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| THE UNIVERSITY OF NOTTINGHAM  RECRUITMENT ROLE PROFILE FORM |

**Job Title:** Clinical Associate Professor in Medical Education

**School/Department:** School of Medicine, Education Centre

**Salary:** £75,249 – £101,451 per annum, depending on seniority

**Job Family and Level:** Clinical Academic, Clinical Associate Professor

**Contract Status:** Permanent

**Hours of Work:**  Full time

**Location:** Education Centre, B Floor, Medical School, QMC - Nottingham

**Reporting to:** Dean of Medical Education

**Purpose of the Role:**

The MMedSci in Medical Education began at the University of Nottingham in 1998. It has been a popular course and over the years has attracted people from a range of professional backgrounds e.g. nursing, veterinary medicine, pharmacy, occupational therapy, dentistry and medicine. There are typically 35-50 new students enrolling each year, the majority are part-time students employed in the East Midlands taking the PGCert in one year, PGDiploma in two and Masters in three years. Each year there are approximately 5 full time students who aim to complete the Masters in one year.

The course has just been redesigned to have a greater clinical focus and be more accessible to students living out with the immediate Nottingham area. The role holder will take over as Course Director of this programme on the retirement of the present Director at the end of the 2015/6 academic year. The Course Director is supported by two 0.5 WTE assistant professors in medical education, one of whom is a psychometrician.

The current course schematic is laid out below;

Year one modules (compulsory) 60 credits PGCert Credits Module Convenor

A24NC1 MedWise\* 10 Postholder

A24NC2 Learning Theories\* 10 Postholder

A24NC3 Introduction to Teaching and Learning 10 Postholder and Asst Prof

A24NC4 Introduction to Assessment 10 Asst Prof

A24NC5 Humanities, Ethics and Professionalism 20 Asst Prof

\*purely online modules

Optional modules 60 credits PGDip Credits Module Convenor

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| A24NC6 | | PsychometricAssessment: Theory & Practice | |  |  | 20 | | Asst Prof |
|  | Principles of Leadership and Management | | | | | | 20 Prof G Doody | |
|  | | | Fundamentals of Simulation-Based Education in Healthcare | | | | 20 Honorary Prof B Baxendale | |
| A24NC9 | | | Problem Based Learning in Medicine and Health Sciences | | | | 20 Postholder and Asst Prof | |
| A24N11 | | | Supervising PG trainees in the modern NHS | | | | 20 Dr Gill Pinner | |
| A24N12 | | | eLearning in Clinical Education | | | 20 Dr Heather Rai | | |
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Dissertation module 60 credits MMedSci

A24N13 Research Methods and Dissertation 60 Course Team

The majority of modules (with the exception of the purely online modules and dissertation) have two contact teaching days. The rest of the material is delivered online line via the University virtual learning environment Moodle, using Adobe Connect tutorials as appropriate.

The post holder will also be responsible for the “Train the Trainers” agenda in the medical School, ensuring all those with teaching and learning responsibilities to UG medical students are appropriately trained. This is currently achieved using the MedWise online teaching package, which is hosted by the Royal College of General Practitioners on their website.

Thus, the post holder will have a significant leadership role in medical education.

It is anticipated that the post holder will be research active in the field of medical education, with a track record of attracting grant income and publishing papers in peer reviewed journals in the field. Preference will be given to applicants with research interests in remediation and educational interventions. The postholder will be expected to supervise PhD students (attracting them to study with the medical education centre), Masters students and Undergraduate BMedSci medical students. There are already four PhD students working within the department.

Within the clinical component of the role, it is anticipated that the appointee will work within the Nottingham Renal and Transplant Unit and will be expected to:

* Participate in the consultant led services within the renal unit (as agreed in the job plan)
* Provide reciprocal cover for periods of leave.
* Take responsibility for the care of patients in his/her charge and the proper functioning of the department.
* Take an active role in clinical governance activities including (but not restricted to) clinical audit, incident reporting, review of complaints, risk management, CPD and Evidence-Based Practice.

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|  | **Role Outline**  Course Director of MMedSci in Medical Education  Direct responsibility for the management, recruitment, curriculum design and development, conduct, delivery and assessment of the PGCert, PGDip and MMedSci courses in Medical Education, to ensure that the courses reflect the School and Universities policies, practices, and processes.  Liaise with external bodies and internal staff to support course delivery and design and academic support for students.  Module convenor for modules on this course, as required.  Teach on face to face teaching days and host Adobe Connect tutorials as required  Contribute to interim and final PGT examination boards, and facilitate learning community fora and student evaluation to optimise student satisfaction, progress and retention on the course.  To provide academic leadership for the course for Quality Assurance, and act as PGT lead for Division of Medical Education  Other direct educational activities  Direct responsibility for ensuring that University of Nottingham School of Medicine staff involved in teaching and learning UG medical students comply with GMC train the trainer requirements.  Offer regular training sessions for UG clinical educators on best pedagogical practice as requested by line manager.  Contribute to Quality Assurance of teaching, including attendance at relevant Teaching and Learning committees.  Research Activity in Medical Education  Obtain research grant income and conduct a programme of research into medical education  Publish original articles in peer reviewed journals in medical education  Act as principal supervisor for PhD, MPhil, MMedSci and BMedSci student projects in medical education  Organise an annual one day “Faculty Education Research Group” conference to highlight research occurring in the Faculty into medical education  Offer best pedagogical research evidence to those tasked with redesigning the UG medical curriculum.  Clinical work  Work to the terms of an honorary clinical consultant contract in Renal Medicine with Nottingham University Hospital Trust  Any other duties as requested by the post holder’s head of school or line manager.  Equality and Diversity  Ensure renewal of Equality and Diversity Training every 3 years. | **% time per year**  **25%**  **5%**  **20%**  **50%** |

***Knowledge, Skills, Qualifications and Experience***

|  |  |  |
| --- | --- | --- |
|  | **Essential** | **Desirable** |
| **Qualifications/ Education** | Medical Graduate.  GMC registered with a license to practise  MD or PhD  Higher qualification in medical education  MRCP or equivalent  Entry on the GMC Specialist  Register via:   * CCT (proposed CCT date must be within 6 months of interview) * CESR or European Community Rights |  |
| **Skills/Knowledge** | Knowledge of Tomorrow’s Doctors 2009  Good organisational and time managements skills  Understanding of key concepts in  undergraduate and postgraduate education.  All round computer literacy in a range of packages/areas including MS Office, excel, and access.  Good communication and interpersonal skills.  Understanding of GMCs Good Medical Practice documentation.  Proven track record of obtaining research grant income in the field of medical education  Publications in medical education in peer reviewed journals.  High level of clinical experience and competence in nephrology / general medicine  Competent (including ability to perform, supervise and teach) in interventional nephrology procedures including native and transplant renal biopsies and obtaining non-tunnelled central vascular access for dialysis | Familiarity with Virtual Learning Environments e.g. Moodle  Research interest in remediation in UG and PG medicine and educational interventions. |
| **Experience and Personal Attributes** | Ambitious, enthusiastic, responsible, flexible  Ability to work both independently and in a team  Experience and aptitude in educational leadership  Highly motivated  Accurate and attentive to detail  Ability to work to tight deadlines  Collaborative working and ability to lead a team.  Conscientious |  |
| **Statutory/Legal** | Satisfactory enhanced disclosure from the Disclosure and Barring Service |  |
| **Other** | Willingness to adopt the Ethos and Principles of the School of Medicine to improve the student experience  Ability to travel to fulfil the requirements of the post |  |

**Decision Making**

i) taken independently by the role holder

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| * All decisions relating to learning objectives, curricular content, assessment planning, implementation and marking in the MMedSci in Medical Education. * Any actions relating to the train the trainer programme or the provision of MedWise. * Handling of any complaints or appeals arising from the modular content or its assessment. * Will act in accordance with Local, Hospital and Statutory Guidelines & Policies including Health and Safety initiatives. * Will be familiar with the Health and Safety at Works Act, and be aware of its implications and ensure that local unit and departmental policies are followed. |

ii) taken in collaboration with others

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| Any decisions regarding student progression, response to external examiner reports  Any complaint outcome actions relating to the MMedSci course  Any decision regarding performance management of line managed staff  Liaison with Health Education East Midlands regarding the future direction or funding of MedWise  Legal advice with host providers regarding website hosting of MedWise  Any decisions to alter the current structure of the MMedSci in Medical Education  Any pastoral issues raised by personal tutors of MMedSci students  Any concerns regarding Fitness to Practice of active clinicians engaged in the MMedSci in Medical Education |

iii) referred to the appropriate line manager (Dean of Medical Education) by the role holder

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| Any legal disputes arising from the contractual webhosting arrangements for MedWise  Any student complaints or appeals that cannot be satisfactorily dealt with by the MMedSci in Medical Education team, or that involve a direct conflict of interest  Any student appeals to the Independent Official Adjudicator  Any direct conflict of interest that arises from the postholders academic related activities  Anything that the postholder perceives may jeopardise the continued provision of either the MMedSci in Medical Education or MedWise |

**The Clinical Component of the Clinical Associate Professor post**

**Main Duties & Responsibilities of the Post:**

It is anticipated that the appointed candidate would also undertake appropriate clinical duties in the Renal and Transplant Unit at Nottingham University Hospitals NHS Trust. Further details regarding the unit and clinical service are detailed later in this document.

An honorary consultant contract will be offered by Nottingham University Hospitals NHS Trust in line with the clinical academic contract. Key duties & expectations of the post in respect of NHS work include:

• Contribution to the inpatient renal ward cover, out-patient service and the provision of the AKI service to the QMC campus.

• Provision of leadership to the ongoing development & performance of the renal service in Nottingham and representation within the regional cardiovascular network. There are a number of key performance indicators required of renal units, and the appointee will be expected to add leadership, innovation & energy to the quality-improvement agenda.

• Candidates may wish to participate in the on call rota (currently 1 in 9). This will be the subject of additional negotiation with the Trust and additional PA’s would be available to facilitate this.

• Facilitating increased recruitment of patients into NIHR portfolio-listed research studies in nephrology.

• Professional supervision & management of junior medical staff.

• Responsibilities for carrying out teaching, examination & accreditation duties, as required, e.g. for Foundation trainees & junior doctors, and for contributing to undergraduate, postgraduate & continuing medical education activities, locally & nationally.

• Participating in annual appraisal & job planning; medical audit; the Trust's Clinical Governance processes; and CPD.

• Compliance with Trust policies and procedures in relation to research governance.

**Annualised Job Plan**

Under the new Academic Consultant Contract, no Consultant can be required to work more than 10 Programmed Activities (PAs). The following draft Job Plan reflects the best assessment of the final job plan, based on 10 PAs.

**Clinical Direct Clinical Care:**

|  |  |  |
| --- | --- | --- |
| **Programmed Activity** | **PAs** | **Comment** |
| QMC AKI Service | 1 | 6-7 weeks per year |
| Nephrology Out-patients | 1.125 | 42 weeks per year including admin related to clinic |
| In patient ward cover | 0.5 | 6-7 weeks per year |
| Transplant and City referrals cover | 0.225 | 4 weeks per year |
| Travel to peripheral clinic | 0.125 | 42 weeks per year |
| MDT meetings | 0.25 | 42 weeks per year |
| Patient Related Admin | 0.25 | 42 weeks per year |
| **Weekly total** | **3.5 PAs** |  |

**Clinical Supporting Professional Activities:**

|  |  |  |
| --- | --- | --- |
| **Programmed Activity** | **Hours/PAs** | **Comment** |
| CPD, audit, clinical governance | 32 hours annually | Arranged outside attending weeks |
| Training and Educational Supervision | 20 hours annually | Arranged outside attending weeks |
| Clinical Lead Role | 11 hours annually | Arranged outside attending weeks |
| Annualised Subtotal | 63 hours annually |  |
| **Weekly total** | **1.5 PAs** |  |

**University Research & Teaching:**

|  |  |  |
| --- | --- | --- |
| **Programmed Activity** | **PAs** | **Comment** |
| Research and teaching | 210 annually |  |
| **Weekly total** | **5 PAs** |  |

**On-call supplement:**

|  |  |
| --- | --- |
| Rota Frequency: | 1 in 10 |
| Category: | **A** |
| On-call Supplement: | **3%** |

The advertised job plan does **not** include a commitment to the on call rota. Should the appointed candidate wish to take part in the on call rota this would be negotiated with NUH and remunerated as additional clinical PA’s.

Informal enquiries may be addressed to Professor Gill Doody, Dean of Medical Education. Please e-mail [gillian.doody@nottingham.ac.uk](mailto:gillian.doody@nottingham.ac.uk) . Applications to this e-mail address will not be accepted.

**Proposed Timetable**

An example timetable based on the various roles outlined above is illustrated below, but a formal timetable will be agreed following appointment.

**In-patient Cover (6-7 weeks)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | Handover meeting  Patient admin | Ward Round | Board Round  Ward Work | SPA / Patient admin | Ward round |
| **Lunch-**  **time** |  | Hospital grand round |  | Clinical audit / Biopsy meeting | Renal grand round |
| **PM** | University | Nephrology Clinic | University | University | University |

**AKI Outreach Service (6-7 weeks)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | AKI work at QMC | AKI work at QMC | AKI work at QMC | AKI work at QMC | AKI work at QMC |
| **Lunch-**  **time** |  |  |  | Clinical audit / Biopsy meeting |  |
| **PM** | AKI work at QMC | Nephrology Clinic | University | SPA / Patient admin | AKI work at QMC |

**Transplant and Referrals Cover (4 weeks)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | Transplant ward round | Transplant ward round | Transplant ward round | Transplant ward round | Transplant ward round |
| Handover meeting  Patient admin | Referrals  SPA | Referrals | Referrals | SPA |
| **Lunch-**  **time** |  | Hospital grand round | X-ray meeting | Clinical audit / Biopsy meeting | Renal grand round |
| **PM** | University | Nephrology Clinic | University | University | University |

**Out-patient service (24 weeks)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **AM** | University | University | SPA / Patient Admin | University | University |
| **Lunch-**  **time** |  |  |  | Clinical audit / Biopsy meeting | Renal grand round |
| **PM** | University | Nephrology Clinic | University | SPA / Patient admin | University |

**Appendix 1** **– BMBS Courses in Nottingham**

The University of Nottingham offers a five-year undergraduate course to students wishing to become doctors which is accredited and mapped to the outcomes for graduates specified by the General Medical Council in Tomorrows Doctors (2009) [TD]. Application must be made through UCAS. Overall the course has two components. The first part of the course (A100) comprises learning and teaching in both core and advanced biomedical and social sciences, clinical skills, early clinical experience, and results in the award of the classified Honours degree of Bachelor of Medical Sciences at the end of the third year. This part of the course is based in Nottingham. The learning and teaching in the second part of the course (A300) concentrates on full-time clinical training. At the end of this period successful students are awarded the Bachelor of Medicine and the Bachelor of Surgery degrees.

A six-year (A108) Medicine with a Foundation Year Course has been designed to widen access to higher education. It is designed to take 10 students per annum who wish to study medicine, but do not meet the normal requirements for entry onto the A100 Medicine Course, either at A-level or GCSE level and haven't studied at a higher education institution previously. Such students should also meet certain widening participation criteria. “Year Zero” is taught at Derby Medical School and students who successfully meet the progression requirements of the Foundation Year will then join year-one students on the five-year A100 Medicine course.

A Graduate Entry Medicine course (A101) is delivered by the University of Nottingham in partnership with Derby Hospitals NHS Foundation Trust, and is based in a purpose built medical school on the Royal Derby Hospital’s site. This four-year medical course commenced in September 2003 and is open to graduates of any discipline. There is an annual intake of 87 home/EU students who are based in Derby for the first 18 months of their course. On successfully passing examinations at 12 and 18 months these students then join the A300 programme for the remaining 36 months of their studies. This course does not admit overseas students.

A300 begins in semester 4 for A101 (GEM) students and semester 6 for A100 students. It is the beginning of the clinical attachments components of the medical course.

## Clinical Phase 1

Students spend 12 weeks in one of five partner NHS sites Derby, Lincoln, Nottingham City, Nottingham QMC or Kings Mill (Mansfield). During this time students are taught the basic principles of taking a history and undertaking a clinical examination in both medicine and surgery placements. At the end of the attachment students undertake a knowledge based MCQ examination and clinical skills examination. The latter requires the student to take a history from a patient and conduct a clinical examination for 40 minutes (unobserved), prior to presenting the case to two examiners for 6 minutes. The student is then given two further patients in which they must examine a named system, whilst observed by an examiner and they have 6 minutes for each examination. Students failing these examinations in June are permitted to progress conditionally into CP2, but are required to resit them in August of the same year.

## Clinical Phase 2

This commences in mid-July, following a brief break after the CP1 examinations. Currently there are 4 x 10 week placements in this phase.

i.e.

Obstetrics and Gynaecology

Child Health

Psychiatry and Health Care of the Elderly

Specials (Ophthalmology, ENT and Dermatology, each 2 weeks) and a special study module (4 weeks).

Examinations are currently held twice each year in May and December. Each module has both a clinical skills and knowledge based examination (except the special study module). Students take the examinations of the two rotations that they have been undertaking over the last 20 weeks at the end of the period.

Current examination regulations and progression rules for these examinations can be found at;

<http://moodle.nottingham.ac.uk/mod/page/view.php?id=1209962>

The CP2 year is currently under revision. The aim is to deliver a more relevant curriculum with a greater emphasis on community medicine. The School is proposing to adopt the new curriculum for the 2016/17 academic year. A new four week placement in community medicine (integrated care) will be introduced.

This will result in;

* Obstetrics & Gynaecology teaching will reduce from 10 to 8 weeks
* Child Health teaching will reduce from 10 to 8 weeks
* Specials (6 weeks) and SSM (4 weeks) will remain unchanged.
* Psychiatry and Health Care of the Elderly will have a block of 5 weeks each.

There will no longer be modular assessments in May and December. There will be formative examinations in each specialty placement, but summative examinations will be at year end (May/June). These will comprise of two 3 hour MCQ knowledge examinations and two OSCE based clinical skills examinations.

Full details of the review may be found at;

<http://workspace.nottingham.ac.uk/display/CP2/CP2+Review+Home>

## Clinical Phase 3

This begins in July, after a brief break following on from the CP2 examination period in May/June. It comprises two main components – the Advanced Clinical Experience (ACE) module and the Transition to Practice Module. ACE clinical placements rotate around partner NHS sites and comprise 4 weeks critical illness, 8 weeks muscles, movement and disease, 8 weeks medicine, 8 weeks surgery and 4 weeks general practice i.e. 32 weeks delivered in 4 x eight week rotations. At the end of the module students take the ACE knowledge and clinical examinations, details of these with progression regulations may be found here;

<http://moodle.nottingham.ac.uk/mod/page/view.php?id=1209962>

Resit examinations are held in April each year and are preceded by a revision course organised by local NHS partner sites.

During the ACE attachment students also take two National examinations.

The first is the Situational Judgement Test (SJT). This examination is run by the UK Foundation Programme Office (FPO) and is used to rank candidates for their Foundation Year Posts after graduation.

The second is the Prescribing Safety Examination (PSA) which is run by the Medical School Council (MSC). This examination is used as a summative examination as part of the ACE module at the University of Nottingham. It must be passed in order to graduate. Candidates are allowed one resit before having to repeat the ACE attachment and associated MACCS assessments. Local Extenuation Circumstances Forms are not accepted for this examination, as the MSC operate a “fitness to sit” system for this examination nationwide.

Following completion of the ACE examinations students move onto the Transition To Practice (TTP) module. This begins with a career week and this is followed by an introduction to Foundation practice week. Half of the year group then proceed on their 6 week elective period of study, the other half undertake two 3 week Medical Assistantship Placements (MAST) shadowing designated FY1 doctors in partner Trust sites. Each group then rotates for the final placement of TTP.

**Appendix 2 - The University of Nottingham**

The University of Nottingham is a global-leading, research-intensive university with campuses in the UK, Malaysia and China. Our reputation for world-class research has yielded major scientific breakthroughs such as Nobel-winning MRI techniques, drug discovery, food technologies and engineering solutions for future economic, social and cultural progress.

Already ranked among the UK’s elite universities and global polls for research excellence, our reputation for world-class research has been further enhanced with the 2014 results of the Research Excellence Framework (REF).

In addition to scoring highly in quality rankings covering major disciplines in science, engineering, the social sciences, medicine, business and the arts, it is Nottingham’s research power rankings which demonstrate the impressive volume of excellent research which is carried out. We are now ranked 8th in the UK on a measure of ‘research power’ which takes into account both the quality of research and the number of research-active staff who made REF returns, confirming Nottingham’s place in the top tier of the world’s elite higher education institutions.

The main University campus is set beside a lake, in an extensive belt of woodland, parks and playing fields. The 330 acre University Park Campus is the focus of life for more than 32,000 students and houses the majority of the University’s academic schools and many of the central Services. The Jubilee campus is situated 2 miles away from the University Park, and provides extra capacity. The University Medical School is situated next to the University Park. Together with the University Hospital, it forms the Queen’s Medical Centre (QMC).

**University of Nottingham Medical School**

Nottingham has a strong reputation for both clinical medicine and teaching. As one of the most popular medical schools in the country, it is able to select excellent students and produce and attract good junior doctors.

**The School of Medicine** was formed following Faculty reconfiguration on August 1st 2013. The new School of Medicine comprises the Divisions of Cancer and Stem Cell Sciences, Child Health, Obstetrics and Gynaecology; Clinical Neuroscience; Epidemiology and Public Health; Primary Care; Psychiatry and Applied Psychology; Rehabilitation and Ageing; Medical Sciences and Graduate Entry Medicine; Respiratory Medicine; Rheumatology, Orthopaedics and Dermatology and the Nottingham Digestive Diseases Centre. The School also hosts the Medical Education Centre, the Centre for Interprofessional Education and Learning, the Clinical Research Facility, the Clinical Skills Centre, NIHR design Service East Midlands, Nottingham Clinical Trials Unit, PRIMIS and Medical Imaging Unit.

The new School of Medicine brings together in one School staff undertaking research for the benefit of the health of patients. It includes all primary care and hospital-based medical and surgical disciplines, principally in the Queen’s Medical Centre and City Hospital Nottingham Campuses, Royal Derby Hospitals NHS Foundation Trust and also at the University’s main campus and at the King’s Meadow and Jubilee Campuses. Most of our School’s Senior Researchers and Teachers are also clinicians who dedicate 50% of their time to patient care within the Nottingham University Hospitals NHS Trust & Royal Derby Hospitals NHS Trust. This close juxtaposition brings cutting-edge clinical care to our patients and clinical relevance to our research and teaching. We are closely integrated with our full time NHS clinical colleagues, many of whom are themselves leaders in research and teaching and who work closely with the University and this increases the mutual benefit from integration between the University and NHS.

Mission:

Our mission is to improve human health and quality of life locally, nationally and internationally through outstanding education, research and patient care.

Priorities:

1. **Teaching and learning**, particularly training tomorrow’s doctors and teaching specialised postgraduates
2. **Research and research training:** We will perform and support the highest quality “big” research which impacts on human health and disease
3. **Partnership with the NHS** and other healthcare providers
4. **Visibility and profile of the School of Medicine:** We will do what we do better, and we will tell others about it

Ethos and principles:

1. **Having people and patients at the heart of all we do**: our teaching and learning, our research and our patient care
2. **Contribution within the School of** **Medicine and to society** beyond our immediate roles; helpfulness and service
3. **Openness and fairness**, with particular emphasis on communication (both internal and external) and on equality and diversity among students and staff
4. **Personal and group responsibility** for all aspects of our work, within a culture of opportunity and reward

The School hosts 15 Masters courses including the MMedSci in Medical Education, and further details are available at: <http://www.nottingham.ac.uk/medicine/study/postgraduatecourses/index.aspx> .

Our research spans 11 major themes, ranging from cancer to vascular medicine. We work closely with industry and the NHS. Our world-leading research ranges from basic and translational science through to clinical trials, epidemiology, and health services research. Our clear theme is improving human health, underpinning a vibrant postgraduate research training programme leading to PhD or DM. Many of our academics are clinicians, using their expertise to provide cutting edge specialised treatment to NHS patients; reflecting our ethos that patients are at the heart of all we do.

In the 2014 Research Excellence Framework the four Units of Assessment included in the School of Medicine were among the six most improved in the whole University since RAE 2008: Over 80% of our research in 2014 was graded as world-leading or internationally excellent. Our research spans 11 major themes and ranges from basic and translational science through to clinical trials, epidemiology, and health services research. We work closely with industry and the NHS. Our research is underpinned by a strong postgraduate research training programme leading to PhD or DM. Our major research themes are in Cancer and Stem Cells; Child Health, Obstetrics & Gynaecology; Clinical Neurosciences; Dermatology; Digestive Diseases; Epidemiology and Public Health; Mental Health; Musculoskeletal physiology and disease; Primary Care; Rehabilitation and Ageing; Respiratory Medicine; and Renal Medicine.

The School of Medicine trains tomorrow’s doctors on a vibrant undergraduate medical course with a unique intercalated BMedSci, as well in a specialised graduate-entry programme built around clinical problem solving. We teach medicine and related disciplines at both undergraduate and postgraduate level. We have a dedicated clinical academic training programme and are committed to training PhD and doctoral research students and to supporting postdoctoral clinicians and scientists in their research.

The School of Medicine holds a Bronze Athena SWAN award in recognition of our commitment to advance the representation of women in science, technology, engineering, medicine and mathematics (STEMM). The award reflects our commitment to promoting equality and diversity. Please see <http://www.nottingham.ac.uk/medicine/about/athena-swan.aspx>.

Professor Tony Avery is Dean of the School of Medicine.

For further information, please see our website <http://www.nottingham.ac.uk/medicine>

**Nottingham**

Central within the East Midlands, Nottingham is a vibrant and prosperous city with something to offer everyone. It is one of the UK’s leading retail centres and has a huge variety of restaurants, bars and nightclubs which attract people from all over the UK. Culturally, it has good theatres, an arena which attracts both national and international performers and a range of historical interests relating to subjects such as the lace industry, Lord Byron and DH Lawrence. Nottingham is also known for sport, being the home of Trent Bridge Cricket Ground, Nottingham Forest and Notts County Football Clubs, the National Water Sports Centre and the Nottingham Tennis Centre. There is a good network of roads with easy access to the M1 and the A1, a fast frequent rail service to London and other major cities. Nottingham East Midlands Airport is only eighteen miles away.

The city is set within a county of outstanding natural beauty which includes Sherwood Forest, Wollaton Park, lively market towns and wonderful historic buildings. Housing is relatively inexpensive and, in addition to the two Universities, there are excellent schools and colleges available.

**To find out more about Nottingham, use the following links:**

Nottingham County Council – Tourism <http://www.experiencenottinghamshire.com/>

University of Nottingham <http://www.nottingham.ac.uk>

Zoopla (Guide to local properties) <http://www.zoopla.co.uk/>

**My Nottingham** (information on schools, term dates, school transport etc.)

<http://www.nottinghamcity.gov.uk/index.aspx?articleid=8524>

**Appendix 3 – Information about Nottingham University Hospitals NHS Trust**

**VISION**

Our vision for the future of our hospitals is 'working together to be the best for patients.'  After holding engagement events, we discovered that there were three themes which patients and staff want us to focus on. These are:

* Proud people
* Team work
* Innovation and continuous improvement

**WHO WE ARE**

NUH has three campuses – Queen’s Medical Centre (QMC), Nottingham City Hospital and Ropewalk House. We provide general hospital services to the 2.5 million residents of Nottingham and its surrounding communities and specialist services to a further 3-4 million across the region.

We are one of the largest employers in the region, with around 14,000 people making up ‘team NUH.’ We have 1,300 volunteers and 14,500 public members.

* QMC is our emergency care site, where our Emergency Department, Major Trauma Centre and the Nottingham Children's Hospital are located
* Nottingham City Hospital is where we largely care for patients with long-term conditions and run our elective services. This includes our centres for cancer, haematology, heart disease, urology and respiratory medicine
* In Ropewalk House we provide a range of outpatient services, including hearing services

We have maternity and neonatal units at QMC and City Hospital.

The Trust has an annual income of £8480, 90 wards and 1,700 beds.

In 2014/15:

* 14,546 emergency operations
* 28,811 planned operations
* 187,577 ED attendances
* 1,858 major trauma patients

**ACHIEVEMENTS**

We have achieved a national and international reputation for many of our specialist services, including stroke, renal, neurosciences, cancer services and trauma.

We are at the forefront of many research programmes and new surgical procedures. In partnership with the University of Nottingham, we operate two NIHR Biomedical Research Units - in Hearing & Deafness and Digestive Diseases.

As a teaching trust we have a strong relationship with our colleagues at the University of Nottingham and with other universities across the East Midlands, including Loughborough University, with whom we working closely (with other partners) for the Olympic legacy project – the National Centre for Sports and Exercise Medicine.

We play a vital role in the education and training of doctors, nurses and other healthcare professionals.

**IMPROVING SAFETY, QUALITY AND EXPERIENCE**

* We perform very well when compared with peers for Emergency Department and inpatient ‘friends and family’ test scores and response rates
* Our Trust Board receives patient stories which describe our patients’ experiences at NUH every month at its public meeting
* In February 2014, the Care Quality Commission (CQC)  published our inspection report and concluded we were a ‘good trust’: safe, caring, effective, responsive and well-led. The CQC returned to inspect our hospitals in September 2015
* We have among the shortest waiting times for planned operations in the country (as measured by referral to treatment within 18 weeks)
* In 2014/15, we had 19% fewer falls and 21% fewer harmful falls
* We had 52% fewer avoidable stage 3 pressure ulcers
* It is now over two years since we reported a stage 4 (the most severe) pressure ulcer (as of April 2015)
* In 2014/15 we further reduced ‘on the day’ cancelled operations by 27% and have done better than the national standard for 15 consecutive months (as at April 2015)
* Our doctors and nurses are using hand-held devices across each of our wards to record observations, communicate patient needs and handover care
* We have expanded shared governance (frontline staff leading change at local level) and now have 23 active Unit Practice Councils

We also had fewer deaths from severe sepsis, are more quickly treating deteriorating patients and significantly improved safety in theatres.

**VALUES AND BEHAVIOURS**:

Known as 'we are here for you' our values describe the NUH way of doing things.

'We are here for you' is our promise to patients that all day, every day, we will do our very best to ensure:

* you are cared for – politely and respectfully by kind and helpful staff, who have taken the time to listen to you and keep you informed at every step
* you are safe – in clean and comfortable facilities, with highly professional teams who work together to make sure you are in safe hands
* you are confident in your treatment – provided by well-trained, skilled and compassionate teams, who involve you in your care and appreciate the value of your time

Our values:

* caring and helpful
* safe and vigilant
* clinically excellent
* accountable and reliable
* best use of time and resources
* Innovation for patients

|  |  |
| --- | --- |
| **Thoughtful Patient Care** | **Continuous Improvement** |
| **Caring And Helpful**   * Polite, respect individuals, thoughtful, welcoming * Helpful, kind, supportive, don’t wait to be asked * Listening, informing, communicating | **Accountable And Reliable**   * Reliable and happy to be measured * Appreciative of the contribution of others * Effective and supportive team-working |
| **Safe And Vigilant**   * Clean hands and hospital so patients are safe * Professional, so patients feel safe * Honest, will speak up if needed to keep patients safe | **Best Use Of Time & Resources**   * Simplify processes, to find more time to care * Eliminate waste, investing for patients * Making best use of every pound we spend |
| **Clinically Excellent**   * Best outcomes through evidence-led clinical care * Compassionate, gentle, see whole person * Value patients’ time & minimise waiting | **Innovation For Patients**   * Empowerment to act on patient feedback * Improvement led by research and evidence * Teaching the next generation |

**THE TRUST**

The Trust’s services and facilities currently operate on (and from) two main campuses. However, future development and location of our clinical services is continuously reviewed and some services (or parts of services) may relocate to the other campus.

1. CITY HOSPITAL CAMPUS

Services

The City Hospital Campus offers a wide range of clinical services to the local population of greater Nottingham and beyond in specialties such as plastic surgery and burns, cardiac and thoracic surgeries, cancer, renal, breast services, urology, stroke services, neurorehabilitation and respiratory medicine.

There is no Accident and Emergency department on the campus, although the hospital does take specialist medical and surgical emergency patients referred to its specialties by GPs, ED or other hospitals.

The City Hospital campus has a long association with the city of Nottingham. It first opened in 1903 and the buildings are a mixture of old and new, although services have recently benefited from huge investment in improving the facilities for patients. These developments include the purpose-built Endoscopy Centre, new Nottingham Radiotherapy Centre, Nottingham Breast Institute, Nottingham Urology Centre, Trent Cardiac Centre, Short Stay Unit, Centre for Clinical Haematology, PET scanner and a new Radiotherapy Centre.

Research interests at the City Hospital campus include oncology, respiratory medicine, clinical haematology, rheumatology, diabetes/endocrinology, stroke medicine, urology, and breast cancer. There are academic departments of Haematology, Continuing Care and Anaesthetics.

Educational Facilities

The City Hospital Postgraduate Education Centre was opened in 1972. It provides an excellent educational environment for multidisciplinary conferences and seminars, postgraduate medical education and continuing medical education, including a Clinical Skills Centre. The Library in the City Campus Postgraduate Education Centre contains an extensive section of the University Library which, together with access to national lending and other libraries in the Country, provides a wide range of literature.

Other Facilities

The City Hospital has restaurant and several Coffee City outlets selling hot and cold snacks. There is a cash machine (outside main out-patients).

(ii) QUEEN’S MEDICAL CENTRE CAMPUS

The Queen’s Medical Centre, opened in 1978, houses both the hospital campus and the University of Nottingham Medical School and School of Nursing and Midwifery.

Clinical services provided on the Queen’s Medical Centre campus include a very large Emergency Department (A&E).

Educational Facilities

The Post Graduate Centre at Queen’s Medical Centre campus contains eleven meeting rooms of varying sizes and audio-visual equipment including video-conferencing, and the Trent Simulation and Clinical Skills Centre, a state-of-the-art simulation centre and clinical skills facility, opened in April 2004. There are high fidelity simulators (adult and paediatric) with video recording 10 laparoscopic skills stations and an endoscopy simulator. The Greenfield Medical library is situated in the Medical School (NUH medical and dental staff have free access and borrowing rights).

Other Facilities

There are a number of facilities provided at the Queen’s Medical Centre campus, including a Newsagent/Grocery shop, Costa Coffee, Clothes shop, National Westminster Bank (which is open daily from 10.30 – 3.30pm,) and a Pharmacy/Chemist’s shop. There is a large dining area, Cyber Café, roof garden and an active Doctors’ Mess with kitchen, PCs with Internet access, sitting room, billiard table, and television.

3 MANAGEMENT ARRANGEMENTS

Nottingham University Hospitals NHS Trust is managed via a structure of five Clinical Divisions, all of which are cross-town based. These are:

* + Medicine
  + Surgery
  + Cancer & Associated Specialties
  + Family Health
  + Clinical Support

There are also the Corporate Departments.

Each Division is led by a Clinical Director, supported by a Directorate Team, and each specialty within that division will have a Head of Service.

4 PARTNER ORGANISATIONS

The Trust works in close association with the University of Nottingham and the University of Derby. There are very strong links with nursing and midwifery training, which is part of the University Of Nottingham Faculty Of Medicine, and with the locally-based Schools of Physiotherapy, Radiology and Radiotherapy.

**Appendix 4 – Information about Nottingham Renal and Transplant Unit**

The Nottingham Renal and Transplant Unit provides all aspects of care for patients with renal disease for the mid-Trent area. The Paediatric Nephrology Unit takes referrals from the whole of Trent, South Yorkshire and the North Anglia area. The paediatric unit relocated to the QMC campus in 2009, as part of the development of the Children’s Hospital on the QMC site.

Clinical facilities are excellent. The Renal and Transplant Unit includes a 12-bedded higher dependency ward for renal transplants and the more seriously ill patients, together with a 20-bedded general nephrology ward. Both wards have recently undergone refurbishment and the higher dependency ward has been extended and redesigned. Haemodialysis can be provided at all inpatient bed spaces and on the higher dependency ward all bed spaces are monitored with central telemetry.

The accommodation includes an outpatient department and offices and an adjacent 26 station Haemodialysis Unit. A 14-station extension to the dialysis unit was completed in July 2003. Further work took place in 2011/12 to replace the water treatment plant.

**Geography**

The Nottingham Renal and Transplant Unit serves a population of approximately one million for dialysis, with most patients coming from Nottinghamshire but also parts of Derbyshire and Lincolnshire. Apart from Nottingham itself (population 642,000) the other main town nearby is Mansfield (population 200,000 including surrounding districts). The catchment area for adult transplants is roughly 1.79 million as patients from the Derby Renal Unit are referred to Nottingham for transplantation.Nottingham is the only centre in the region for paediatric nephrology.

**Services**

Out-patient and In-patient nephrology care.

Dialysis preparation and anaemia management.

Acute kidney injury including renal replacement therapy and an AKI outreach service to the QMC campus.

Out-reach renal service to Kings Mill Hospital (Sherwood Forest Hospitals NHS Trust).

Full range of extra-corporeal therapies including plasma exchange, haemodiafiltration and slow low efficiency haemodialysis (SLED).

Haemodialysis – out-patient (including an established home haemodialysis programme and a self-care dialysis programme), in-patient care and vascular access surgery.

Peritoneal dialysis - out-patient and in-patient care and access surgery.

Transplantation – donor and recipient work-up and transplantation surgery, including ABOi. Out-patient and in-patient care.

Renal bone disease clinic.

Young adult nephro-urology clinic.

Renal-obstetric clinic.

Conservative management and renal palliative care.

Psychological support and a young adult worker.

Joint adult and paediatric transition clinic.

**Transplantation**

Consultant Surgeons: Mr Keith Rigg, Mr Shantanu Bhattacharjya, Miss Amanda Knight, Mr Alun Williams (paediatric urology/ transplant surgery)

Transplant physicians: Dr Catherine Byrne, Dr Gavin McHaffie. The other nephrologists provide acute inpatient transplant care on a rotational basis.

Live donor transplant leads: Mr Shantanu Bhattacharjya, Mr Alun Williams

Recipient and Living donor coordinators: Mrs Anne Theakstone, Ms Karen Stopper, Ms Kate Taylor

A comprehensive multidisciplinary kidney transplant service is provided. All patients have a surgical assessment having attended a patient information session and are reviewed annually whilst on the transplant list. There is a monthly wait listing MDT. There is an established living donor programme with a totally laparoscopic donor nephrectomy programme. The multi-disciplinary team provides post-transplantation care supported by weekly MDT meetings. Patients referred from the Derby Renal Unit for transplantation are currently followed up in Nottingham for the first six months post-transplant and then transferred back to Derby for longer term follow-up. There is a three monthly joint meeting with H&I and Paediatrics.

The East Midlands Donor Coordinator team coordinates donor procurement.

**NUH Out-patient Haemodialysis Unit**

Lead Clinicians: Dr Linda Bisset, Dr Charlotte Bebb and Dr Alastair Ferraro

Senior Nurse: Sister Alison Kinchin

The NUH dialysis unit is a 40-station unit (26 stations in the main dialysis unit and 14 in the Centenary Unit). The main unit and Centenary wing are open 6 days a week. Two to three shifts are provided each day. Home haemodialysis training is undertaken in a dedicated bay on the main dialysis unit.

**Out-patient Haemodialysis Unit, Kings Mill Hospital, Mansfield**

Lead Clinician: Dr Simon Roe and Dr F. Qasim (locum)

Senior Nurse: Damian Abbey

The Kings Mill dialysis unit is located in Sutton-in-Ashfield. A new 20 station dialysis unit and clinic facility opened on the Kings Mill site in 2012 replacing the existing unit. The unit is open 6 days a week for 2-3 shifts each day. Nursing staff are appointed by (and rotate with) the main unit. We also provide medical nephrology clinics, a nurse led transplant clinic, and an IV iron service at Kings Mill to provide care closer to patient’s homes.

**Out-patient Haemodialysis Unit, Ilkeston Community Hospital, Ilkeston**

Lead Clinician: Dr Matthew Hall

Senior Nurse: Sister Tina Goodridge

The Ilkeston satellite unit opened in January 2008 utilising a refurbished ward at Ilkeston Community Hospital. The unit has 12 stations and is open 6 days a week for 2 shifts each day. Nursing staff are appointed by (and rotate with) the main unit.

**Out-patient Haemodialysis Unit, Diaverum Lings Bar Hospital, Gamston**

Lead Clinician: Dr Mark Devonald and Dr Linda Bisset

Senior Nurse: Adele Buttress

The Diaverum Lings Bar haemodialysis unit was opened in May 2012,. This unit operates from a refurbished ward at Lings Bar Community Hospital. This unit covers the south side of Nottinghamshire. The unit has 16 stations and currently opens 2 shifts a day, 6 days per week.

**Home Haemodialysis**

Lead Clinician: Dr Charlotte Bebb

The home dialysis programme has expanded recently and we currently have 31 patients on home haemodialysis. Plans are in place to develop the home haemodialysis and in-centre self-care haemodialysis programme over the next 1-2 years aiming to increase the number of patients on home haemodialysis to 35 by the end of the 2015 financial year. Nursing care is provided by the peritoneal dialysis nursing team supported by nursing staff from the main dialysis unit at the City Campus.

**Peritoneal Dialysis**

Lead Consultants: Dr Gavin McHaffie

Senior Nurse: Sister Wendy Spooner

There are 87 patients on peritoneal dialysis. A team of five experienced peritoneal dialysis nurses provide nursing care. As far as possible care is provided in patients’ homes.

**Access surgery**

Consultant Surgeons (City Campus): Mr Keith Rigg, Mr Shantanu Bhattacharjya, Miss Amanda Knight Consultant Vascular Surgeons (QMC Campus): Mr William Tennant, Mr Shane Macsweeny, Mr Akin Oluwole

Access coordinators: Mrs Jane Pikett and Mrs Heather Ward

A comprehensive surgical service is provided for vascular and peritoneal access, parathyroidectomy and other surgical conditions in renal failure. There is a fortnightly access clinic and a weekly MDT. Vascular access surgery is also provided by the vascular surgeons on the QMC campus. Over the past few years the directorate has undertaken a major service improvement project to improve vascular access provision for patients and reduce the number of patients with tunnelled dialysis catheters. This has seen a reduction in tunnelled catheter use from a baseline of 40% to <15% currently. Waiting times for vascular access surgery have also reduced significantly. The team’s success was recognised with the award of a NUH Star Honour in 2009.

**Outpatient Nephrology Services**

A full out-patient nephrology service is provided at the City Hospital Campus. New patients are seen in two dedicated clinics held weekly. A team of renal nurse practitioners provide counselling about therapy options as well as anaemia management. Regular patient information sessions are held to provide patients and their families with the necessary information to allow them to make an informed decision about the type of renal replacement therapy they would prefer when the need arises. Renal nurse practitioners provide specialised pre-dialysis clinics and there is a well-established palliative care service for those patients who withdraw from dialysis or decide they do not want to receive dialysis. This programme allows patients flexibility to be reviewed in clinic or at home by a nurse specialist.

Sub-speciality interests and clinics include renal bone disease (Dr Roe) and electrolyte and acid-base disorders (Dr Devonald). A combined nephrology and urology clinic for young adults (Dr Bebb and Mr A. Williams and Mr R Parkinson) is held on a regular basis and there are close links with diabetes, rheumatology and urology services. There is a well-developed transition process from paediatric nephrology with young adult transition clinics held quarterly (Dr Byrne and Dr Bebb) and young adult transplant clinics (Dr Byrne). There is a joint Renal-Obstetric service which includes a fortnightly clinic with an Obstetrician (Dr Ferraro & Dr Hall, with Dr Wallace).

A nephrology clinic is run weekly at Kings Mill Hospital. This provides a new and follow up service as well as dedicated anaemia and low clearance clinics. A weekly transplant follow up clinic also takes place at Kings Mill. With the expansion in consultants that this post will provide there is a plan to increase the number of nephrology clinics at Kings Mill Hospital.

**Acute Kidney Injury at NUH**

NUH Renal Unit has developed a particular interest in AKI, with respect to research, innovation and service development. We have had representation in the NCEPOD study, in the NICE AKI guideline and have ongoing research projects in database analysis, clinical studies and basic laboratory science. The AKI alert system developed by the renal unit (and a member of ICT) has gained a national profile. The alert system, which flags up AKI on the Trust’s IT system as soon as a patient’s creatinine result fulfils diagnostic criteria for AKI, has helped NUH to achieve all local AKI CQUIN targets for the past few years. We have advised a number of other trusts around the UK on development of AKI alert systems. Since Autumn 2013, the speciality has successfully piloted an AKI outreach team based at the QMC campus, which previously had no on site renal presence despite being the emergency care centre for the Trust. The team consists of a consultant nephrologist (rotating through QMC from other City Campus duties) and two nurse practitioners (band 6 and 7). The service runs from Monday – Friday 09.00-17.00 and aims to review all stage 3 and the majority of stage 2 alerts. This service has recently secured long term funding from the Trust. The AKI service is currently delivered on a rotational basis by 4 consultant nephrologists.

**Renal Services at Sherwood Forest Hospitals NHS Foundation Trust**

A satellite dialysis unit was established at Kings Mill Hospital in 1996 along with a general nephrology clinic. This service has expanded to its current level with a weekly nephrology clinic (including anaemia management and advanced kidney care clinics) and a transplant follow up clinic. There is a dedicated renal consultant presence on site daily Monday-Friday mornings to support SFH inpatients with AKI (stage 2 and 3) and will other Kings Mill Hospital in-patients with renal problems. (This mostly comprises those whose regular outpatient haemodialysis is already undertaken at our Kings Mill satellite unit). This service initially started in August 2014 and is delivered on a rotational basis by 5 consultant nephrologist.

**Supporting Facilities**

There are a full complement of support services within the NUH, including excellent departments of Histopathology, Radiology and Medical Physics. Nottingham’s Urology department is based at the City Hospital campus.

Nottingham was the first Unit in the U.K. to purchase the CCL Proton computer system in 1980. We have recently upgraded the renal IT system to eMed Renal. This replaced Proton in February 2015. Further work is ongoing to incorporate some of the standalone database systems in use in the unit into eMed. There is a full-time Data Analyst and a data clerk, both employed by the Renal and Transplant Unit. Nottingham has contributed to the Renal Registry since 1997.

There is a dedicated clinical psychologist, renal pharmacist and pharmacy technician and part time youth worker. Renal dieticians cover the in-patient areas, out-patient areas, and dialysis units.

**Workload**

There are 385 patients on haemodialysis (136 at the main unit City Campus, 54 at the Centenary Unit, City campus, 73 at Kings Mill Hospital, 52 at Ilkeston Community Hospital, 39 at the Lings Bar Hospital and 31 patients on home dialysis). There are 82 patients on peritoneal dialysis. Around 650 transplant patients are under regular review.

The unit has performed approximately 75 renal transplants per year over the last 3 years. This was as a result of the expansion of our live donor programme and an increase in the use kidneys from DCD donors. There are currently 258 patients on the transplant list. Nottingham and Leicester have close links with a common East Midlands donor coordinator team.

The directorate carried out 225 renal biopsies last year (native and transplant). Renal biopsies are carried out by the nephrologists. Around 75 tunnelled dialysis catheters were placed or exchanged last year. Catheter exchanges are carried out by the interventional radiologists, but first time tunnelled lines are inserted in a dedicated procedure room on Bramley ward.

**Relationships with other Departments**

Radiology

Excellent support is provided by the interventional radiologists. They insert tunnelled dialysis catheters, provide fistula maintenance and salvage, renal artery imaging and intervention. There is a team of five interventional radiologists who have a special interest in renal vascular access. A multidisciplinary vascular access meeting, and a separate Renal-Radiology X-ray review meeting, both take place every week.

Diabetes

There are close working relationships with the diabetes physicians on both the City and QMC campus. A joint renal diabetes steering group meets monthly to provide a combined approach to the management of patients with diabetes and chronic kidney disease.

Other departments

There are close working relationships with urology, critical care, gastroenterology, rheumatology (particularly for vasculitis management), microbiology & virology, the nutrition team and the regional haematology unit (which includes a bone marrow transplant unit).

**Future Plans**

We anticipate that the transplant programme will remain at around 90 transplants per year with around 15-20 live donor transplants planned this year. A non-heart beating donor programme is now established and ABO incompatible transplantation is provided by both Nottingham and Leicester transplant units.

**Research Activity**

The Nottingham Renal Unit has an established track record in clinical research, particularly in the area of renal bone disease and acute kidney injury. With the ongoing expansion of the Unit, its research profile is diversifying and opportunities exist for both basic scientific and clinical research. The department has been successful in attracting research PAs and funding is available to pump prime studies of suitable potential. Current areas of research include:

Acute Kidney Injury: Dr Devonald leads a multidisciplinary group investigating renoprotective strategies and evaluation of biomarkers in AKI. He is developing animal models of AKI in collaboration with colleagues at University of Nottingham.

Renal Bone Disease: led by Dr Roe, who currently leads studies on post-transplant osteoporosis and on links between renal bone disease and vascular calcification.

Transplantation: Mr Bhattacharjya, Mr Rigg, Dr Byrne and Dr McHaffie are all involved in patient recruitment to multi-centre transplant studies. In addition the group are studying the process of care and outcome of live transplant donors.

Epidemiology: Dr Byrne, who has close links with the UK Renal Registry.

Pregnancy and kidney disease: Dr Hall coordinates a national collaboration (UK-CORD) aiming to collect observational data on women with kidney disease during pregnancy.

ANCA-associated Vasculitis – Dr Ferraro is aiming to recruit to various multicentre studies (both observational registries and therapeutic trials).

**Quality Improvement**

The Nottingham Renal Unit also has several ongoing quality improvement projects, some of which are gaining national recognition. Projects include Improving Pre-dialysis care, Care planning, Young Adult Work, Increasing Home Therapies, and Shared Dialysis Care, and the recognition of Acute Kidney Injury.

**SPECIALTY MEDICAL STAFF**

The current medical staffing in nephrology/transplantation is as follows:

**Consultant Nephrologists:**

Dr S. D. Roe (Head of Service)

Dr C.E. Bebb

Dr. C. Byrne

Dr M.J. Devonald

Dr G. McHaffie

Dr A. Ferraro

Dr M. Hall

Dr L. Bissett

Dr F. Qasim (Locum consultant nephrologist)

**Consultant Surgeons:**

Mr. K. M. Rigg - Transplantation/General Surgery (Director of Transplantation)

Mr S. Bhattacharjya – Transplantation/General Surgery

Miss A.J. Knight – Transplantation/General Surgery

Mr A.R. Williams – Transplantation / Paediatric Urology

**Renal and Transplant Unit Trainee Medical Staff**

There are 6 Speciality Registrars, 4 ST1/2 posts, 1 FY2 and 2 FY1 posts. ST1/2 cover is provided by a generic medical hospital at night team from 5pm weekdays and all weekend.

**Other Senior Staff**

Belinda Dring Matron (acting)

Ian Hogg Renal Pharmacist

Paul Harbuz/ Mike Pikett Clinical Engineering

Bruno Mafrici Senior Renal Dietician

Sally Forster Renal Business Manager

Julian Skoyles Divisional Clinical Director

Keith Oliver Divisional General Manager

Stephanie Beasley Divisional Clinical Lead

**Renal and Transplant Unit Trainee Medical Staff**

There are 6 Speciality Registrars, 4 ST1/2 posts and 2 FY1 posts. On-call cover at trainee level is provided by the Specialist Registrars who work an on-call rota from home. ST1/2 cover is provided by a generic medical hospital at night team from 5pm weekdays and all weekend.

Altogether there are 11 Speciality Registrars in the East Midlands North Nephrology/General Medicine training programme; at any one time 6 are at the Nottingham Renal and Transplant Unit for training in nephrology, 3 other StR’s at the Derby City General Hospital, two for renal and one for general medical training, one StR rotates to Kings Mill and one to Lincoln.

The unit employs 190 full time equivalent nursing staff. Amongst these are senior nurses who work in the community, supervising patients on home haemodialysis and peritoneal dialysis. The unit also has the service of specialist nurses in the following areas: transplantation (including live donor and recipient co-ordination); anaemia co-ordination; research; clinical governance; nurse education; pre-dialysis; palliative care and vascular access.

**ADMINISTRATIVE SUPPORT**

Office accommodation is available within the medical school. The School will provide access to secretarial and technical support for the appointee. The Trust will provide secretarial support for clinical work.

**PROFESSIONAL STANDARDS**

The Head of Service is managerially responsible for all activity and personnel in their speciality. They are accountable to a Clinical Director. The Medical Director and Responsible Officer Dr Stephen Fowlie, has overall responsibility for the professional standards of consultants employed by Nottingham University Hospitals NHS Trust.

All consultants are expected to follow the guidelines on practice laid down by the General Medical Council’s “Maintaining Good Medical Practice”, and are accountable to the Trust for their actions and for the quality of their work. The Trust supports the requirements for continuing professional development (CPD) as laid down by the GMC and surgical colleges and is committed to providing time and financial support for these activities.

The Trust has the required arrangements in place to ensure that all consultants have an annual appraisal with a trained appraiser and supports consultants going through the revalidation process.

There is annual review of Job Plans and there will be a job plan review for the successful candidate within 6-12 months of starting their post.

**ETHICS OF CLINICAL PRACTICE COMMITTEE (ECPC)**

The Ethics of Clinical Practice Committee is a source of advice on the ethical principles underlying decisions in healthcare and clinical practice. The committee discusses actual or potential ethical issues arising from the care and treatment of potential, current, or former patients of the Trust. Such issues may arise in the implementation of policies or new initiatives or legal decisions affecting patient treatment and care. The Committee can be contacted via the Trust secretary.

**RESIDENCE**

If the successful candidate elected to take part in on-call commitments, they would be expected to be contactable by telephone and to reside not more than ten miles, or half an hour’s travelling time, from their main campus, unless the Trust gives prior, specific approval for a greater distance (or time).

**VISITING**

Candidates are encouraged to make arrangements to visit the Trust, and should contact Dr Simon Roe, Consultant Nephrologist & Head of Service (Tel 0115 969 1169 Extn. 57795) in the first instance, if they wish to do so.