cambridge, CB2 0SR			
Demography			
Not relevant			
Department structure			
Led by Professor Carol Brayne			
Eligibility /suitability criteria			
Academic Clinical Fellow, PhD, Academic Clinical Lectureship			
Clinical supervisors			
Name	Email	Key projects/interests	
Professor Carol Brayne	cb105@medschl.cam.ac.uk patocarolbrayne@medschl.cam.ac.uk	Older People Dementia	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
John Ford	ST5 (ACL)	2019-pres	Older people
Richard Merrick	PhD (OOP)	2018-pres	Gender and dementia
Seb Walsh	ST2 (ACF)	2019-pres	Dementia
Useful information re location, parking, etc			

4. Public Health England (PHE)

More information about the placements at PHE East of England can be found in the “*Public Health Specialty Training Prospectus*”.

4.1 Health Protection: Harlow

Address		
Goodman House, Station Approach, Harlow CM20 2ET		
Clinical supervisors		
Name	Email	
Smita Kapadia	smita.kapadia@phe.gov.uk	
Ravikumar (Ravi) Balakrishnan	R.Balakrishnan@phe.gov.uk	
Sultan Salimee	sultan.salimee@phe.gov.uk	
Amelia Cummins	amelia.cummins@phe.gov.uk	
Victor Aiyedun	victor.aiyedun@phe.gov.uk	
Deepti Kumar	deepti.kumar@phe.gov.uk	
Recent registrars		
Name	Email	
Nicola Ainsworth	nicola.ainsworth2@nhs.net	
Gabi Woolf	gabrielle.woolf@nhs.net	
Ben Brown	ben.brown@nhs.net	
Richard Merrick	richardmerrick@nhs.net	
Jonathan Fok	j.fok@nhs.net	
Demography		
One of two offices for the Health Protection Team within the East of England (Milden Hall is the other).		
Examples of recent projects		
<p>The bulk of time in Health Protection is taken in being on the ‘acute desk.’ This involves receiving enquiries from fellow health professionals and dealing with health protection issues such as notifiable diseases, managing outbreaks and monitoring emergency situations such as fires and chemical incidents. If you are on your first health protection placement learning how to manage these situations will be the key to your placement, with perhaps one or two non-acute projects such as the ones listed below:</p> <ul style="list-style-type: none">• Antenatal Hepatitis B Audit• Investigation into vaccination rates in Thurrock• Audit into the management of invasive Group A Streptococcus		

<ul style="list-style-type: none"> • Audit into the management of measles
Good points
<ul style="list-style-type: none"> • Friendly and approachable team • Everyone is willing to teach • Fun and lively atmosphere within the office
Other considerations
<ul style="list-style-type: none"> • Very different from any other public health placement in that much of the work is reactive rather than proactive • Make sure you tick off all the learning outcomes for Health Protection that you can, you may not do health protection again • If you do not have a clinical background or familiarity with most of the notifiable disease, the initial learning curve may be steep. Regardless of previous knowledge though, everyone should learn to rely on the Standard Operating Procedures folder which describes what information to gather and how to manage cases in detail.
Useful information re location, parking, etc
<ul style="list-style-type: none"> • There is parking on site, but it is first come first serve. There is also free parking about a 10-minute walk away or you can park in the train station car park at a cost. • The train station (Harlow Town) is a 2-minute walk away and may be your best option if you have good transport links from your home. • Sainsbury's is a 10-15 min walk away for lunch or there is a small cafe at the train station.

4.2 Health Protection: Thetford

Last updated 2018

Address		
Thetford Healthy Living Centre Croxtan Road, Thetford, IP24 1JD		
Clinical supervisors		
Name	Email	
Hamid Mahgoub	hamid.mahgoub@phe.gov.uk	
David Edwards	david.s.edwards@phe.gov.uk	
Recent registrars		
Name	Email	
James McGowan	james.mcgowan@mail.harvard.edu	
Sarah Weir	sarah.weir1@nhs.net	
Sandra James	sjames1@nhs.net	
Sarah Gentry	sarah.gentry@doctors.org.uk	
Demography		
<ul style="list-style-type: none">• N/a• Regional health protection service for East of England.		
Examples of recent projects		
<ul style="list-style-type: none">• Hep A audit.• Evaluation of acute service core curriculum.• Organising workshops and scenarios to test a memorandum of understanding between organisations.• Participating in emergency planning exercises.• Around 50-60% of HPT placement is acute desk/reactive work, including investigation and management of outbreaks and situations.		
Good points		
<ul style="list-style-type: none">• Smaller office than Harlow may mean more 1:1 training opportunities.		
Other considerations		
<ul style="list-style-type: none">• Usually only one registrar on placement at a time.		
Useful information re location, parking, etc		
<ul style="list-style-type: none">• Easy parking.• About 45 mins from Cambridge.• 25 minutes by train from Norwich.		

4.3 Health and Wellbeing Team: Cambridge

Last updated 2018

Address		
Public Health England - East of England West Wing Victoria House Capital Park, Fulbourn Cambridge, CB21 5XA		
Clinical supervisors		
Name	Email	
Barbara Paterson	barbara.paterson@phe.gov.uk	
Recent registrars		
Name	Email	
Ben Brown	ben.brown@nhs.net	
Demography		
The health and wellbeing team are part of the East of England PHE Centre and so cover the whole Eastern region.		
Examples of recent projects		
<ul style="list-style-type: none">• Survey of Commissioner/Provider arrangements to reduce drug related deaths• Mapping of Making Every Contact Count (MECC) provision across NHS providers and local authorities• Development of Centre sustainable development strategy• Scoping needs assessment of mental health problems of young people claiming employment support allowance• Focus Group - NaTHNaC website• Involvement with Healthy New Towns and Nationally Significant Infrastructure Project work		
Good points		
<ul style="list-style-type: none">• Access to a depth of expertise on key PH issues e.g. obesity, physical activity, built environment, smoking, drugs, sexual health.• National/regional perspective on key PH issues.• Access to a wide range of regional/ national and locality leads for health improvement work.• Potential for cross working with other Directorates/teams (e.g. health protection, health care public health, LKIS).• The potential to work with localities (i.e. local authorities) on some projects.• Friendly and approachable team• Forward thinking and strategic view• Nice building set in lovely grounds.		
Other considerations		
<ul style="list-style-type: none">• Limited potential to get involved in locality based/service level projects		

Useful information re location, parking, etc
<ul style="list-style-type: none">• Free parking on site.• Access via bus is possible from train/bus station• Approx. 15-20 min cycle from train station

4.4 National Cancer Registration Service, Eastern office (profile last updated 2015)

Address		
Unit C, Magog Court, Shelford Bottom, Hinton Way, Cambridge, CB22 3AD		
Clinical supervisors		
Name	Email	
Sarah Stevens	Sarah.stevens@phe.gov.uk	
Recent registrars		
Name	Email	
Andrea Clement (Author)	Andrea.clement@nhs.net	
Anne Swift	Anne.swift2@nhs.net	
Demography		
National service (England); of which there are 8 regional centres.		
Examples of recent projects		
<ul style="list-style-type: none"> • Mesothelioma Compensation Claims project in which the aim is to establish a system within the NCRS that enables expedited receipt of pathology records and imaging reports for mesothelioma patients. • Facilitation of data transfer and analysis of electronic prescriptions for cancer patients. • Development of a web-based access portal for brain tumour patients to view their cancer registry records 		
Good points		
<ul style="list-style-type: none"> • Opportunity to lead on national level work • Opportunity to work closely with other professionals e.g. data analysts, IT developers etc • Great opportunity to learn about technical aspects of data flows and presentation (to the public or to other professionals) • Very forward-thinking work environment; considerably different culture compared to usual public sector placements 		
Other considerations		
<ul style="list-style-type: none"> • Only registrar in the service base • Sarah is the only PH consultant but happy for registrars to access other consultants eg at PHE centre for Part B practice etc • You need to be confident in directing your own project and understanding what you will have to do to achieve your aims (e.g. identifying networks and stakeholders who can make things happen) – suggest this is most suitable for senior trainees 		
Useful information re location, parking, etc		
<ul style="list-style-type: none"> • Plenty of free parking at Magog Court • Across the road from Babraham Park and Ride for access to Addenbrookes/Central Cambridge • Hot desking arrangements 		

- Some travel required to PHE offices in Waterloo for meetings – access can be arranged for hot desking at Waterloo.

4.5 PHE Field Epidemiology East of England, Field Service, National Infection Service

Address			
PHE, Institute of Public Health, Forvie Site, Robinson Way, Cambridge, CB2 0SR efeu@phe.gov.uk			
Demography			
Part of the PHE National Infection Service Field Service, the East of England Field Epidemiology team covers the whole of the East of England region therefore covers a large and diverse population.			
The team			
Team of approx. 10 individuals who work fairly autonomously; led by Consultant Epidemiologist Dr Mark Reacher. Team's work focuses on the surveillance of infectious disease. Current projects include: improving surveillance with database automation, building a Hep C Case Register, analysis to support TB cohort review and management of TB clusters, surveillance of antimicrobial resistance, STIs and HCAs. Ad hoc support to local and national outbreak investigations. Surveillance on winter pressures. May be opportunities to link to Colindale.			
Clinical supervisors			
Name	Email	Key projects/interests	
Mark Reacher	mark.reacher@phe.gov.uk	<ul style="list-style-type: none">• Consultant Epidemiologist with the team since 2004;• Interests include: surveillance of infectious diseases, outbreak investigation, enteric viral infections, cryptosporidiosis, antibiotic resistance, immunisation, health impacts of flooding, malaria and epidemiology training	
Recent registrars			
Name	Stage of training	Year(s) of placement	Key projects
Helen Benson	ST2	March 2020-@0.5wte	Support to COVID-19 response including: <ul style="list-style-type: none">• Research project into inequalities among confirmed COVID-19 cases resident in the region• Working with colleagues from across Field Services to complete FF100 interviews• Data support to local projects
Jennifer Wilburn	ST2	April 2020 -@0.35wte	Support to COVID-19 response including: <ul style="list-style-type: none">• Research project investigating the interaction between IGRA+ivity and COVID-19 acquisition and severity in a prison setting• Mapping COVID-19 data flows in custodial institution settings• Conducting an audit of COVID-19 prison situations in HPZone to inform future working practices and SOP development

Useful information re location, parking, etc.

The team is based on the ground floor corridor of the Institute of Public Health on the Forvie Site, with small offices each with 2-4 fixed desks. Very friendly team and a pleasant working environment.

The Institute is on the Addenbrooke's site so well served with buses and facilities.

Free parking on site is available by a permit system subject to permit availability (limited numbers); cycle racks also available. Free parking is also available about a mile away at Babraham park and ride. It is an easy walk from the park and ride to the site, or there is a bus that will take you to Addenbrooke's and costs about £2 round trip.

4.6 National Congenital Anomaly and Rare Disease Registration Service, Eastern office (profile last updated 2018)

Address		
Victoria House, Capital Park, Cambridge		
Clinical supervisors		
Name	Email	
Sarah Stevens	Sarah.stevens@phe.gov.uk	Mat leave until Feb 2019 - contact Vicki Peacey in the meantime
Recent registrars		
Name	Email	
Vicki Peacey (Author)	vicki.peacey@nhs.net	
Demography		
National service (England); of which there are 8 regional centres.		
Examples of recent projects		
<ul style="list-style-type: none"> Improving quality of data and outputs across NCARDRS Using congenital anomaly data and routine data sources to estimate prevalence of some rare diseases 		
Good points		
<ul style="list-style-type: none"> Responsibility and leadership Involvement at senior level A relatively new service with huge opportunities for development and improvement. Lots of work to do! A really knowledgeable, dedicated and motivated staff body 		
Other considerations		
<ul style="list-style-type: none"> Only registrar in the service base although likely to be others within other local PHE teams in the building Sarah is the only PH consultant but happy for registrars to access other consultants eg at PHE centre for Part B practice etc You need to be confident in directing your own project and understanding what you will have to do to achieve your aims (e.g. identifying networks and stakeholders who can make things happen) – suggest this is most suitable for senior trainees Content of the work may be personally difficult for some people - data on serious / fatal foetal anomalies, termination of pregnancy, post mortems, extremely unpleasant rare diseases This is a very technical and data-heavy role (although there is more to it than just that) Working from home is not possible if you are using patient level data Team is very spread out geographically and works well through skype and email but this can be a disadvantage when you are new and trying to establish working relationships 		
Useful information re location, parking, etc		

- Parking slightly contentious but is possible about 3 min from the office
- Hot-desking arrangements for registrar
- Some travel required to PHE offices in Waterloo for meetings – access can be arranged for hot-desking at Waterloo. Other travel to other offices (Birmingham / Bristol / Manchester / Newcastle) may be necessary
- I really like this role but it is probably not for everyone as it has some difficult aspects - please get in touch for a chat if you think you might be interested.

5. NHS England

5.1 Essex Screening and Immunisations Team

(Last updated 2018)

Address		
<p>Swift House, Hedgerows Business Park, Colchester Road, Chelmsford, CM2 5PF.</p> <p>Website of organisation:</p> <p>https://www.england.nhs.uk/mids-east/</p> <p>https://www.gov.uk/government/organisations/public-health-england</p>		
Demography		
<p>Registered population: 1.83m people.</p> <p>Area: 3,670km².</p> <p>County city: Chelmsford.</p> <p>Local authorities: three top-tier local authorities – Essex County Council; Southend-on-Sea Borough Council (UA) and Thurrock Council (UA).</p> <p>Local health and social care architecture.</p>		
Department structure		
<p>Essex Screening and Immunisation Team is employed by Public Health England and embedded into NHS England. The Essex and East Anglia Screening and Immunisation Teams are part of NHS England – Midlands and East (East) DCO Team. Although these are still two distinct teams, we work closely together and have some joint working.</p> <p>The structure chart covers the whole Public Health Commissioning Team, which incorporates two Screening and Immunisation Teams.</p> <p>The Public Health Commissioning Team is responsible for commissioning some of the services covered by the Section 7a agreement, as well as Secondary Dental Care:</p> <ul style="list-style-type: none">• Screening programmes: adult and young people; antenatal and newborn; cancer• Immunisation programmes• Child health information systems• Secondary dental <p>The Screening and Immunisation Team is responsible for system leadership for the national screening and immunisation programmes. There are opportunities to lead or be involved in projects and pieces of work across all areas of public health practice.</p>		
Eligibility /suitability criteria		
Suitable for registrars from ST2 (pre or post-Part A)		
Clinical supervisors		
Name	Email	Key projects/interests
Pam Hall	Pamhall1@nhs.net	Overall lead for Screening and Immunisation.

Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Liz Marchant	ST2/3	10/17- 10/18 (1 day per week)	<ul style="list-style-type: none"> Commissioning of an HPV vaccination service in GUM and HIV clinics for MSM Health equity audit of the breast cancer screening programmes Audit of vaccinations given in maternity Review of the evidence for antenatal screening for group B streptococcus carriage against the NSC criteria Ad hoc work including responding to the bowel screening consultation and a patient complaint
Rachel Bath	ST3	07/17-10/17 full time then 1 day a week since 02/18	<ul style="list-style-type: none"> Health equity audit of AAA screening programme Led procurement and evaluation of a flu social media campaign GP survey about call and recall practices for flu vaccination Scoping and planning work for introduction of HPV Primary Screening Covering the imms query inbox Responding to complaints Briefing paper about why we don't screen for lung cancer
Vicki Peacey	ST 2/3	7/15 - 2/16 (part-time)	<ul style="list-style-type: none"> Pertussis immunisation uptake in pregnant women Investigation of serious incidents in screening and immunisations Supporting team in general work Some teaching to colleagues
Molly Thomas-Meyer	Phase 1	7/15 – 1/16 (not a formal placement)	<ul style="list-style-type: none"> Related pieces of work re: cervical screening eligibility (briefing papers, response to Parliamentary question and response to patient complaint). Audit Hep B vaccinations in children born to Hep B positive mothers (ST1/2/3 -- Essex Screening and Imms team & HPT)
Useful information re location, parking, etc			
<p>(LM) I found this placement to be a very positive experience. The team are friendly and welcoming and although often quite busy and it is a lovely working environment with a team ethic. Dr Pam Hall is an excellent supervisor who has a lot of experience and a real interest in her subject. I found that she was able to take the time to support my work and also my wider learning about screening and immunisations and my exam preparation. Personally, I find screening and immunisations to be a very interesting area of public health and that may be why I enjoyed this placement so much. It was a good opportunity to gather experience towards many of the 2015 learning outcomes, particularly the screening learning outcome (2.6) and those around commissioning and incident investigation (section 7). There are also opportunities to work toward learning outcomes around leadership, communication with the public, influencing and negotiating, and working with the media. (RB) I agree with all of</p>			

the above - SIT placement is a really positive experience with lots of opportunities for personal and general development as well as lots of opportunities for LO sign off.

Swift House is on the outskirts of Chelmsford. Close to a large Sainsbury's. It is a 15-minute bus ride from Chelmsford town centre, and is close to several bus routes. Access to the building and car park requires an entry card, which would be supplied. Car parking is free.

5.2 Herts BLMK Screening and Immunisations Team

Address			
Charter House Parkway Welwyn Garden City AL8 6JL			
Background of placement			
The Screening and Immunisation Team is employed by Public Health England and embedded into NHS England. The Public Health Commissioning Team is responsible for commissioning some of the services covered by the Section 7a agreement			
<ul style="list-style-type: none">• Screening programmes: adult and young people; antenatal and newborn; cancer• Immunisation programmes			
The Screening and Immunisation Team is responsible for system leadership for the national screening and immunisation programmes. There are opportunities to lead or be involved in projects and pieces of work across all areas of public health practice.			
The geography covered at this placement includes Hertfordshire, Bedfordshire, Luton and Milton Keynes but the placement also offers opportunities for working with the Essex and East Anglia teams on projects across the region.			
Department Structure			
The team includes:			
<ul style="list-style-type: none">• 2 Screening and Immunisation Leads• 3 Screening and Immunisation Managers (non-cancer screening; immunisation; cancer screening)• 3-4 Screening and Immunisation Coordinators• 2-3 PH Support Officers• 4 members of the commissioning/contracting team			
Eligibility/Suitability Criteria			
Discuss with clinical supervisor- no particular requirements.			
Clinical supervisors			
Name		Email	Phone number
Cath Fenton		cath.fenton@nhs.net	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
Harriet Edmondson	ST3	2020-(ongoing)	<ul style="list-style-type: none">• Flu vaccination uptake: transformation of the delivery model for at risk adults (on hold due to covid-19)• Milton Keynes Diabetic Eye Screening Programme: gap analysis of programme versus service specification and quality improvement• Coordination/ project management involving the pause/rescheduling and recovery planning of screening programmes due to Covid-19• Comms to systems re S&I programmes during COVID• Health inequalities in screening programmes during Covid-19 recovery: evidence review and strategy

Useful information re location, parking, etc			
<p>Situated within NHS England building in the centre of Welwyn Garden City. Lots of shops, cafes, restaurants within easy walking distance.</p> <p>No on-site parking, parking at 5 min walk away in Campus West Car park (salary sacrifice scheme) or free street parking 15-minute walk away.</p>			

6. Providers

6.1 Princess Alexandra Hospital NHS Trust

Address			
Princess Alexandra Hospital NHS Trust, Hamstel Rd, Harlow CM20 1QX. www.pah.nhs.uk			
Demography			
<p>The Princess Alexandra Hospital NHS Trust is located in Harlow, Essex and is a 500 bedded District General Hospital providing a range of acute and specialist services. PAH employs 3,500 staff and serves a local population of around 350,000 people living in west Essex and east Hertfordshire, centred on the M11 corridor and the towns of Harlow, Bishop’s Stortford and Epping. The extended catchment area incorporates a population of up to 500,000 and includes the areas of Hoddesdon, Cheshunt and Broxbourne in Hertfordshire. It also serves as the principle emergency centre for Stansted Airport located 11 miles away.</p> <p>Approximately 60% of patients come from within West Essex CCG (WECCG) catchment, and the remainder come from East and North Herts CCG (ENHCCG).</p> <p>The health profile of the Trust’s catchment population is varied, deprivation is lower than the England average but this masks areas of higher than average levels at both a district and ward level. In Harlow, 23.8 % of 0-15-year olds are living in poverty compared to the catchment average of 15.6%. In addition, 19.6% older people are living in deprivation compared to 14.6% average across the catchment area and 18% in England. Life expectancy is 7 years lower for men and 4.3 years lower for women in the most deprived areas of the Trust’s catchment area than in the least deprived areas. Inequalities can also be seen at a district and ward level, for example in Broxbourne life expectancy is 8 years lower for men and 9.4 years lower for women in the most deprived areas of the district than in the least deprived areas</p> <p>There is currently a proposal to relocate acute services provided by PAH from the existing site in the centre of Harlow to a new greenfield site to the east of Harlow and adjacent to junction 7a of the M11 motorway.</p>			
Public health team			
There is no public health team or PH Consultant on this placement. However, Maggie Pacini is closely linked as the HCPH consultant for West Essex CCG and it is important to liaise with Maggie whilst on this placement to maintain a PH Consultant link.			
Clinical supervisors			
Name		Email	Key projects/interests
Marcelle Michail (Deputy CMO)		marcelle.michail1@nhs.net	Clinical strategy. Her interests are varied and is enthused by any PH work.
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects

Louise Savory	ST4	2016-2017	<ul style="list-style-type: none"> • CQUIN Lead (Staff Health and Wellbeing) • Implementation of Workplace Health Strategy • Pathway design for Hysteroscopy work • Pathway development work for Coeliac Disease Pathway
Ian Diley	ST4	2015-2016	<ul style="list-style-type: none"> • Developed and secured the ratification of the Workplace Health Strategy • Pathway design for Carpal Tunnel Syndrome • Developed Walk to Work Strategy • Developed Public Health teaching for FY2 doctors at PAH
Elizabeth Elliott	ST3	2018-2019	<ul style="list-style-type: none"> • Development of the clinical strategy • Working on Respiratory Programme in partnership with the CCG
Nicola Ainsworth	ST3	2020	<ul style="list-style-type: none"> • Development of clinical strategy (learning disabilities) • Design of new hospital - looking at this from the perspective of staff wellbeing
Useful information re location, parking, etc			
There is a staff car park on site – generally need to arrive by 9am to secure a spot. A nearby car park is available at a cost of £51 per month. Bike racks on site.			

6.2 South Essex Partnership University NHS Foundation Trust

(Last updated 2016)

Address			
The Lodge, The Chase, Wickford, Essex, SS11 7XX http://www.sept.nhs.uk/			
Background of placement			
SEPT is a community healthcare provider running services including mental health (community and inpatient) and other community health services. It provides a good opportunity to understand the role of provider services and working in this environment.			
Department Structure			
Mel is the Public Health Consultant at SEPT, there is not a separate public health team/function, and projects undertaken will involve working with a range of staff across the Trust. Projects will depend on Trust priorities but as a provider Trust they hold patient data, so may particularly suit learning outcomes around audit, data analysis etc			
Eligibility/Suitability Criteria			
<ul style="list-style-type: none">● Post part B, usually at ST4/5 level as requires significant amount of independent practice● Apply through the usual placement panel process and through discussion with the Public Health Consultant at SEPT			
Clinical supervisors			
Name		Email	Phone number
Mel Conway		Mel.conway@sept.nhs.uk	Contact via e-mail
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
Clare Ebberson	ST4	2016	<ul style="list-style-type: none">● Review of the pathway for treatment resistant schizophrenia● Development and implementation of guidelines for medical devices and equipment● Falls audit● Contributing towards service procurement
Useful information re location, parking, etc			
<ul style="list-style-type: none">● Car parking available at the Lodge, travel likely to be required depending on the project as SEPT services are run from a number of locations across South Essex and further afield● The nearest train station to the lodge is Wickford, there are limited public transport options from the station to the lodge			

- This was undertaken as a split placement (0.5WTE), this placement is recommended as a split placement as the Public Health Consultant works less than full time and there is no public health “team” to be based with the rest of the week

6.3 West Suffolk NHS Foundation Trust

Last updated 2018

Address		
Hardwick Lane, Bury St Edmunds, IP33 2QZ		
Clinical supervisors		
Name	Email	Phone number
Nick Jenkins	nick.jenkins@wsh.nhs.uk	01284 713000
Mashbileg Maidrag	mashbileg.maidrag@suffolk.gov.uk	01473 260058
Helena Jopling	helena.jopling@nhs.net	01284 713000
Recent registrars		
Helena Jopling	helena.jopling@nhs.net until Dec 2017	
Molly Thomas-Meyer ST3 (current 2018-19)	mthomas-meyer@nhs.net recent projects: <ul style="list-style-type: none">• Burnout amongst senior doctors and strategies for addressing it• Clinical lead for staff health and wellbeing• Implementing Getting It Right First Time work with specialty teams• Community volunteer programme development	
Demography		
<p>West Suffolk NHS Foundation Trust provides general acute and community services to a catchment population of 275,000 people, across the districts of West Suffolk, East Cambridgeshire and South Norfolk.</p> <p>The population is dispersed across rural communities and small market towns. Life expectancy is high and most health outcomes are good, but inequalities exist with economic deprivation in some areas. The biggest problems are the rural infrastructure and the rapidly aging profile – meeting the health and social care needs of a large elderly population. The political backdrop is majority Conservative with two-tier local government.</p> <p>The trust has adopted a strategic framework with 4 out of 7 ambitions relating to prevention and health improvement http://www.wsh.nhs.uk/Together/WS-Final-Stragegy-Framework.pdf</p> <p>WSFT has held the local contract to provide community services since 2015. Along with primary care, mental health and social care, West Suffolk has declared the intention to evolve into an accountable care system covering the West Suffolk CCG geography. http://www.healthwatchsuffolk.co.uk/neesuffolkstp/</p> <p>Relationships across the patch are “classy” and WSFT punches above its weight in many aspects: care quality, efficiency, national profile, strategic thinking, innovation and training environment. People really like</p>		

working here: the trust received the highest score in the whole country for staff engagement in the 2016 NHS Staff Survey.

Examples of recent projects

This is a new placement which opened in October 2016.

There are opportunities across all domains of public health. Examples of current or potential projects include:

Health improvement

- Lead on staff health and wellbeing and creating a healthy workplace, with a particular focus on mental wellbeing and preventing burnout
- Developing the trust's role in prevention, building partnerships with the council-commissioned lifestyle services and embedding prevention into clinical pathways
- Implement a plan to embed health coaching across the integrated services and evaluate it
- Lead on sustainable development in a complex £200 million organisation
- Lead on the 2017/19 tobacco and alcohol CQUIN

Health protection

- Scope and appraise the implementation of PHE guidance on screening for carbapenemase-producing enterobacteriaceae
- Lead the annual flu vaccination campaign
- Manage or investigate any infection prevention and control incident or outbreak e.g. norovirus, HCAI

Healthcare public health

- Service transformation projects are available across the hospital specialties, at division or service-level, e.g. 'pre'habilitation for elective surgery, 7-day services, out-of-hospital services, individual clinical pathways such as gynaecology or paediatric long-term conditions
- Quality and safety improvement projects such as investigation of serious incidents, complaints, outlying outcome statistics, learning from deaths

Health intelligence

- The trust has Global Digital Exemplar status
 - <https://www.england.nhs.uk/digitaltechnology/info-revolution/exemplars/>
 - with a £10 million award to fully digitise the trust, develop a population health management approach and lead the field in connected, technologically-enabled healthcare. This is a hugely exciting project, creating a fully integrated patient record across all health and social care partners, with all the inherent opportunities for risk stratification, patient-led care, targeting interventions and proper measurement and evaluation of outcomes. This programme will be critical to the success of the area's evolution into an accountable care system.
- The trust is also creating a comprehensive clinical informatics function, using a really sophisticated approach to health data to inform and report on service quality and improvement at the service, division and organisational level.

Good points

The Chief Executive, Prof Stephen Dunn, has a background in policy and strategy with DH and the Eastern region SHA/NHSE

<https://uk.linkedin.com/in/stephen-dunn-b4612721>

Steve was the sponsor for the placement and is a huge advocate for population health principles and values being integral to the organisation's future.

The medical director, Nick Jenkins, who is the clinical supervisor for the placement, has totally embraced the role public health can play in an acute trust and sees the registrar post as a core part of his delivery team.
<https://www.linkedin.com/in/nick-jenkins-9a482544/>

The whole executive team is open-minded, innovative and engaged in the strategic direction. The organisation is small enough that the hierarchy is fairly flat and the prevailing leadership style is democratic. Relationships are well developed between clinicians and managers. Without exception colleagues have been welcoming and interested in the PH placement and keen to understand what PH can offer.

Staff tend to move to Bury and stay put, so there is good organisational memory and continuity in leadership and frontline staff alike.

The potential for PH expertise to add value is massive, and as a novel resource in the trust there is considerable freedom in what to tackle and how (obviously subject to organisational relevance and effectiveness!)

The PH registrar has access to the whole organisation including colleagues in IT, communications, information, finance, general management and transformation. The medical director's team is small so you have limited dedicated resource but can work in a matrix style into any appropriate department.

Work with high business value could be found to meet pretty much any learning outcome in the PH curriculum. Proper media experience is available including radio work and writing for news publications. There is a refreshing Just-Do-It attitude - if something is evidence-based and a good idea, the expectation is it will be implemented. The pace with which decisions are made is an absolute delight.

There is an excellent education centre on-site with a comprehensive library service. Corporate training courses are available to PH registrars; examples include financial management, writing business cases, managing mental health in the workplace, project management, health coaching.

The arms-length supervision from Suffolk County Council works well; registrars are welcome to spend e.g. a day a month with the council team to network with registrar peers, build relationships with the rest of the team, attend CPD events and align projects with county-wide initiatives. SCC also provides a good health intelligence and evidence service which can offer help with literature searches, data analysis and data presentation.

There are plentiful opportunities to teach:

- the hospital hosts the Cambridge Graduate Course with ~20 graduate medics in each year
- foundation doctors have a rolling programme of lunchtime seminars
- the West Suffolk GP training programme
- a large number of nursing and allied health professionals are also trained on-site.

Other considerations

The placement could be tailored to suit a registrar at any stage post-part B. There are two registrar posts available at a time. As the only PH specialists on-site, registrars need to be able to work independently and be proactive, but a more supported induction and closer supervision of projects would be possible for registrars not familiar with the acute setting.

Public health consultant posts are relatively uncommon in acute trusts; there are perhaps 25 nationwide and the same again in community or mental health trusts. With increasing pressure on finances, quality and bed stock and the need to evolve new models of care quickly, there is a strong business case for more CPH appointments in providers and these settings should be considered a growth area for employment over the next 5 years.

Useful information re location, parking, etc

- **Office style.** PH registrars are integrated into the corporate senior management team, who are based in a new purpose-built office building at the rear of the hospital site. There is a fixed desk with a docking station for laptop. Remote access to the IT system facilitates agile working, although it is the norm for staff to work in the office rather than from home.
- **Rail travel.** The hospital site is 2 miles' safe walk or comfortable cycle from Bury St Edmunds rail station, which is served by hourly trains on the Cambridge-Ipswich line.
- **Parking** is available on site for a charge of £30 per month (reductions for part-time hours), or for free at Bury Rugby Club, with a shuttle bus to the site or a safe 1 mile walk. There are six electric car charging points. There is covered cycle parking (super secure option available for a one-off charge of £25. There are good shower and changing facilities with lockers.
- **Food.** There is a staff restaurant offering 4 hot main courses, sandwiches, salad & jacket potatoes every lunchtime, with breakfast, hot and cold snacks and hot drinks available throughout the day. The catering team have received a Suffolk County Council Eat Out Eat Well healthy food award and a Soil Association bronze award for sustainable food. Meat is all sourced locally, eggs are free-range and everything is cooked fresh on-site every day. The cheese scones are legendary.

7. Other placement opportunities in the East of England

7.1 Office of the Police and Crime Commissioner, Cambridgeshire and Peterborough

Last updated 2018

Address		
Office of the Police and Crime Commissioner, Cambridgeshire and Peterborough Cambridgeshire Constabulary Headquarters, Hinchingsbrooke Park, Huntingdon, Cambridgeshire, PE29 6NP http://www.cambridgeshire-pcc.gov.uk/		
Background of placement		
<p>We are in the unique position in Eastern Region of having a previous Director of Public Health as the Chief Executive of Cambridgeshire's Office of the Police and Crime Commissioner.</p> <p>Police and Crime Commissioners are responsible for driving effectiveness and efficiency in policing and increasingly across the wider community safety and criminal justice system. Their work to reduce re-offending and ensure the safety victims, brings them into contact with often the most vulnerable in society. If you want to experience implementing public health in the wider public sector system and using system leadership to tackle social exclusion, this is the placement for you.</p>		
Department		
<p>The directly elected Police and Crime Commissioner and his deputy are supported by a Chief Executive and four directors covering, engagement, performance and policy, partnership working and commissioning, and finance. http://www.cambridgeshire-pcc.gov.uk/transparency/the-office-of-the-police-and-crime-commissioner-staffing/</p>		
Eligibility /suitability criteria		
<ul style="list-style-type: none"> • Suitable for a solo senior registrar (post part B). OPCC happy to host more than one registrar (including junior if senior registrar present) • Lots of system leadership opportunities as well as close working with a political leader. 		
Clinical supervisors		
Name	Email	Key projects/interests
Dorothy Gregson	dorothy.gregson@cambs.pnn.police.uk	Social inclusion and community cohesion, reduction re-offending, meeting the needs of victims focusing on the most vulnerable, e.g. modern-day slavery, domestic abuse, driving efficiency through collaboration and improved partnership working
Recent registrars (last 2 years)		
Emmeline Watkins	Nov 2016 - 2018 ST4/5	<ul style="list-style-type: none"> • Development, commissioning and implementation of Offending Prevention and Management Strategic Needs Assessment - with a focus on wider aspects such as housing, employment and education, drugs and alcohol and mental health • Involvement in devolution and combined authority

		<ul style="list-style-type: none"> • Social Value Act
Useful information re location, parking, etc		
<p>Based in Police HQ, Huntingdon with easy access by car and public transport.</p> <p>Police Canteen</p> <p>Friendly, small team.</p>		

8. National Treasures

A full list of the National Treasure placements is available at:

http://www.fph.org.uk/national_treasures_placements#placements

8.1 Behavioural Insights Team, Department of Health

Address			
Richmond House, 79 Whitehall, London, SW1A 2NS http://www.fph.org.uk/national_treasures_placements			
Background of placement			
Working on behavioural insights in healthcare services. See national treasure website for up to date details.			
Department Structure			
<ul style="list-style-type: none">• Small team (currently 3 members, all working less than full time on behavioural insights, one of whom is based in Leeds) within Science, Research and Evidence Directorate• There is also a small behavioural insight team based within PHE			
Eligibility/Suitability Criteria			
<ul style="list-style-type: none">• Post part B• There is a national application process as part of the national treasure placements (application form and interview). Application round usually annual in Spring, advertised through public health registrar yahoo group, TPDs etc. Would recommend contacting the team directly if interested for details of application / other opportunities (up to date contact details available on national treasure site above)• This is an out of programme placement and have to apply for Health Education England Out of Programme approval as well as approval via placement panel as usual• Nb. On call duties cannot be undertaken while on this placement as it is out of programme			
Clinical supervisors			
Name		Email	Phone number
Please see national treasure website above for up to date details			
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
Useful information re location, parking, etc			
<ul style="list-style-type: none">• This placement is not eligible for travel expenses to London (can claim usual business expenses but not travel to placement)• In addition to project work, range of shadowing opportunities available to self-organise e.g. health select committees, meetings with Deputy Chief Medical Officer etc. Range of “policy certificate” sessions and science seminars etc can be attended			

8.2 Department for International Development

(Last updated 2015)

Address
22 Whitehall, London OR Abercrombie House, Eaglesham Road, Glasgow G75 8EA https://www.gov.uk/government/organisations/department-for-international-development
Background of placement
<p>This is a National Treasure place which has been running for many years. You work as a 'health adviser' within the Department. It is a highly challenging and rewarding placement suitable for senior registrars who want experience of working at near-consultant level. You will be given lots of responsibility and have to cope with a very fast pace of work. DFID has excellent health advisers, a number of whom are former registrars. There's a chance to make a real contribution to improving health in developing countries as well as influencing policy at national and international level. It also allows you to move on from discrete project work to taking on a portfolio of responsibility.</p> <p>Placements are advertised once per year and usually sent round the national mailing list. Registrars are chosen through an application and competitive interview process. Experience of working overseas in developing countries is desirable but not usually mandatory.</p> <p>Placements are usually offered in one of two divisions: Policy Division or Research and Evidence Division and can be in either of DFID's UK offices (London or Glasgow).</p> <p>Working in Policy Division includes a range of work areas:</p> <ul style="list-style-type: none">• policy development: looking strategically at how DFID can be most effective in improving health in developing countries. This includes influencing policy within the Department, across Departments and with multi-national organisations (e.g. WHO).• programme design and management: DFID commissions a range of high value health programmes which need to be managed and evaluated;• Parliamentary work: advice and briefings to ministers, drafting answers to Parliamentary and public questions put to Ministers. <p>Working in research and evidence division is an area which I have less experience of but involves commissioning research organisations and collaborations to produce new evidence on what works in Global Health as well as providing up-to-date evidence for use across the organisation.</p>
Department Structure
<p>The Department is run by 3 ministers (Secretary of State, Minister of State and Parliamentary Under Secretary of State). The head Civil Servant in the Permanent Secretary. There are several divisions but those which deal with health are: Policy Division, Research and Evidence Division, and Global Funds Department.</p> <p>Within Policy Division registrars are usually placed in one of two teams: Health Systems Team or Sexual and Reproductive Health Rights Team.</p>
Eligibility/Suitability Criteria
Post Part-B

Clinical supervisors			
Name		Email	Phone number
Chris Lewis		chris-lewis@dfid.gov.uk	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
<p>Useful information re location, parking, etc</p> <p>Most likely location is central London but office space there is tight so if you are willing to work in Glasgow it might help your application.</p> <p>It's worth thinking about the financial consequences of this placement: travel costs to London are high and may not be reimbursed by the programme; you are unlikely to get a London weighting for your salary; you will probably have to come off the on call rota.</p>			

8.3 Foundation for Genomics and Population Health (PHG Foundation)

(awaiting update)

Address		
PHG Foundation, 2 Worts Causeway, Cambridge, CB1 8RN		
Clinical supervisors		
Name	Email	Phone number
Mark Kroese	mark.kroese@phgfoundation.org	01223 761900
Recent registrars		
Name	Email	
2015 Charlotte Warren-Gash (author)	c.warren-gash@ucl.ac.uk	
Demography		
This is an independent policy think-tank. Results of projects are applicable nationally/ internationally.		
Examples of recent projects		
<ul style="list-style-type: none">Published report on modelling outcomes of whole genome sequencing used to screen for high risk breast cancer variants in unselected populationsReview of evidence for the clinical validity of inclusion of a range of susceptibility genes in colorectal cancer gene panelsProduction of expert opinion pieces on recent genomic advances for the PHG Foundation blog		
Good points		
<ul style="list-style-type: none">Gives an excellent grounding in genomics and frameworks to evaluate use of genomic technologies for population healthAcademically rigorousOpportunity to work with people from different backgrounds e.g. ethics, law, economics. policy as well as partners from other organisations e.g. universities, NHS England, charitiesFlexibility to tailor project work around areas of interest and time spent at the organisationOpportunities to attend National meetings e.g. the UK Genetic Testing Network and the Joint Committee on Genetics in MedicinePotential to publish academic papers		
Other considerations		
<ul style="list-style-type: none">This is most suitable for motivated individuals with a strong interest in genetics/ science who are able to direct their own projectsSupervisors are happy to consider full-time or part-time placements		
Useful information re location, parking, etc		
<ul style="list-style-type: none">The PHG Foundation is located at Strangeways Research Laboratory which is a 5-10 minute walk from Addenbrooke’s hospitalThe guided bus way connects the hospital to Cambridge train station.		

8.4 Public Health England, National Knowledge and Intelligence division

(Last updated 2016)

Address		
<p>Main base for East of England - Public Health England, West Wing, Victoria House, Capital Park, Fulbourn, Cambridge, CB21 5XA</p> <p>As this is a national placement there are also opportunities to be based in other PHE centres in London, Harlow, Thetford etc</p> <p>The K&I division are an enabling force for the public's health and produce and interpret information to identify priorities and advocate opportunities for action.</p> <p>Their Vision is to:</p> <ul style="list-style-type: none"> • provide a forward-looking service, flexible to user needs with an international reputation • highlight the potential to improve health by focusing on health inequality, healthcare variation and future threats to health • provide knowledge and intelligence that leads to action locally or nationally 		
Demography		
N/A – covers whole country		
Department Structure		
<p>The Knowledge and Intelligence Division employee approximately 200 people across England and is part of PHEs Chief Knowledge Offices Directorate.</p> <p>The team is divided into 6 functions which fit together and offer different perspectives as follows:</p> <ul style="list-style-type: none"> • Data science – ensure data quality and governance, consistency in the use of analytic methods and test new approaches to intelligence and knowledge provision • Epidemiology and surveillance – systematically highlight areas of concern for population health and causes of inequalities (including production of the Public Health Outcomes Framework) • Risk factors – provide new insight into how risk factors impact on health, including work on how risk factors cluster together. • Chief economist and health intelligence networks – Advocate the need for and lead work on health economics across the organisation as well as developing health intelligence networks and support workforce development • Clinical epidemiology – lead and advocate how healthcare services can improve population health, including a particular focus on healthcare variation and value, end of life and liver disease • Local knowledge and intelligence – ensure that our high profile products are known and used by our key audiences as well as responding to local enquiries • Business support – create and support the infrastructure that allows delivery 		
Eligibility/Suitability Criteria		
<p>Post part B</p> <p>Peter is looking for trainees who wish to develop political, negotiation, influencing or leadership skills and is looking for leadership experience as a bridge to a consultant role.</p>		
Clinical supervisors		
Name	Email	Phone number

Dr Peter Bradley, Director of Knowledge and Intelligence		Peter.Bradley@phe.gov.uk	07717 546551
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
Useful information re location, parking, etc			
<p>This is extremely flexible placement with opportunities to work on projects across the 6 functions.</p> <p>A lot of the work is undertaken virtually with colleagues across the country e.g. York, Birmingham, Bristol. It can take a little while to adjust to this style of working.</p> <p>As this is a national role, some travel could be anticipated especially to London where some meetings take place. Although this placement is officially a national treasure, the application process is not burdensome (have a discussion with Peter).</p> <p>Peter has capacity for two registrars at any one time.</p>			

8.5 Nuffield Trust

(Last updated 2015)

Address			
59 New Cavendish St, London W1G 7LP www.nuffieldtrust.org.uk/			
Background of placement			
The Nuffield Trust aims to improve the quality of health care in the UK by providing evidence-based research and policy analysis and informing and generating debate. Nigel Edwards is the Chief Executive. The Trust is accountable to its Board of Trustees – as at July 2016 Andy McKeon is set to succeed Professor Dame Carol Black as Chair. The role of the Trustees is to set the Nuffield Trust's overall strategic direction and to ensure this meets the charitable objectives set for the organisation.			
Department Structure			
The Nuffield Trust is an independent organisation (approx. 45 employees) and has charitable status. It is one of the three high profile health policy think-tanks. As at July 2015 there was a communications team, the administration team, the research team (Director – Martin Bardsley, (although as at July 2016 John Appleby due to start this role), workforce & policy team (Director – Candace Imison). Some work is funded from the Nuffield Trust budget and other work is funded through grant application.			
Eligibility/Suitability Criteria			
<ul style="list-style-type: none"> • Post Part B. • Interest in health policy and the politics of health care, healthcare public health, quantitative and /or qualitative research methods. • Need to be able to create and take opportunities as well as take ownership of work - there is opportunity to design, make case for and lead own areas of work. • Must be good communicator able to deliver written reports, give presentations, contribute to Nuffield Trust blog and contribute a public health perspective in meetings, in rapid response to national policy announcements and as part of a multi-disciplinary team. • Depending on areas of work there may be opportunities to interact with national politicians, engage with senior leaders across the system, give media interviews and prepare work for publication as a Nuffield Trust report or for peer-reviewed journals. • For additional points see national treasure form available through FPH website. 			
Clinical supervisors			
Name	Email	Phone number	
Alisha Davies and Martin Bardsley	Use contact details given on national treasure form available through FPH website		
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key Projects
Useful information re location, parking, etc			

Central London location, just off Marylebone High Street – providing lots of lunch options. On several bus routes. Walking distance to a range of tube stations including Bond Street, Baker Street, Oxford Street and Marylebone train station. Boris bike parking just over the road.

8.6 Sustainable Development Unit

Please note that although this is a National Treasure, EoE PH trainees do not need to apply via the usual National Treasure route as it is within the EoE region.

Address
Victoria House, Capital Park, Cambridge, CB21 5XB http://www.sduhealth.org.uk/
Experience available
<p>The SDU is a national unit based in Cambridge working on behalf of the health and care system in England. It was established in April 2008.</p> <p>They support the NHS, public health and social care to embed and promote the three elements of sustainable development - environmental, social and financial.</p> <p>The Unit is jointly funded by, and accountable to, NHS England and Public Health England to ensure that the health and care system fulfils its potential as a leading sustainable and low carbon service.</p> <p>The post holder will lead specific project(s) or work stream(s) which are relevant to their learning needs. Examples might include:</p> <ul style="list-style-type: none">• supporting a local strategic planning group or vanguard site to embed sustainable development (SD) into their transformation plans• advocating with other national teams for SD principles to be included in policy and strategy• producing a national staff engagement pack to support SD in workplaces and communities and leading its rollout• overseeing research commissioned by SDU and partners on health co-benefits of sustainability actions. <p>Registrars also participate in day-to-day unit business, including attending team meetings, network meetings and national events. Opportunities can be created to meet generic learning outcomes such as data analysis, research, working with the media and financial management as suits the registrar's learning needs.</p> <p>It is also a significant advantage that the unit is hosted by NHS England and located in Victoria Park alongside regional NHSE teams, PHE, HEEoE, NHS Improvement. Registrars who are keen to learn about how other parts of the system work can make contacts. Access to the NHSE intranet is provided.</p>
Eligibility /suitability criteria
<p>Post Part B</p> <p>An interest in national and international policy and in sustainable development is essential. In-depth knowledge about sustainable development is not essential provided the registrar is willing to learn quickly.</p> <p>Ability to work independently and to handle complexity, uncertainty and challenge is essential, as in an in-depth knowledge of the structure of the health and social care system. The SDU is a national policy unit; the registrar must be comfortable and confident meeting, influencing and networking with senior managers and leaders from national, regional and local organisations.</p> <p>The ability to travel to national and regional events approximately quarterly is desirable.</p> <p>Placements become available every year at the SDU and last 6-12 months. Applications for pro-rated LTFT placements are welcomed – a minimum of 6 months WTE is required at not less than 60%.</p>

Clinical supervisors			
Name	Email	Key projects/interests	
Dr David Pencheon OBE	David.pencheon@nhs.net	David set up the unit in 2008 and is a national leader in SD. He has a broad PH background including time as a DPH, director of ERPHO and as TPD for the training programme.	
Recent registrars (last 2 years)			
Name	Stage of training	Year of placement	Key projects
Helena Jopling	ST4	2016	My main project has been advocating for Sustainability and Transformation Plans to address clinical, environmental and social sustainability in their footprint as well as financial. This has included direct approaches to STP teams, negotiation and influence with national and regional NHS England teams, working with PHE regional leads, engagement with regional networks of sustainability professionals, support to individuals working on SD for STPs in their organisations. I also worked on the communications for a new publication and have set up a research project on registrars’ and supervisors’ approach to learning outcome 5.7 in the 2015 PH curriculum.
Useful information re location, parking, etc			
<p>The unit is based in Victoria House.</p> <p>Transport:</p> <ul style="list-style-type: none">• Good cycling facilities – secure covered parking and showers. 30 minutes from Cambridge station, routes along back roads and cycle paths are straightforward.• Bus route stops immediately outside.• Free parking available. <p>There is an on-site café with good healthy hot and cold options, also a coffee van which comes at 9am and a sandwich van which comes at lunchtime. Shared kitchen for making tea and coffee, a fridge and a microwave are available. There is a good staff breakout area.</p> <p>Victoria House sits in beautiful parkland and registrars are encouraged to make use of the grounds for exercise, meetings and to work away from their desk.</p>			

9. Higher specialist training and fellowships

9.1 Health protection specialist training programme

More information on this can be found here:

https://heeeoe.hee.nhs.uk/sites/default/files/docustore/2015-12-10_heee_hp_training_in_eoe_final_v1_1.pdf

9.2 Field epidemiology training programme fellowship

More information on this can be found here:

<https://www.gov.uk/guidance/field-epidemiology-training-programme-fetp>

10. Further education courses

There is also an opportunity to study for a Postgraduate Certificate in Education (PGCE), supported by a Trainee Bursary from Health Education England. More information about applying for the bursary is here:

<https://heeoee.hee.nhs.uk/node/1884>

There are 3 PGCert in Medical Education courses in the East of England region. This document provides some information about each of the courses, some of the strengths and weakness, as well as feedback from registrars who have completed these courses.

University of Bedfordshire

Course title and link	PGCert Medical Education (can also continue to PGDip and MA) https://www.beds.ac.uk/howtoapply/courses/postgraduate/next-year/medical-education
Fees	£2330 in 2018-19
Duration and start date	1 year part-time October and February start
Location	Putteridge Bury Campus, Luton
Course lead	<i>Unclear</i>
Course Accreditation	Academy of Medical Educators
Modules	<ul style="list-style-type: none"> • Medical Education in Practice • Plus one further module from Workplace Based Learning or Educational Perspectives
Delivery	Days attendance (5-6 days per 10 week term) plus online learning
Assessment	Reflective report; teaching observation; literature review; individual report; group presentations
Positives	<ul style="list-style-type: none"> • October and February entry • Cost • Possibility to continue to PGDip and MA • Named supervisor who will provide feedback on observed teaching • More flexible as modular • More multi-disciplinary than some courses • Registrars reported good quality of teaching • Interactive rather than traditional classroom approach
Negatives	<ul style="list-style-type: none"> • Travel to Luton • Does not give you Higher Education Academy fellowship • Less cohort feeling due to different modules and workshops • Only 2 modules to choose from
Other feedback	<ul style="list-style-type: none"> • One registrar said they didn't choose this course as nothing about it stood out. • "Overall I found the course really good – quality of teaching was v. good and course was very interactive rather than a traditional "classroom" approach – each module had a couple of core days – which were short lectures with interactive activities and then

	<p>you would select a number of workshops for each module – practical days where you learn hints and tips re: teaching – this was exactly what I was looking for at the time.”</p> <ul style="list-style-type: none"> • “Modules – module 1 is an overview of how to set a good teaching session e.g. objectives, interactive tasks, etc. and includes observed teaching, you get a choice of second module – I picked one about different educationalists and their techniques/ theories of learning”. • “Assignments – usually a short and longer written piece for each module – module 1 focuses on reflection, and reflecting on teaching delivered as well as feedback. Beds give you an assessor from the uni to observe you teaching and provide feedback – useful to have this independent feedback. There are also some group presentations that are assessed. I think you have to deliver and reflect on at least 3 teaching sessions for module 1 so worth planning those in. There aren’t any exams”. • “Teaching took place at Beds campus in a lovely old house in the countryside (I can’t now remember the name of the campus) – it’s a taxi journey from Luton station.”
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University of Cambridge

Course title and link	PGCert in Medical Education (can also continue to PGDip) https://www.ice.cam.ac.uk/course/postgraduate-certificate-medical-education
Fees	£3,950 in 2018-19
Duration and start date	1 year part-time October start
Location	Institute of Continuing Education, Madingley Hall, Cambridge
Course lead	Dr Jeremy Webb and Dr Clare Morris
Course Accreditation	Academy of Medical Educators Higher Education Academy
Modules	<ul style="list-style-type: none"> • Core Skills in Medical Education • Applying Teaching Skills • The Role of Assessment
Delivery	9 full days attendance across the year plus private study
Assessment	Reflective diaries; peer review; 2 x summative assignments (4500-5500 words)
Positives	<ul style="list-style-type: none"> • Location • Dual accreditation • Possibility to continue to PGDip • Cambridge degree • Cohort feeling as together as one group • Registrars reported good quality of teaching
Negatives	<ul style="list-style-type: none"> • Cost • October entry only • Not modular so no ability to tailor • Has been very heavily medically orientated (but may be changing)

Other feedback	<ul style="list-style-type: none"> ● “I liked the teaching style, mainly because the two course directors, Jeremy Webb and Claire Morris’s styles really suited me. They are both very reflective and the course is designed around reflective learning and assessment, which I like”. ● “The workload is very manageable; they have designed the course with busy medics in mind so it is very much geared towards you doing your coursework as part of your normal teaching commitments”. ● “Workload is generally manageable with a bit of prep before each session. Assignments included a reflective essay, a lesson plan, and a presentation. Nothing too onerous.” ● “The course is designed for medics though. The difference in course title of ‘medical education’ as opposed to ‘clinical education’ is an important one. When I did the course all the other students were doctors and all the teaching scenarios and assessments were based on medical training. It wasn’t difficult to translate the learning into public health contexts - and often I find you can learn more from hearing about something in one context and having to apply it into your own. But some of the typical prejudice against public health came out from our fellow students and also tutors, which I was surprised by. I also found the group’s willingness to be challenged on some of the more old fashioned approaches to medical education was limited.” ● “Observed practice opportunities were not formally organised but were arranged between peers. You are assigned a tutor in small groups. You have little formal contact however are there if you need them.” ● “Overall, I would say it is a really good course, and of course you get the benefit of another Cambridge qualification. Other courses provide a more diverse cohort of fellow students though”. ● “Overall, it was a positive experience. The programme content was very good; there were lots of students with good experience to learn from and very good quality teaching – particularly from Clare Morris.”
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University of East England

Course title and link	PGCert in Clinical Education (can also continue to PGDip or MSc) https://www2.uea.ac.uk/study/postgraduate/taught-degree/detail/pg-certificate-clinical-education-part-time
Fees	£2,500 in 2018-19
Duration and start date	1 year part-time October start
Location	Norwich
Course lead	Dr Veena Rodrigues
Course Accreditation	Higher Education Academy
Modules	Enhancing Teaching and Learning Leading Teaching and Learning
Delivery	9 full days attendance across the year plus private study

Assessment	2 x 4,000 word essays and one summative verbal presentation
Positives	<ul style="list-style-type: none"> • Cost • Possibility to continue to PGDip and MSc • Multidisciplinary cohort
Negatives	<ul style="list-style-type: none"> • Travel to Norwich • October entry only • Not accredited by Academy of Medical Educators • Not modular so no ability to tailor • Has previously had lots of medical students (lack of experience to learn from and viewing it as their “year off”)
Other feedback	<ul style="list-style-type: none"> • “Course is delivered by attendance roughly 5 times per module plus private study and reading. There were around 35 in the class. The group was multidisciplinary which was really good as a non-medic. The group consisted mostly of medical registrars, nurses and intercalating medical students but there were some from other professions too. “ • “It is a mix of lecture and class based discussion. There is also a useful online platform with all course materials. The assignments were 4000 word essays based on reflective practice. They were very good at providing prompt feedback on assignments”. • “The course covers a lot of theory, perhaps a little too much. It does lack practical tips and observed practice, which are offered in some courses. It is much more about how you present your teaching and bring theory in to your teaching rather than observed. You do really need to teach regularly in order to put your learning in to practice and to reflect for your assignments.” • “Overall I really enjoyed the course and it has been beneficial to me. The multidisciplinary nature was certainly a strength. The number of medical students was a little frustrating - they lack experience plus could be a little disruptive as some viewed it as more of a year out. The workload between sessions was also pretty high.”

Accreditation

Higher Education Academy:

- Fellowship is increasingly becoming a requirement of University Lecturers probation. Fellowship obtained by completing an accredited course or by portfolio.
- <https://www.heacademy.ac.uk/individuals/fellowship>

Academy of Medical Educators:

- <http://www.medicaleducators.org/Why-join-AoME>

Elizabeth Marchant, April 2018

Acknowledgements: Clare Ebberson, Helena Jopling, Ian Diley, Rebecca Hams