Medical Training Initiative Post Neonatal Fellow with specialist interest in Neonatal Retrieval.

Job Description

Lead Clinician Dr Joanna Behrsin
Hospital: Leicester Royal Infirmary

Directorate: Womens and Childrens

Grade: MTI Neonatal Fellowship with a specialist interest in Newborn Retrieval (ST3 for 6 months and then ST4-6 for 18 months)

Hours Per Week: 48

Salary Scale:

Salary payment is according to the MN37 pay scale at £30,002 - £47,115 according to level of previous experience

Unit Description:

An exciting opportunity has arisen to embark on a neonatal fellowship within University Hospitals of Leicester NHS trust. UHL is host to the CenTre Neonatal Transport Service as well the Leicester Neonatal Service. This programme is 2 years with 1 year Neonatology experience and 1 year neonatal transport. This job is under the Medical Training Initiative (MTI) scheme run by the Royal College of Paediatrics and Child Health. Please note this post has been quality assured by the MTI team at RCPCH

The neonatal intensive unit at Leicester Royal Infirmary is a busy tertiary unit. The unit has moved into a brand new state-of-art unit. There are currently 18 Intensive/High Dependency cots and 12 special care cots. Around 7000 babies are delivered annually on this site. There are plans to further expand ITU/ HDU capacity over the coming years. The Leicester Royal Infirmary is accredited for subspecialty training in Neonatology. The Neonatal unit has approximately 1100 admissions per year, of which around 100 are ventilated preterm infants. There is also a special care unit at Leicester General Hospital with 12 beds. There are around 4000 babies annually delivered on this site and babies that require intensive care are stabilised and transferred to the Royal Infirmary.

The unit is the lead Perinatal centre for the Central Newborn Network and is the perinatal surgical centre with a catchment area of 2.5 million people (excluding Cardiac and Neurosurgery). There are over 100 surgical referrals per year. There is a comprehensive Feeto-Maternal Medicine service. The unit offers a full range of intensive care including HFOV, Nitric Oxide and therapeutic hypothermia. There is close liaison with the ECMO unit at Glenfield Hospital 3 miles away.

The CenTre neonatal transport service provides a standalone transport team, covering the 14 neonatal units across East Midlands. The service was established in April 2010. The service performs around 1700 transfers annually, making it the busiest service in UK in 2017. Teams are dispatched from Nottingham City Hospital and Leicester Royal infirmary. The transport service is hosted by the University of Leicester NHS trust which also host a busy tertiary neonatal intensive care unit, paediatric cardiology service, paediatric ECMO and PICU.

Key Working Relationships:

Neonatal Intensive Care Unit – Consultant Medical Staff

Dr Elaine Boyle - Research
Dr Andrew Currie - Head of CMG
Dr Jonathan Cusack - Head of service, Education, Simulation Training
Dr Venkatesh Kairamkonda - Database, IT, Audit, Clinical Risk
Dr Joe Fawke - Education, Simulation, Neurodevelopment
Dr Joanna Behrskin - Transport
Dr Robin Miralles - Neurodevelopment lead
Dr Jane Gill - Quality and Safety Lead
Dr Sumit Mittal - Chronic Lung Disease
Dr Deepa Panjwani - Avoiding Term Admissions, lead for postnatal wards
Dr Kamini Yadav (Locum)
Programme Description:

An exciting opportunity has arisen to embark on a neonatal fellowship within University Hospitals of Leicester NHS trust. UHL is host to the CenTre Neonatal Transport Service as well the Leicester Neonatal Service. This programme is 2 years with 1 year Neonatology experience and 1 year neonatal transport.

Neonatal medicine: (Year 1)

The post-holder will start on the NICU with 3-6 months at a ‘senior’ level (level 1 training). This is an opportunity to orientate into working on a busy tertiary neonatal intensive care unit and also working within the National Health Service. The post will then rotate onto a more senior tier (level 2 training).

Neonatal Transport: (Year 2)

Progression to the second year of training is subject to demonstrating attainment of appropriate competencies at the end of year 1 to enable the post holder to perform safe transport. The transport service runs a separate rota to the neonatal service and the post holder’s clinical commitments will reflect this. The post holder’s clinical commitments will be to the transport service, however during non-transport time further opportunities to gain neonatal experience will be available and the post-holder will be encouraged to do this.

The appointee will have the opportunity and funding to complete the RCPCH approved Postgraduate Diploma in UK Medical Practice that is coordinated by the Liverpool School of Tropical Medicine.

Induction

All MTI candidates will receive a comprehensive induction programme to familiarise them with the functioning of the hospital, the Trust’s procedures and issues of clinical governance. In addition, there is a specific induction to the Neonatal Unit and the relevant areas. The induction covers aspects of basic neonatal care and resuscitation techniques. Consultant supervision and advice is available at all times.

The Programme

All MTI candidates will start training at ST3 level for the first 6 months. This is to allow acclimatisation with practice in the UK. The expectation is that the trainee will satisfy level 1 & 2 competencies as part of the aligned neonatal frame work in this period. Further to meeting these criteria the candidate will be promoted to ST4. Some candidates may not meet the criteria for promotion and will be given a further 3-6 months to make progress. In the final 18 months of training candidates will be expected to gain level 3 competencies as discussed with their educational supervisor.

E Portfolio

Please note it is mandatory for all MTI neonatal fellows to maintain an e-portfolio record of their training from start of the programme. Use of E-portfolio is permitted through the RCPCH for a nominal fee.
Working Pattern & Duty Roster

Year 1: Neonatal Intensive Care

This part of the post will be rotational on a rota with 12 registrars and will cover the neonatal units at both LRI and LGH during this rotation. A sample rota for LRI NICU is listed below.

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Year 2: Neonatal Transport

This is a full shift rota a sample template is below. The rota is compliant with the current European Working Time Directive requirements and junior doctors contract.

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Educational Supervision

Educational supervision will be provided by one of the Consultant Neonatologists below. There is a structured assessment package provided for MTI trainees by the RCPCH similar to the one used by UK ST trainees.

Dr Jo Behrsin, Transport Consultant CenTre transport joanna.behrsin@uhl-tr.nhs.uk

Dr Jonathan Cusack, Head of Service for Neonatology, University Hospitals of Leicester NHS Trust. Jonathan.cusack@uhl-tr.nhs.uk

Dr Venkatesh Kairamkonda, consultant neonatologist, University Hospitals of Leicester NHS Trust Venkatesh.Kairamkonda@uhl-tr.nhs.uk
Research & Audit and Diploma

The MTI fellow is encouraged to get involved in audit and clinical governance activities.

There are 6 newborn life support courses annually in Leicester and it is also a training centre for the new advanced resuscitation of the newborn course and the advanced paediatric life support.

There is in house training provided at induction on basic neonatal life support and child protection. There may be opportunities to provide taster days within some of the specialities hosted within the UHL paediatric service such as ECMO or cardiac intensive care.

There is an active educational programme including weekly journal clubs and frequent high fidelity simulation training

A sample teaching programme is below.

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<td>Clinical neonatology for senior trainees</td>
<td>Journal club</td>
<td>Grand round</td>
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<td>Hi-Fidelity simulation training (fortnightly)</td>
<td>Junior doctor in house training programme</td>
<td>Monthly management training for senior trainee doctors</td>
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Liverpool School of Tropical Medicine

The Postgraduate Diploma in UK Medical Practice has been designed by the Liverpool School of Tropical Medicine in order to allow MTI doctors the opportunity to demonstrate the breadth of experience gained during their work in NHS Trusts.

In order to be awarded the DipUKMP, doctors will be required to carefully document their training using the ePortfolio system, demonstrate that they have met learning outcomes based on a range of NHS work, and submit a 2,500 words assignment, based on their involvement in one of clinical practice, medical education or quality improvement/ clinical governance work. Further information can be found at: [http://www.rcpch.ac.uk/news/diploma-uk-medical-practice-lstm](http://www.rcpch.ac.uk/news/diploma-uk-medical-practice-lstm)
Accommodation

Leicester Royal Infirmary does not guarantee accommodation. There is accommodation available at all hospital sites namely Leicester Royal Infirmary, Leicester General Hospital and Glenfield Hospital. The accommodation at the Leicester Royal Infirmary site is privately run.
To find out more about accommodation please contact the accommodations team on residential.accommodation@uhl-tr.nhs.uk or 0044 258 4249

All accommodation costs are the responsibility of the MTI fellow.

Study Leave

The trust study leave allowance for non-training grade doctors as the same as those in training and comprises of 10 days external and 20 days internal leave per year. The leave year runs from April to April and is pro rata if their contract does not run for the entire year.

Annual Leave

Annual leave is dependent on salary scale at 27 to 32 days per year and up to 8 public holidays.