Please find below programme information for the above sub-specialty for training programmes starting in September 2019.

Page 2 contains a list of all submitted programmes of training; the job descriptions for each post follow on.

Each subspecialty grid programme covers the RCPCH curriculum as specified on the RCPCH.

Please note: Programme submissions can be withdrawn or amended at any point until an offer of employment has been made to an applicant.

**Application Process**

Applications for the NTN Grid open from 12 noon Friday 7 September 2018 and close at 12 noon Friday 28 September 2018. Applications can only be accessed during this period from the College website.

**For more information on the grid process and to access the Grid Applicants Guide please visit:** [http://www.rcpch.ac.uk/ntngrid](http://www.rcpch.ac.uk/ntngrid)

**Contact Details**

**For specific sub-specialty information, please contact:**
Dr Neil Gibson  
Email: neil.gibson@ggc.scot.nhs.uk

**For further information which is not answered after consulting the website and Grid Applicant Guide, please contact:**

<table>
<thead>
<tr>
<th>Abigail Wright</th>
<th>Email: <a href="mailto:ntn.grid@rcpch.ac.uk">ntn.grid@rcpch.ac.uk</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>(Sub-specialty Recruitment Coordinator)</td>
<td>Tel: (020) 7092 6139</td>
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<tr>
<td>Deanery</td>
<td>Programme of Training</td>
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<td>-------------------------</td>
<td>------------------------------------------------------------</td>
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<tr>
<td>London</td>
<td>Royal Brompton Hospital</td>
</tr>
<tr>
<td>North West</td>
<td>Alder Hey Children’s Hospital</td>
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<td>Royal Manchester Children’s Hospital</td>
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<tr>
<td>Northern Ireland</td>
<td>Royal Belfast Hospital for Sick Children</td>
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<td>Royal Hospital for Children, Glasgow</td>
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<tr>
<td>Severn and Wales</td>
<td>Children’s Hospital for Wales, Cardiff</td>
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<td>Bristol Children’s Hospital</td>
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<td>Thames Valley and Wessex</td>
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<td>Southampton General Hospital</td>
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<td>West Midlands</td>
<td>Royal Stoke University Hospital</td>
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<td></td>
<td>Birmingham Children’s Hospital</td>
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</table>

Maximum Number of National Training Grid Appointments that may be made in 2019 for Paediatric Respiratory: 10
**Programme Description**

## London

<table>
<thead>
<tr>
<th>Hospital / Centre</th>
<th>Placement Name</th>
<th>Duration (Months)</th>
<th>Educational Supervisor (name and e-mail)</th>
<th>Compulsory (C)</th>
<th>Optional (O)</th>
<th>Availability Guaranteed (Y/N)</th>
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</thead>
<tbody>
<tr>
<td>Royal Brompton Hospital</td>
<td>Paediatric Respiratory Medicine</td>
<td>36</td>
<td>Dr Ian Balfour-Lyn <a href="mailto:i.balfourlynn@imperial.ac.uk">i.balfourlynn@imperial.ac.uk</a></td>
<td>C</td>
<td>Y</td>
<td></td>
</tr>
</tbody>
</table>

**Additional Information**  
Rotations to start at Brompton for the first year and then rotate to GOSH, Royal London or King’s depending on availability. Job descriptions for all units available.
Programme Description

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric Respiratory Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Royal London Children's Hospital</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>London</td>
</tr>
</tbody>
</table>

**Outline of Programme**
This is a one-year post suitable for a year 6-8 trainee wishing to specialise in paediatric respiratory medicine based in a large tertiary respiratory unit at The Royal London Hospital. The post is part of a 2-3-year rotation that includes a year spent at one or two of the other hospitals in the rotation - Great Ormond St, Kings College & The Royal Brompton Hospitals. Training provided in all modules. The postholder will work along with a non-grid respiratory interest trainee.

**Departmental Information**

- **Demographics**
The Royal London Children's Hospital provides secondary and tertiary healthcare for an ethnically diverse and often deprived community and is part of Barts Health NHS Trust (comprising The Royal London Hospital, Barts Hospital, Mile End Hospital, Whipps Cross and Newham Hospitals). The Royal London Hospital is an academic centre with links to Queen Mary's University.

- **Team**
The tertiary respiratory unit currently has four full time clinical consultants and an academic professor. There are two registrars including this grid post (ST6-8), one clinical CF Fellow and two SHOs (ST4-5), four respiratory physiologists and eight respiratory CNSs (3 CF, 2 respiratory/asthma, 2 LTV and 1LTV/immunology). There is a full respiratory and CF MDT comprising of specialist paediatric respiratory physiotherapists, dietitians, speech and language therapist, psychologists and pharmacist.

We are a designated Paediatric Cystic Fibrosis Centre catering for approximately 140 children with CF from East London and beyond. We hold shared care clinics at Colchester and Queen's Hospitals. We are research active with a dedicated CRN team and part of the evolving London CF CTAP (Clinical Trials Accelerator Platform) network which aims to improve patient access to clinical trials across London centres.

The respiratory services include CF and non CF bronchiectasis including PCD, Asthma and Difficult Asthma, Chronic Lung Disease and oxygen dependent children, NIV sleep and LTV, children with complex needs and respiratory illnesses and respiratory infections including empyema. There are close links with other paediatric specialties including PCCU, NICU, surgery, ENT, neurology, radiology, gastroenterology, endocrinology and haematology. There is a monthly elective bronchoscopy list as well as joint list with ENT and emergency bronchoscopy provision.

- **Supervisor(s)**
Dr Caroline Pao (Clinical Lead and CF Centre Director), Dr Chin Nwokoro (asthma and chronic lung disease), Dr Sarah Brown (non-CF bronchiectasis), Dr Suren Thavagnanam (sleep and non-invasive ventilation). Also Professor Jonathan Grigg (Academic lead and asthma) and Dr Sorena Kiani (immunology).

**Clinical Training Responsibilities**
Responsible for day to day running of the respiratory ward, supervising juniors and liaising with MDT. There are supervised consultant ward rounds but the appointee will be expected to lead on the daily round as well as seeing respiratory referrals from other teams including PICU and NICU. Participation at weekly psychosocial MDT meetings. Supervising elective and emergency admissions. Insertion of longlines and assistance at bronchoscopy. The appointee will attend Tuesday afternoon asthma clinic and Wednesday afternoon general respiratory clinic. CF clinics are held twice weekly with additional
Programme Description

A segregated clinic. There are approximately 10 sleep studies performed each week on a dedicated sleep unit. Expectation to attend immunology and CF clinics as required. Opportunity to attend TB and oxygen dependent infant clinics.

The appointee will gain experience in management of CF, asthma, chronic lung disease, lung disease in children with complex medical conditions, empyema, non-invasive ventilation and abnormalities of sleep. They will gain experience in flexible bronchoscopy as well as gain experience from the joint ENT bronchoscopy and MLB list. They will become familiar with lung function testing and sleep studies in children.

The appointee will participate fully in the shift rota which is New Deal compliant.

Workload / Rota Arrangements / Example Timetable

400 patient asthma service, 140 patient regional CF service. The respiratory ward has a 4-bedded bay and 8 cubicles (2 negative pressure). Some patients (e.g. those with CF and infection control concerns) are admitted onto alternative wards. In addition, there are 2-3 additional cubicles specifically for overnight sleep studies. There is a commitment to the general paediatric rota.

<table>
<thead>
<tr>
<th>a.m.</th>
<th>p.m.</th>
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<tbody>
<tr>
<td>Monday</td>
<td>Resp grand round with discussion of inpatients and admissions of the week</td>
</tr>
<tr>
<td></td>
<td>Ward round / review of sleep studies</td>
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<tr>
<td></td>
<td>Obesity NIV clinic 3/yr</td>
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<tr>
<td></td>
<td>Radiology meeting</td>
</tr>
<tr>
<td>Tuesday</td>
<td>Ward round / review of sleep studies</td>
</tr>
<tr>
<td></td>
<td>Journal Club / Teaching</td>
</tr>
<tr>
<td>Wednesday</td>
<td>Ward round / review of sleep studies</td>
</tr>
<tr>
<td></td>
<td>Pulmonary service development meeting</td>
</tr>
<tr>
<td>Thursday</td>
<td>Ward round / review of sleep studies</td>
</tr>
<tr>
<td></td>
<td>Psychosocial meeting</td>
</tr>
<tr>
<td>Friday</td>
<td>Ward round / review of sleep studies</td>
</tr>
<tr>
<td></td>
<td>CF clinic or CF annual review clinic and MDT meeting</td>
</tr>
</tbody>
</table>

Non Clinical Training Responsibilities (expectations of research / audit / teaching)

Expected to participate in departmental audit, update clinical guidelines and encouraged to undertake clinical research. Study leave funding available. The appointee will be expected to present cases, present at weekly journal club (reviewing relevant literature and research) and teach juniors, AHPs and medical students.

There is weekly protected teaching on a Thursday afternoon, monthly morbidity and mortality meeting, monthly grand round, monthly children’s service directorate half day audit and governance. Weekly pulmonary meeting addressing service development.

Further training opportunities

Opportunity to attend management courses and expectation to attend Lung In Childhood and present at LPRG meetings. Opportunity to attend research seminars. We will support trainees who successfully submit abstracts to conferences.
Programme Description

Any further information
Please contact below if you wish for any further details regarding this post.

Contact details for unit
Dr Caroline Pao: caroline.pao@bartshealth.nhs.uk (0203 594 2474 sec), Dr Sarah Brown: sarah.brown@bartshealth.nhs.uk (0203 594 1645), Dr Chin Nwokoro: chinedu.nwokoro@bartshealth.nhs.uk (0203 594 1646), Dr Suren Thavagnanam: Surendran.Thavagnanam@bartshealth.nhs.uk (0203 594 2474 sec)
**Programme Description**

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric Respiratory Medicine</th>
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<tbody>
<tr>
<td>Base Unit:</td>
<td>Great Ormond Street Hospital NHS Foundation Trust</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>North Thames / London</td>
</tr>
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</table>

**Outline of Programme**

This is a one-year post suitable for a year 7/8 trainee wishing to specialise in paediatric respiratory medicine based in a large tertiary respiratory unit at Great Ormond Street hospital. The post is part of a 2-3 year rotation that includes a year spent at one or two of the other hospitals in the rotation - Royal London, Kings College & The Brompton Hospitals.

**Departmental Information**

- **Demographics**
  The respiratory unit is a large tertiary referral centre able to cope with the full range of paediatric respiratory conditions with full support from laboratories, on-site referral services and surgical disciplines.

  The clinical unit is supported by a comprehensive lung function laboratory divided into three services: school-going children, pre-school children and infants. In addition there is a very busy dedicated sleep service provided by trained technicians. Full support for all forms of respiratory radiological imaging is provided on-site. Particularly close links are also maintained with the thoracic surgeons, cardiologists, ENT surgeons, ECMO, interventional radiologists, speech and language therapists, long term ventilation unit, non-invasive ventilation service and the tracheal service.

- **Team**
  6 Consultant Respiratory Paediatricians, 5 clinical fellows, 1 non Grid trainee, This post, SHO, full team of experienced allied health professionals

- **Supervisor(s)**
  Dr Paul Aurora

**Clinical Training Responsibilities**

The appointee will contribute to the weekly departmental teaching programme and actively support the SHO for respiratory and the clinical fellows.

**Workload / Rota Arrangements / Example Timetable**

Specific duties will include clerking and follow-on care of children on the ward, review of respiratory consults from other specialists, presentation of cases at meetings and ward rounds, involvement in weekly respiratory clinics. An important and invaluable aspect of this post, is the exposure to the full range of pathology seen at GOSH, with an opportunity to provide respiratory input as the registrar on for consultations. The appointee will quickly acquire skills in the management of Cystic Fibrosis, lung disease in children with complex medical conditions, non-invasive ventilation and abnormalities of sleep. He/she will become proficient in the interpretation of lung function, chest imaging and the interpretation of sleep studies. There will be an opportunity to become familiar with the basics of flexible bronchoscopy, with a fortnightly bronchoscopy list. The appointee will participate fully in the shift rota which is New Deal compliant and involves a shared night rota with the neurology department.
Programme Description

**Non Clinical Training Responsibilities (expectations of research / audit / teaching)**
The appointee will be expected to participate fully in the departmental audit programme. The appointee will be expected to participate fully in the departmental audit programme to aid in development of clinical service guidelines. Participation in clinical research that is related to service delivery will be encouraged and facilitated.

**Further training opportunities**
The appointee will contribute to the weekly departmental teaching programme.

**Contact details for unit**
Dr Paul Aurora 0207 405 9200
**Programme Description**

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric respiratory medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Royal Brompton Hospital</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>London</td>
</tr>
</tbody>
</table>

**Outline of Programme**

This is a one-year post suitable for a year 7/8 trainee preferably (or a yr 6 trainee) wishing to specialise in paediatric respiratory medicine in a large tertiary cardiothoracic unit. It may be suitable for a general paediatric trainee with a special interest. The post is part of a 2-3 year rota that includes a year spent at one or two of the other hospitals in the rotation - Royal London, Kings College & Great Ormond Street Hospitals. The post may also be part of an East of England rotation at Addenbrooke's Hospital, Cambridge.

**Departmental Information**

- **Demographics**
  The unit is part of one of the largest postgraduate specialist heart and lung centres in the UK and has close links with the National Heart and Lung Institute (NHLI).

- **Team**
  9 respiratory consultants (including 3 professors, 1 senior lecturer), 5 PICU consultants, 3 SpRs, 4 clinical/research fellows, 10 yr 3 StRs, 6 CF nurse specialists, 3 respiratory nurse specialists, and 4 respiratory physiologists.

- **Supervisor(s)**
  Dr Ian Balfour-Lynn [i.balfourlynn@imperial.ac.uk]

**Clinical Training Responsibilities**

- The 3 SpRs work in 1 month blocks rotating between the ward (responsible for all respiratory inpatients, PHDU and day cases), out-patient clinics and bronchoscopy / PICU liaison / research.
- On Rose Ward, caseload includes cystic fibrosis, congenital lung disease, difficult asthma, severe infections, sleep disorders, interstitial lung disease and neuromuscular disorders.
- During the Clinic blocks, the SpR attends all 6 respiratory clinics.
- On PICU, the SpR liaises with the PICU clinical fellows over the respiratory patients. Experience can be gained in standard ventilation (including HFOV) of cases with severe respiratory disease. There is also an emphasis on non-invasive ventilation of chronic respiratory failure and respiratory complications of congenital heart surgery.
- Experience will be gained in the complete investigative approach to respiratory illness.
- Responsibilities include liaising with the Paediatric Bed Managers, arranging investigations, dealing with telephone enquiries from other hospitals and parents, and dictating summaries within 1 week of discharge.
- SpR supervises the StR on a daily in-patient business ward round and there is a hand-over round every evening. There is also a weekly consultant multi-disciplinary teaching ward round.

**Workload / Rota Arrangements / Example Timetable**

There is a 28-beded children’s ward for patients with respiratory and cardiac disease. There is also an 8-beded Paediatric High Dependency Unit and 10 bedded Paediatric Intensive Care Unit. There
Programme Description

are 6 out-patient clinics each week - cystic fibrosis (2) and general respiratory (5) - including one at Chelsea & Westminster Hospital, with additional monthly allergy and bimonthly PCD clinics. ROTA - 1 in 7 (from home) with prospective cover. We are EWTD compliant.

**Non Clinical Training Responsibilities (expectations of research / audit / teaching)**

- The SpRs will have at least a full day per week (averaged over the year), which is bleep-free and intended for research, audit and/or personal study. There is additional free research time during PICU and Clinic blocks.
- Development of presentation skills at weekly paediatric respiratory seminars.
- Training of junior staff as appropriate including formal session each week.
- Understanding objectives of audit & clinical governance, with participation in a supervised project.

**Further training opportunities**

- Regularly twice-weekly bronchoscopy sessions (>200 scopes per year) and bronchoscopy tape reviews.
- Close liaison with paediatric cardiology team and PICU.
- Weekly Paediatric Respiratory Seminars incl. Journal Club & Bronchoscopy CD reviews; Paediatric Radiology Meeting; Hospital Pulmonary Round; fortnightly research meetings.
- Strong encouragement for research and clinical audit/reviews.
- Monthly half-day for clinical governance.
- Attendance at special clinics eg PCD clinic.
- Reduced-fee or free attendance at all NHLI courses including biannual Paediatric Bronchoscopy Course.
- Attendance at the ‘Lung in Childhood’ course run quarterly at Great Ormond Street Hospital.
- Study leave is available for educational courses/meetings e.g. RCPCH, BTS etc

**Any further information**

We offer all obligatory modules apart from acute asthma (available RLH, KCH & core years), and all desirable modules apart from infant lung function & transplant (available GOSH) and rehabilitation, with limited exposure to immune deficiency (available RLH & GOSH) and tuberculosis (available RLH & KCH).

**Contact details for unit**

Dr Ian Balfour-Lynn. Tel - 02073518509. Fax - 02073497754. Email - i.balfourlynn@ic.ac.uk
Programme Description

<table>
<thead>
<tr>
<th>Subspecialty:</th>
<th>Paediatric Respiratory Medicine</th>
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</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>King's College Hospital</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>London</td>
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</table>

Outline of Programme
The post provides training and experience in all the Obligatory Modules and up to four of the Desirable Modules in the RCPCH Higher Specialist Training Syllabus for Paediatric Respiratory Medicine (PRM). It also provides some ongoing training in General Paediatrics and allows the trainee to experience tertiary practice in the context of the full spectrum of respiratory illness in children. In the past post-holders could undertake all their training to become accredited in PRM over a two year period at King’s. In 2010 King’s joined a rotation with the other London centres. Trainees now usually spend one year here and one year at either Great Ormond Street Hospital or Royal Brompton Hospital.

Departmental Information
- Demographics
  The Paediatric Respiratory and Cystic Fibrosis Centre at King’s College Hospital provides a secondary and tertiary referral service for children with complex lung disease and cystic fibrosis mainly though not exclusively in South East London, Kent and Sussex. Over 3,000 children are seen in the respiratory clinics each year. The CF shared care network now comprises about 200 children.
- Team
  5 consultants, 1 National grid trainee, 1 clinical fellow, 4 CNSs (asthma, 13 CF, sleep/NIV/gen resp), 3 physiotherapists, 2 dietitians, 1 social worker, 1 psychologist, 1 CF co-ordinator, 1 secretary, 3 respiratory physiologists, 2 sleep technicians, 1 CF pharmacist, 1 CF data clerk
- Supervisor(s)
  Dr Gary Ruiz, Dr Atul Gupta, Dr Cara Bossley, Dr Rania Abusamra, Locum consultant

Clinical Training Responsibilities
Respiratory duties:
- do a daily ward round of respiratory patients on general ward, HDU, PICU, NICU and elsewhere with the consultant on service & CNS
- do the weekly Thursday Respiratory Clinic and attend the “Difficult asthma” Clinic or Bronchiectasis Clinic
- help the paediatric respiratory CNS / co-ordinator arrange respiratory admissions and investigations.
- supervise elective admissions for respiratory investigation.
- learn bronchoscopy and perform according to ability.
Programme Description
• learn to perform, interpret and report lung function tests and cardiopulmonary sleep studies (attend weekly sleep meeting to learn to report studies)
• help chase up and collate the results of investigation in conjunction with the CNS and develop good working links with staff in diagnostic and support services.
• dictate the discharge summaries for respiratory / CF patients and bronchoscopy letters
• receive telephone referrals for empyema drainage, arrange admission, investigation and management
  and become proficient in the placement of pig-tail chest drains.
• communicate with other teams at King’s seeking a specialist respiratory opinion and accompany the consultant giving the opinion and organizing investigation as appropriate.

Cystic Fibrosis duties:
• see the CF in-patients with the CF consultant on service and nurse specialist daily.
• follow up sputum culture results, prescribing antibiotics and liaising with parents and GPs.
• conduct ad hoc CF reviews in liaison with the CF nurse.
• learn to perform CF Annual Reviews and enter Port CF data.
• ensure IV access (if no Portacath) and correct prescription for children on IV antibiotics.
• attend CF outreach clinics where possible.

Workload / Rota Arrangements / Example Timetable
All clinical duties will be shared between grid trainee and clinical fellow. Generally, this would entail alternating weeks with two broad work patterns: 1 Acute inpatient management 2. Outpatient management, elective bronchoscopies, etc

<table>
<thead>
<tr>
<th>a.m.</th>
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<tbody>
<tr>
<td>Monday</td>
<td>Sleep meeting</td>
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<tr>
<td>Ward round / Ward work or TB Clinic or</td>
<td>“Difficult asthma” Clinic or</td>
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<tr>
<td>Bronchiectasis Clinic (monthly) or</td>
<td>Clinical administration or</td>
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<tr>
<td>Ventilation Clinic (monthly) or</td>
<td>Audit/Study/Research/Student</td>
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<tr>
<td>or Clinical correspondence</td>
<td>teaching</td>
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<td>Tuesday</td>
<td>Gen Resp Meeting</td>
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<td>Paediatric bronchoscopy</td>
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Programme Description

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<th>Day</th>
<th>Activity</th>
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<tbody>
<tr>
<td>Wednesday</td>
<td>CF MDT Meeting&lt;br&gt;Ward round / ward work&lt;br&gt;Ward round / ward work / CF Clinic or ad hoc CF reviews / Administration&lt;br&gt;Adult Lunchtime Resp Meeting&lt;br&gt;CF Annual Reviews or Ward work&lt;br&gt;Ward work or Clinical correspondence&lt;br&gt;Respiratory Clinic or Ward round / ward work</td>
</tr>
</tbody>
</table>
| Thursday  | Respiratory Meeting / Journal Club<br>Monthly Paed Resp X-ray Meeting<br>Ward work or Clinical correspondence<br>Post-clinic meeting<br>Respiratory Clinic or Ward round / ward work<br>Ward round / ward work<br>Post-clinic meeting | Adult Lunchtime Resp Meeting<br>CF Annual Reviews or Ward work | (Weekly activity unless specified otherwise)
| Friday    | Ward Round / Ward work or Occasional bronchoscopy (Allergy Clinic-Dr Leech) | Adult Lunchtime Resp Meeting<br>CF Annual Reviews or Ward work | (Weekly activity unless specified otherwise)

Non Clinical Training Responsibilities (expectations of research / audit / teaching)

- help to organize the Thursday lunch-time Paediatric Respiratory Meeting / Journal Club
- present at Radiology, Respiratory, CF, Child Health, TB, etc meetings.
- compile list of imaging for X-ray Meetings and keep a record of discussion outcome
- perform at least one clinical audit; aim for an abstract at an appropriate conference
- occasional help with CRN studies and commercial trials
- participate in undergraduate medical student and MRCPCH teaching

Further training opportunities

- participate in the Paediatric Allergy Clinic
- attend Paediatric TB Clinic

Any further information

- participate in the general paediatric middle grade on-call rota

Contact details for unit

Tel: 020 3299 3562 (CF co-ordinator) / 020 3299 3563 (Resp sec)
Programme Description

gary.ruiz@nhs.net
atulgupta1@nhs.net
cara.bossley@nhs.net
r.abusamra@nhs.net
## Programme Description

### North West

<table>
<thead>
<tr>
<th>Hospital / Centre</th>
<th>Placement Name</th>
<th>Duration (Months)</th>
<th>Educational Supervisor (name and e-mail)</th>
<th>Compulsory (C) or Optional (O)</th>
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<tbody>
<tr>
<td>Alder Hey Children’s Hospital</td>
<td>Respiratory GRID</td>
<td>12</td>
<td>Sarah Mayell <a href="mailto:sarah.mayell@alderhey.nhs.uk">sarah.mayell@alderhey.nhs.uk</a></td>
<td>C</td>
<td>Y</td>
</tr>
<tr>
<td>Royal Manchester Children’s Hospital</td>
<td>Respiratory GRID</td>
<td>12</td>
<td>Stuart Wilkinson <a href="mailto:stuart.wilkinson@mft.nhs.uk">stuart.wilkinson@mft.nhs.uk</a></td>
<td>C</td>
<td>Y</td>
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<td>Respiratory GRID</td>
<td>12</td>
<td>Sarah Mayell <a href="mailto:sarah.mayell@alderhey.nhs.uk">sarah.mayell@alderhey.nhs.uk</a></td>
<td>O</td>
<td>Y</td>
</tr>
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</table>

### Additional Information

Rotation is for 2-3 years depending on the level of the trainee applying for the GRID post. There are 3 GRID posts available to split across the North-West between RMCH and Alder Hey Children’s. 1-2 trainees will commence at RMCH for a minimum of 1 year and 1-2 trainee’s will start in Alder Hey Children’s hospital for a minimum of 1 year. The trainees must rotate between the centres however the length of time in the centres can be discussed/accommodated depending upon the trainee’s requirements/wishes and the availability of the centres.
Programme Description

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<th>Sub-specialty:</th>
<th>Respiratory Paediatrics</th>
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<tr>
<td>Base Unit:</td>
<td>Royal Manchester Children's Hospital</td>
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<tr>
<td>Deaneries involved:</td>
<td>Health Education North West + Mersey</td>
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</table>

**Outline of Programme**

Royal Manchester Children's Hospital (RMCH) tertiary respiratory department is able to offer a comprehensive 2 or 3-year program in postgraduate paediatric respiratory medicine (PRM). RMCH is a modern, purpose built, state of the art Children's Hospital. It is one of the largest Children's Hospital in Europe and offers neonatal and paediatric tertiary service for the entire North-West serving a population of over 1 million children. The successful GRID trainee would be supported by 7 enthusiastic consultants working within a busy tertiary department. RMCH provides a high level of training encouraging audit and research opportunities. The successful trainees will also rotate through Alder Hey Children's Hospital in Liverpool as part of the 2-3 year GRID program, allowing a greater depth of experience across two large tertiary respiratory units.

**Departmental Information**

- **Demographics**
  - **RMCH:**

  The respiratory service is led by 7 respiratory consultants with a high level of expertise and leads with sub-specialty respiratory medicine of cystic fibrosis and LTV. We have consultants with active research programs and work closely with other specialist services with RMCH. The Children's hospital includes supra-regional metabolic, neuromuscular, burns and plastics and regional cardiology, oncology, BMTU, renal transplant, immunology, neurology, gastroenterology, ENT and cardiothoracic surgery. RMCH has the largest cystic fibrosis unit in the UK with 323 patients (2015 CF registry), with a large MDT offering a vast experience in the diagnosis, monitoring and management of paediatric patients. There is a multidisciplinary approach to care with weekly MDT attended by 15-20 people and daily clinics covering new diagnoses, standard clinics and annual review. The tertiary respiratory service has an average of 30-40 inpatients with specialist services caring for children with rare respiratory disorders including TB, PCD, interstitial lung disease, LTV, complex airways, neuromuscular patients and complex metabolic patients. We also accept regular referrals from the tertiary neonatal unit, large 17-bedded ICU, and oncology/BMT unit. We run a regular bronchoscopy list for 50 patients a year but perform a significantly higher number on emergency lists and support both our ICU and ENT colleagues in assessment of paediatric airways (>100/year).

  Our LTV service provides support for over 100 children either supported by NIV or invasively ventilated via tracheostomy, and provides a transitional unit with 6 beds for children transitioning between hospital and home. It also provides a level-2 cardio-respiratory polysomnography service for >700 patients a year. The respiratory service is supported by a large MDT, running 13 consultant led clinics per week providing over 2000 out-patient visits per year. The paediatric TB service diagnoses an average of 50 cases/year.

- **Team**

  Seven consultants: Dr Fran Child, Dr Clare Murray, Dr Stuart Wilkinson, Dr Anirban Maitra, Dr Omendra Narayan, Dr Ghulam Mujtaba and Dr Louise Turnbull. 3 SpRs (1-2GRID), 3 ST1-3T3, 6 specialist CF nurses, 1 advanced practitioner in LTV, 2 specialist respiratory nurses, 2 senior respiratory physiologists, 4 CF physiotherapists, 3 CF dieticians, 2 CF psychologists, 1LTV specialist nurses and speech and language support.

- **Supervisor(s)**

  Dr Fran Child, Dr Clare Murray, Dr Stuart Wilkinson, Dr Anirban Maitra, Dr Omendra Narayan, Dr Ghulam Mujtaba, Dr Louise Turnbull
Clinical Training Responsibilities
The trainee will be working within the paediatric respiratory department and be expected to complete the competencies outlined by PRM curriculum within the 2-3 year training. The trainee will be responsible for contributing to weekly MDTs in LTV and CF, they should take an active role in presentation at X-ray meetings. The trainee will be expected to review referrals from other departments and take an progressive role in management of complex respiratory patients. The program will prepare the trainee for all aspects of becoming a new consultant in respiratory paediatrics.

The trainee will also be given the opportunity to take part in research and be expected to be involved in audit within the department as part of our ongoing respiratory program. They will also be expected to take part in the regular bronchoscopy lists within the department under the supervision and training of consultants.

Workload / Rota Arrangements / Example Timetable
Three respiratory SpR posts are available in Manchester. Up to 2 of these are designated for tertiary respiratory training and 1-2 for general trainees who wish to develop an interest in respiratory. They will also work alongside a respiratory fellow at RMCH. Respiratory SpRs support 3 ward based respiratory ST2-3 grade doctors to provide care for respiratory and CF inpatients housed on the tertiary medical unit. In addition, SpRs will cover respiratory patients on HDU (10 beds) and transitional care (6 beds) with support from ward based ST2-3s. SpR will have regular clinic commitments and will participate in a 1:10 on-call rota covering tertiary medical specialties. The timetable for the trainee will vary but there are daily respiratory clinics, covering complex respiratory referrals, difficult asthma, PCD, ILD, cystic fibrosis, TB, LTV, sleep, transitional care; ward work and commitments as outlined above, monthly bronchoscopy lists, out-reach CF clinics covering seven district hospitals, and the opportunity to review daily polysomnography.

Non Clinical Training Responsibilities (expectations of research / audit / teaching)
The trainee will be expected to prepare for departmental meetings and presentations, participate in MDT discussions, carry out regular audit. They will have the opportunity to take part in research and be expected to teach colleagues as they progress. The current sleep service at RMCH is expanding to provide 500 level 2 studies per year and training will be available however further experience can be obtained in conjunction with the sleep unit at Alder Hey children’s hospital, Liverpool.

Further training opportunities
Manchester has Biomedical Research Centre Status and close links also exist between the clinical and research teams at the North West Lung Centre (Dr Clare Murray), this may offer opportunities for out of programme research for the successful trainee.

Contact details for unit
Contact either Dr Stuart Wilkinson (stuart.wilkinson@cmft.nhs.uk) or Dr Fran Child (fran.child@cmft.nhs.uk).
Programme Description

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric Respiratory Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Alder Hey Children's Hospital</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>North West Deanery</td>
</tr>
</tbody>
</table>

Outline of Programme
This is a joint training programme between the respiratory departments in Alder Hey Children's Hospital and Manchester Children's Hospital. Trainees will rotate through both of these large teaching hospitals providing excellent opportunities for training, education and research in both departments.

Alder Hey is one of the largest specialist children’s healthcare providers in Western Europe. It has a national and international reputation as a centre of excellence. It is a teaching hospital involved in the training of 600+ medical students. Alder Hey provides a range of over 20 specialist services for a total catchment population of 7.6 million. the Trust moved to the new Alder Hey in the Park site in 2015.

Alder Hey hosts the UK Medicines for Children Research Network (MCRN) and is also the lead centre for the Cheshire, Merseyside and North Wales MCRN and is leading the field in paediatric pharmacovigilance.

The Department of Respiratory Medicine at Alder Hey is recognised nationally and internationally as a centre of excellence. The Respiratory Team comprises a large multi-disciplinary team based in the Institute in the Park adjacent to the main hospital. The Respiratory team provides a tertiary service for children with complex respiratory conditions across the North West of England, North Wales and the Isle of Man. In addition, we provide secondary care for children in the Liverpool area.

Key training opportunities in Respiratory Medicine include:

**Cystic Fibrosis**
Alder Hey is the centre of the Cheshire, Merseyside and North Wales Regional Paediatric Cystic Fibrosis Network which provides care to around 300 patients and families. This makes us one of the largest CF centres in the UK. There are strong links with the Adult CF Service. The CF shared-care clinical network established from Alder Hey is described as one of the best models of CF care in the UK. Members of the CF team regularly contribute to national and international guidelines.

**Asthma**
The multidisciplinary asthma team has been integral in providing guidance and pathways to improve care for asthmatic children in the North West including an innovative Asthma in the Community project. The Regional Asthma service has recently been formalised to provide quaternary level care to children and young people with difficult to control asthma and there is a weekly multidisciplinary clinic led by consultants, specialist pharmacist and physiotherapists, nurse specialists and psychologists.

**Long term ventilation and sleep medicine**
Programme Description

There is a large multidisciplinary team supporting the LTV service at Alder Hey including consultants, nurse specialists, psychologists and specialist physiotherapists. Regional care is provided for over 25 invasively ventilated and 125 non-invasively ventilated patients. There is a fully equipped sleep lab with 6 polysomnograms performed each week, this number is expected to increase significantly in the next 12 months. Grid trainees are expected to participate in sleep study set up and reporting.

Outpatients

There are currently over 25 separate respiratory clinics with around 5000 attendances per year plus LTV attendances. All clinics have support from specialist nurses and/or other professions allied to medicine.

Multispeciality clinics include tracheo-oesophageal fistula, congenital lung abnormalities, immunodeficiency, cystic fibrosis gastroenterology, neurorespiratory, sickle cell, complex airway, complex breathlessness.

Multidisciplinary clinics include cystic fibrosis, asthma, allergy, chronic lung disease of prematurity, neurorespiratory disorders, sleep related disorders of breathing, non-invasive and long-term ventilation.

Inpatient experience

The respiratory consultants have 500-600 inpatients admitted under their care each year and are involved with another 750 inpatients in Alder Hey on a shared care basis with other specialties including PICU, surgery, ENT, cardiology, oncology, neurology and general paediatrics.

Bronchoscopy

We provide the regional paediatric bronchoscopy service, with over 150 bronchoscopies under general anaesthesia each year. The majority of procedures are undertaken on a dedicated elective weekly bronchoscopy list with additional emergency cases. Grid trainees are expected to attend lists and will learn how to perform bronchoscopies under consultant supervision.

Pulmonary Function testing

The service is led by a senior physiologist and offers a complete range of paediatric pulmonary function tests including plethysmography, diffusion capacity, CPET and hypoxic challenge testing. Lung clearance index testing will commence in autumn 2018. Trainees attend the lab on a regular basis and are involved in reporting pulmonary function tests.

Departmental Information

- Demographics
  The Respiratory Department is based in the Institute in the Park, adjacent to the main hospital building

- Team
  Consultants in Paediatric Respiratory Medicine:
  Dr Clare Halfhide, Dr Sarah Mayell, Dr Rebecca Thursfield, Dr Ian Sinha, Dr Ruth Trinick, Dr Chris Grime
  Consultants in Long Term Ventilation
Programme Description

Dr Clare Halfhide, Dr Andrew Selby, Dr Ruth Trinick, Dr Chris Grime

Academic Respiratory consultants:
Professor Kevin Southern, Professor Calum Semple, Professor Paul McNamara

Trainees:
4-5 Specialist Trainees (level 5-8 including 1-2 National Grid trainees in PRM)
2 Specialist Trainees (level1-3)

Senior Nursing Staff
Nurse Consultants: Mrs Chris Doyle (Asthma and Allergy), Mr Andrew Derbyshire (LTV)
Advanced Nurse Practitioner Cystic Fibrosis: Elinor Burrows
Nurse specialists: asthma (3), cystic fibrosis (2), home oxygen (1)

Additional support:
4 Clinical Secretaries
- Supervisor(s)
  All consultants act as clinical supervisors, grid trainees normally have 2 named educational supervisors from the NHS consultants but joint academic trainees will have one NHS and one academic educational supervisor.

Clinical Training Responsibilities
Grid trainees will take an increasingly senior role in the department according to their level of experience. In patient experience in acute respiratory, cystic fibrosis and long term ventilation is rota'd in blocks to aid continuity and training. Outpatient experience is wide and grid trainees are expected to attend minimum 2 clinics per week (pro rata). See above section key training opportunities.

Workload / Rota Arrangements / Example Timetable
Grid trainees are part of the paediatric medical on call rota involving first on call (acute general paediatric admissions) and second on call (speciality ward cover). This is currently a 2 in 18 rota. Daytime specialty work is generally protected.

Non Clinical Training Responsibilities (expectations of research / audit / teaching)
The Respiratory Unit research group linked to the Institute of Child Health, the University of Liverpool and the MCRN Local Research Network, is one of the largest and most active research departments in the Trust. The unit has an international reputation for high quality and innovative collaborative research. Several university staff are key members of the clinical respiratory service meaning that research is an integral part of our work. Respiratory research is a core component of the Trust’s research strategy. This means there is a wealth of opportunity available for grid trainees either in parallel with training or as out of programme experience. Participation in research will be strongly encouraged.

All trainees contribute to departmental weekly meetings and attend the weekly respiratory teaching sessions. Senior grid trainees are expected take a lead in organisation of the trainees and contribute to teaching. Grid trainees co-ordinate the bi-monthly respiratory clinical governance meetings and are expected to play an active role in quality improvement including at least 1 audit per year.
Programme Description

**Further training opportunities**
Additional training opportunities exist to complete all requirements of the respiratory subspeciality training programme, these can be coordinated according to educational needs of individual trainees. Previous grid trainees have organised time at the adult CF centre and centres undertaking paediatric lung transplantation. Further opportunities in research are available and should be discussed with supervisors and CSAC.

**Any further information**
Dr Sarah Mayell or Dr Ian Sinha, contact details below

**Contact details for unit**
Respiratory Department, 2nd Floor, Institute in the Park, Alder Hey in the Park, Eaton Road, Liverpool, L12 2AP
0151252 5777 or 0151252 5165
**Northern Ireland**

<table>
<thead>
<tr>
<th>Hospital / Centre</th>
<th>Placement Name</th>
<th>Duration (Months)</th>
<th>Educational Supervisor (name and e-mail)</th>
<th>Compulsory (C)</th>
<th>Guaranteed (Y/N)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Royal Belfast Hospital for Sick Children</td>
<td>Paediatric Respiratory Medicine</td>
<td>24</td>
<td>Dr Gary Doherty (<a href="mailto:gary.doherty@belfasttrust.hscni.net">gary.doherty@belfasttrust.hscni.net</a>)</td>
<td>C</td>
<td>Y</td>
</tr>
<tr>
<td>Royal Hospital for Children, Glasgow</td>
<td>Respiratory Department</td>
<td>12</td>
<td>Dr Neil Gibson (<a href="mailto:Neil.Gibson@ggc.scot.nhs.uk">Neil.Gibson@ggc.scot.nhs.uk</a>)</td>
<td>C</td>
<td>Y</td>
</tr>
</tbody>
</table>

**Additional Information**

The rotation will commence in RBHSC, Belfast in 2019 under the supervision of Dr Gary Doherty. Either year two or year three will be spent in Glasgow, with the remaining year in Belfast.

The flexibility of the timing of the placement of the Northern Ireland trainee in Glasgow has been agreed with Dr Chris Lilley, TPD for West of Scotland and Dr Neil Gibson Chair of CSAC and Lead Supervisor in Glasgow. This arrangement has been designed to permit both trainee preference and training unit flexibility.
Programme Description

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric Respiratory Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Royal Belfast Hospital for Sick Children</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>Northern Ireland Medical and Dental Training Agency</td>
</tr>
</tbody>
</table>

Outline of Programme
RBHSC offers comprehensive training in postgraduate Paediatric Respiratory Medicine (PRM). This is delivered by a large and enthusiastic department. With only a single Grid trainee in PRM, educational opportunities are not diluted. The Grid trainee will have the support of a second registrar with a special interest in PRM. The Grid trainee will spend at least two years in post in RBHSC allowing continuity of training and assessment. Core inpatient and outpatient services will be delivered by the team with the postholder, with flexibility to allow time with allied disciplines and colleagues in adult medicine.

Departmental Information
- Demographics
  RBHSC is a regional tertiary level paediatric hospital with approximately 100 inpatient beds, a dedicated Emergency Department, Paediatric Intensive Care Unit and comprehensive paediatric surgical cover. Northern Ireland has a population of 1.83 million with 20-25% of the population under the age of 18. The CF unit has approximately 180 patients with around 10-12 new patients diagnosed each year. There are increasing numbers of children with complex respiratory support delivered invasively or non-invasively.
- Team
  Five consultants with a commitment to Respiratory Paediatrics, including one Professor with a large research portfolio and one Senior Lecturer with an interest in Medical Education. There are nurse specialists in respiratory medicine (one), asthma (two) and Cystic Fibrosis (two). The Cystic Fibrosis service is supported by two associate specialists, a dietician and a social worker. There is a senior physiotherapist to supervise PRM (LTV, Neuromuscular disease, and non-CF bronchiectasis) and several senior physiotherapists to support the CF service.
- Supervisor(s)
  Dr Gary Doherty

Clinical Training Responsibilities
The postholder will be expected to:
1. Admit and regularly review inpatients admitted under the Department of Respiratory Medicine (usually in Allen Ward in RBHSC)
2. Attend and assist at respiratory outpatient clinics including specific clinics in problematic severe asthma, Cystic Fibrosis, neuromuscular disease and non-CF bronchiectasis as well as more general tertiary level respiratory paediatric clinics
3. Observe, assist and subsequently perform respiratory investigations in the pulmonary function laboratory, in paediatric sleep medicine and in flexible bronchoscopy (commensurate with experience and with educational objectives). National or international training courses in relevant investigations will be supported.
4. Assess inpatient referrals from both within RBHSC and from other hospitals
5. Liaise with other inpatient and outpatient services, specifically the Paediatric Intensive Care unit with regard to respiratory patients requiring respiratory support; and with the TB, Allergy and Immunology services for outpatient management in relevant conditions.
6. Complement his or her training with visits to relevant allied services and adult services.

Workload / Rota Arrangements / Example Timetable
There are two Respiratory ST4-8 (‘registrar’) posts available in RBHSC. One of these posts is filled by a trainee from the National Grid in Paediatric Respiratory Medicine (PRM), and the other provides training for a registrar in General Paediatrics, with a special interest in Paediatric Respiratory Medicine. The approximate division between these two posts and a suggested timetable is attached.
Programme Description

below (Table 1), with regular rotation between the two roles to ensure maximum training opportunities. The on-call commitments of both registrar posts will be on the general paediatric on-call rota. This is divided into two separate rotas covering either the Paediatric Intensive Care Unit, or the general medical inpatients including respiratory inpatients. Both on call rotas are full shift rotas compliant with New Deal and EWTD requirements. Consultant cover is non-resident on call but consultants are always available to attend at short notice.

<table>
<thead>
<tr>
<th>Table 1</th>
<th>Approximate division of duties between two registrar posts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Registrar 1</strong></td>
<td><strong>Registrar 2</strong></td>
</tr>
<tr>
<td><strong>Clinic registrar</strong></td>
<td><strong>Ward registrar</strong></td>
</tr>
<tr>
<td><strong>Outpatient Clinics (Service)</strong></td>
<td><strong>Outpatient Clinics (Service)</strong></td>
</tr>
<tr>
<td>1. MDS Tuesday AM (incl. monthly NMD)</td>
<td>1. DOD Thursday PM (alternating with PICU rounds)</td>
</tr>
<tr>
<td>2. MDS Wednesday AM (incl. monthly DA)</td>
<td></td>
</tr>
<tr>
<td>3. ALR Friday AM Alternate weeks</td>
<td></td>
</tr>
<tr>
<td>4. GMD Tuesday PM</td>
<td></td>
</tr>
<tr>
<td><strong>Inpatients</strong></td>
<td></td>
</tr>
<tr>
<td>1. External referrals (other hospitals)</td>
<td>1. Respiratory inpatients</td>
</tr>
<tr>
<td>2. PICU patients (incl. Thurs PM grand round)</td>
<td>2. RBHSC Referrals</td>
</tr>
<tr>
<td>3. CF Inpatients</td>
<td>3. CF Inpatients</td>
</tr>
<tr>
<td><strong>Cystic Fibrosis</strong></td>
<td><strong>Cystic Fibrosis</strong></td>
</tr>
<tr>
<td>1. Monday PM Clinic</td>
<td>1. MDT Tuesday 11-12.30</td>
</tr>
<tr>
<td>2. Bacteriology 1st/2nd/3rd Wed 1130</td>
<td>2. Joint clinic (Immunology/ID/Resp)</td>
</tr>
<tr>
<td><strong>Respiratory Investigations</strong></td>
<td><strong>Respiratory Investigations</strong></td>
</tr>
<tr>
<td>1. Thursday AM - Sleep study reviews and teaching in lab</td>
<td>1. Alternate Tuesday AM - Exercise testing</td>
</tr>
<tr>
<td>2. MDT Tuesday</td>
<td></td>
</tr>
<tr>
<td>3. Allergy testing (1st Tuesday of the month)</td>
<td></td>
</tr>
<tr>
<td><strong>Allied services</strong></td>
<td><strong>Allied services</strong></td>
</tr>
<tr>
<td>1. Nurse led asthma clinic (Friday AM when ALR clinic not on)</td>
<td>1. TB clinic</td>
</tr>
<tr>
<td>2. Nurse led clinic (Friday AM when ALR clinic not on)</td>
<td>2. Joint clinic (Immunology/ID/Resp)</td>
</tr>
<tr>
<td>3. Allergy testing (1st Tuesday of the month)</td>
<td>3. Allergy testing (1st Tuesday of the month)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Table 2</th>
<th>Suggested timetables for division of duties between two registrar posts</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Clinic Registrar</strong></td>
<td><strong>Ward Registrar</strong></td>
</tr>
<tr>
<td><strong>Monday AM</strong></td>
<td><strong>Ward round/MDT</strong></td>
</tr>
<tr>
<td><strong>Monday PM</strong></td>
<td><strong>CF Clinic</strong></td>
</tr>
<tr>
<td><strong>Tuesday AM</strong></td>
<td><strong>MDS Clinic</strong></td>
</tr>
<tr>
<td><strong>Tuesday PM</strong></td>
<td><strong>GMD Clinic</strong></td>
</tr>
<tr>
<td><strong>Wednesday AM</strong></td>
<td><strong>MDS Clinic</strong></td>
</tr>
<tr>
<td><strong>Wednesday PM</strong></td>
<td><strong>Administration</strong></td>
</tr>
<tr>
<td><strong>Thursday AM</strong></td>
<td><strong>Respiratory investigations</strong></td>
</tr>
<tr>
<td><strong>Thursday PM</strong></td>
<td><strong>PICU Grand Round</strong></td>
</tr>
<tr>
<td><strong>Friday AM</strong></td>
<td><strong>ALR Clinic / Nurse-led clinic</strong></td>
</tr>
<tr>
<td><strong>Friday PM</strong></td>
<td><strong>Administration</strong></td>
</tr>
</tbody>
</table>
Programme Description

Non Clinical Training Responsibilities (expectations of research / audit / teaching)
There is an active Patient Improvement Team in RBHSC. All trainees will be expected to engage in quality improvement projects. There is a significant research portfolio and the opportunity to engage in this both during and out of programme. There is a close working relationship between the Department of PRM and the Department of Medical Education at QUB and therefore opportunity to engage in teaching at both undergraduate and postgraduate level (including formal training).

Further training opportunities
The Department has links with other centres throughout the UK and the world. Trainees would be encouraged to undertake a period out of programme to increase their exposure and experience of PRM. This would be directed towards the specific educational needs of the trainee. The Deanery are open to out-of-programme applications which demonstrate educational value.

Any further information
Further information, discussion of the post and visits to the centre can be arranged through Dr Gary Doherty

Contact details for unit
Dr Gary Doherty, Consultant in Paediatric Respiratory Medicine, RBHSC. Tel: 028 9063 6865
Email: gary.doherty@belfasttrust.hscni.net
Departmental Secretaries: 028 9063 6865
Programme Description

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric Respiratory Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Royal Hospital for Children, Glasgow</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>Scotland - West region</td>
</tr>
</tbody>
</table>

Outline of Programme
We are pleased to offer a year placement in Glasgow within a Grid program hosted in Belfast, allowing the program to draw on the strengths of both units to provide a comprehensive package of training. The post will start in Aug/Sept 2019 in Belfast with a move in 2020 or 2021 to Glasgow at the new RHC (opened June 2015). The Glasgow placement of the program allows delivery of each of the mandatory modules and all options except transplantation. In Glasgow there is the opportunity to interface with a large PICU, and national ECMO, cardiac surgery, renal, immunology and bone marrow transplantation services. There is also a particular strength in the investigation and management of sleep breathing problems including the use of invasive and non-invasive ventilation. There are also strong links with our ENT and specialist airway colleagues.

Departmental Information
- Demographics
  The Glasgow part of the rotation is based in our new 260 bed hospital with purpose built respiratory and exercise physiology laboratory and 4 bed sleep investigation unit. We provide a secondary respiratory service for Glasgow and a tertiary service for around 3.5 million population. As RHC Glasgow provides a number of national services (see above, serving a population of 5.5 million) the specialist work is further enriched. We have actively pursued a network of respiratory care across the West of Scotland with a CF network of around 200 patients and other regional services. The respiratory team functions in a strong collaborative manner and the consultant team have each developed particular interests as noted below.
- Team
  - Dr James Paton
  - Dr Neil Gibson
  - Dr Anne Devenny
  - Dr Phil Davies
  - Dr Louise Thomson
- Supervisor(s)
  Each consultant takes an active part in delivery of the curriculum as do our lively team of respiratory/sleep physiologists, physiotherapists and specialist nurses.

Clinical Training Responsibilities
The post will include a diverse experience of inpatient and outpatient work with a strong basis in respiratory and sleep physiology and ample opportunity to learn investigation techniques in radiology and bronchoscopy.

Workload / Rota Arrangements / Example Timetable
Respiratory service by day with on call responsibility for general and subspecialty pediatrics on RHC senior rota.
Programme Description

**Non Clinical Training Responsibilities (expectations of research / audit / teaching)**
There are ample opportunities for involvement in local and national audit, participation in collaborative trials and local and multi-centre research. The postholder will be expected to contribute to both undergraduate and postgraduate teaching within RHC.

**Further training opportunities**
Within RHC Glasgow there is plenty opportunity to augment training with our colleagues in immunology, allergy, tuberculosis, PICU, cardiology and neonatology.

**Any further information**
Glasgow has a strong track record of producing tertiary respiratory specialists for posts in the UK and abroad.

**Contact details for unit**
Further information from Neil Gibson neil.gibson@ggc.scot.nhs.uk or on 01414516683.
## Programme Description

### Severn and Wales Hospital / Centre Placement Name Duration (Months) Educational Supervisor (name and e-mail) Compulsory (C) or Optional (O) Availability (Y/N)

<table>
<thead>
<tr>
<th>Hospital / Centre</th>
<th>Placement Name</th>
<th>Duration (Months)</th>
<th>Educational Supervisor (name and e-mail)</th>
<th>Compulsory (C)</th>
<th>Availability (Y/N)</th>
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</thead>
<tbody>
<tr>
<td>Children's Hospital for Wales, Cardiff</td>
<td>Paediatric respiratory medicine</td>
<td>12</td>
<td>Dr Iolo Doull; <a href="mailto:doullj@cf.ac.uk">doullj@cf.ac.uk</a></td>
<td>C</td>
<td>Y</td>
</tr>
<tr>
<td>Bristol Children's Hospital</td>
<td>Paediatric respiratory medicine</td>
<td>12</td>
<td>Dr Tom Hilliard; <a href="mailto:Tom.Hilliard@UHBristol.nhs.uk">Tom.Hilliard@UHBristol.nhs.uk</a></td>
<td>C</td>
<td>Y</td>
</tr>
</tbody>
</table>

**Additional Information**
Rotation between the Children’s Hospital for Wales, Cardiff and Bristol Children’s Hospital. We are submitting 1 post, starting in Cardiff and then rotating to Bristol after 12 months. The 3rd year would be tailored to suit the trainee’s needs, including the potential for PICU, according to CSAC training requirements.
**Programme Description**

<table>
<thead>
<tr>
<th>Sub-Specialty:</th>
<th>Paediatric Respiratory Medicine</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Bristol Royal Hospital for Children &amp; Children’s Hospital for Wales, Cardiff</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>Severn &amp; Wales</td>
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</tbody>
</table>

**Outline of Programme**

These posts are designed to provide comprehensive training in Paediatric Respiratory Medicine in the Departments of Respiratory Medicine, Children’s Hospital for Wales and Bristol Royal Hospital for Children. Both hospitals provide secondary care services to their local population and serve a joint tertiary referral population of over 5 million people. The training programme offers excellent training and experience in all general and specialty-specific aspects of the RCPCH Framework of Competencies for Level 3 training in Paediatric Respiratory Medicine. Both hospitals are affiliated to the respective Universities of Cardiff and Bristol, providing good teaching experience on the undergraduate programmes and the potential for further research training.

The programme is based on annual rotation between Bristol and Cardiff. Additional training, e.g. paediatric intensive care can be flexibly provided depending on the needs of the individual trainee.

**Departmental Information**

**Bristol**

**Bristol Royal Hospital for Children:** The hospital has over 180 beds and a clinical investigation unit for day patients, plus full cardiac and general operating theatre facilities. Comprehensive imaging facilities (ultrasound, radio nuclide, CT and MRI) are available and there are fortnightly meetings with the Consultant radiology staff to review respiratory imaging. The hospital is the site of all general and specialised in-patient facilities, including a paediatric accident and emergency department, paediatric intensive care unit (18 beds + three high dependency areas) and in-patient beds for children from newborns to adolescents. The hospital is the base for in-patient services in general paediatrics for Bristol and is now the only in-patient facility for children in Bristol with the centralisation of neurosurgery, burns and plastic surgery in May 2014. Specialist services in paediatric surgery, burns, cardiology, cardiac surgery, gastroenterology, immunology & infectious diseases, respiratory medicine, neurology, endocrinology, inherited metabolic diseases, rheumatology, renal medicine, haematology/oncology, bone marrow transplantation, orthopaedics, ENT, ophthalmology and dermatology are run from the Children’s Hospital, for children from Bristol and the South West region. Each year, approximately 10,000 children are admitted as in-patients, over 25,000 are seen as out-patients, and over 30,000 are seen in the Emergency Department.

Paediatric Respiratory Medicine

The specialist services include difficult to treat asthma, cystic fibrosis, allergy, airway/drooling, primary ciliary dyskinesia, sleep, neuro-muscular and long term ventilation. Referrals are accepted from local general practitioners and from hospitals throughout the South West region for investigation and management of complex respiratory disorders. There is a paediatric bronchoscopy service (over 150 flexible bronchoscopies per annum) and close links with the Department of Paediatric ENT Surgery for microlaryngobronchoscopy. Trainees typically complete over 25 supervised bronchoscopies per year. Close links exist between the Departments of Paediatric Respiratory Medicine, ENT, Paediatric Gastroenterology, Immunology/infectious diseases and Adult Respiratory Medicine. There are over 90 children currently on long term ventilation. There are clinical nurse specialists in respiratory medicine (2), long term ventilation (2) and cystic fibrosis (see below). The paediatric sleep service has seen recent re-investment with up to 200 complex sleep studies performed per year and a large number of outpatient limited home studies.

**Cystic Fibrosis**
Programme Description

The paediatric cystic fibrosis service has a large multidisciplinary team comprising 3.0 wte CF nurses, 2.5 CF physiotherapists, 10 dietician, 10 psychologist, and 0.5 social work support. A weekly multidisciplinary team meeting after clinic is held to discuss cases. There are 90 full-care CF children from in and around Bristol. There is shared care for a further 90 children with Bath, Gloucester and Taunton based around a hub and spoke model of care where Bristol is the lead specialist centre. There is smooth transition from paediatric to adult service with a combined adolescent clinic.

Cardiff

The University Hospital of Wales recently received significant capital to open a new children's hospital. The Children's Hospital for Wales was completed in 2015. The hospital provides tertiary paediatric care for the population of South and Mid Wales - approximately 2.4 million people (0.5 million children). Paediatric specialty services include cardiology, respiratory medicine, sleep medicine, endocrinology, neurology, neuromuscular disease, gastroenterology, metabolic disease, oncology, haematology, nephrology, ophthalmology, dermatology, palliative care, general surgery, orthopaedics, ENT, neurosurgery, spinal surgery, PHDU and intensive care.

The Respiratory team provide a comprehensive tertiary respiratory service including South Wales Regional services for cystic fibrosis, sleep, home ventilation, difficult asthma, PCD, bronchoscopy and formal paediatric lung function.

The specialist cystic fibrosis service offers care to approximately 80 full-care patients and 120 shared-care patients, without-reach services in 10 hospitals. Approximately 350 inpatient comprehensive cardiorespiratory sleep studies are performed per year, mostly on complex patients. Approximately 80 patients are supported in the community on long term ventilation. Approximately 50 bronchoscopies are performed each year. There are weekly MDT meetings for cystic fibrosis, respiratory paediatrics and for sleep and home ventilation. The respiratory team work closely with all co-dependent tertiary services with specific regular meetings with cardiology, ENT and immunology teams.

New additional facilities within the Children's Hospital include a state of the art paediatric lung function and exercise lab, a dedicated inpatient sleep lab, and a ward-based high-care unit for technology-dependant patients. Paediatric critical care and theatres are housed within the Children's Hospital.

There are 3 full time respiratory consultants. The respiratory and sleep team includes 3 specialist nurses, 2 specialist physiotherapists, and 1 sleep physiologist. The CF team includes 2 CF specialist nurses, 2 CF specialist dieticians, a specialist physiotherapist, and a specialist psychologist. There is administrative support from 4 secretaries.

Consultants are research active, currently supporting one respiratory GRID trainee working for an MD, and a scientist working for a PhD.

The service has a website: www.uhwchildren.com/respiratory

Medical Teams

**Bristol:**  Dr SC Langton Hewer  
Dr TN Hilliard  
Dr HM Thomas  
(locum consultant at present)

**Cardiff:**  Dr IJ Doull  
Dr JTM Forton  
Dr L Thia

Educational Supervisors

**Bristol:**  Dr Tom Hilliard  
Cardiff:  Dr Julian Forton

Clinical training responsibilities

On both sites the trainee will work with and be supervised by all consultant members of the clinical teams in Paediatric Respiratory Medicine. Both hospitals operate a consultant-of-the-week rota so
Programme Description

There is always direct consultant supervision. For individual aspects of clinical training, the responsibility for training will lie with the consultant with core responsibility for that area of service. Trainees will be expected to contribute to general paediatrics & specialist paediatrics as dictated by rota commitments, in addition to their training time in specialty respiratory paediatrics.

Workload / Rota Arrangements / Example Timetable

Trainees in Paediatric Respiratory Medicine are expected to take part in on-call rotas to cover acute general and specialty paediatrics. The intensity of the current rotas are:

Bristol: Average 1 in 9 (speciality paediatrics on call)
Cardiff: Average 1 in 10 for speciality rota (no general paediatric on call)

Example timetables for both sites are shown in the Appendix.

Non clinical training (expectations for research/audit/teaching)

All specialty trainees in respiratory medicine are expected to undertake or lead an audit each year (audit co-ordinators are supported by both hospital trusts and regular audit meetings are held). The departments are university affiliated and provide opportunities to take part in research. Interested trainees will be actively encouraged to develop research projects and seek funding for a period of full-time research towards a higher degree. There is an active research culture in both departments with several ongoing projects in which trainees are encouraged to participate. In addition to adjacent university facilities, Bristol hosts the South West Medicines for Children Research Network (MCRN) and the Western Comprehensive Local Research Network (WCLRN) and has recently been awarded a NIHR Biomedical Research Unit in Nutrition. The Children's Hospital for Wales has an on site Paediatric Clinical Research Unit with dedicated research staff. Undergraduate students from the Universities of Bristol and Cardiff are taught on the wards of Bristol Children's Hospital and the Children's Hospital for Wales. Specialty trainees are expected to contribute to clinical teaching and to mentor groups of students during their paediatric attachment.

Further training opportunities

Bristol Children's Hospital co-ordinates a programme of domiciliary ventilation for the South West and currently manages over 80 children on ventilation support in the community. Opportunities exist to accompany the LTV specialist nurse within their clinics, to participate in MDT meetings and to interpret home and in-patient sleep studies in the management of these patients. Specialist allergy clinics are held monthly with immunology and adult allergy services. Management of pulmonary tuberculosis is through immunology/infectious diseases team. The hospital has a recognised specialist clinic for children with idiopathic and secondary pulmonary hypertension. Training can be provided in respiratory aspects of paediatric critical care, including perioperative management of patients with scoliosis repair and complex airway problems. A monthly joint clinic with ENT is available for children with airway disorders. Specialist clinics are held for children with PCD.

The respiratory service in Cardiff is well integrated into the care pathways of many children passing through the hospital. Work is almost universally tertiary respiratory care rather than secondary care as there is a well established general paediatric team. As well as specialist respiratory patients, trainees will therefore be exposed to many groups of complex children requiring respiratory input including those under the care of cardiology, cardiothoracic teams, ENT, immunology, oncology, neuromuscular, neurodevelopmental, spinal surgery, neurosurgery, cleft, maxillofacial, nephrology, metabolic, NICU, PICU. There are opportunities to attend outreach clinics and home visits for difficult asthma and home ventilation.

Contacts

Bristol: Dr Tom Hilliard Email: tom.hilliard@uhbristol.nhs.uk
Cardiff: Dr Julian Forton Email: julian.forton@wales.nhs.uk

Example timetables

<table>
<thead>
<tr>
<th>Bristol Children's Hospital</th>
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<tbody>
<tr>
<td>AM</td>
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<tr>
<td>Monday</td>
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<tr>
<td>Day</td>
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<td>Tuesday</td>
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**Children’s Hospital for Wales, Cardiff**

<table>
<thead>
<tr>
<th>Day</th>
<th>Sessions</th>
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<tbody>
<tr>
<td>Monday</td>
<td>AM Inpatient meeting</td>
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<tr>
<td></td>
<td>Consultant ward round</td>
</tr>
<tr>
<td></td>
<td>General paediatric clinical and X-Ray meeting</td>
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<tr>
<td></td>
<td>PM General Respiratory Clinic</td>
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<tr>
<td>Tuesday</td>
<td>AM Inpatient Sleep studies review</td>
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<tr>
<td></td>
<td>CF annual assessment Clinic</td>
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<td></td>
<td>Monthly Joint ENT Meeting</td>
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<tr>
<td></td>
<td>Monthly Governance/Protocol/Audit meeting</td>
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<tr>
<td></td>
<td>PM CF multidisciplinary and psychosocial meeting</td>
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<tr>
<td></td>
<td>CF annual assessment meeting</td>
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<tr>
<td></td>
<td>Monthly CF adolescent clinic</td>
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<tr>
<td>Wednesday</td>
<td>AM Ward work (Opportunity for outreach clinic)</td>
</tr>
<tr>
<td></td>
<td>PM Hospital Grand Round</td>
</tr>
<tr>
<td>Thursday</td>
<td>AM Inpatient Sleep studies review</td>
</tr>
<tr>
<td></td>
<td>Consultant ward round</td>
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<tr>
<td></td>
<td>CF clinic</td>
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<tr>
<td></td>
<td>PM Monthly Paediatric Grand Round</td>
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<tr>
<td></td>
<td>Respiratory meeting</td>
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<tr>
<td></td>
<td>Sleep and ventilation meeting</td>
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<tr>
<td>Friday</td>
<td>AM Inpatient Sleep studies review</td>
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<tr>
<td></td>
<td>Bronchscopy</td>
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<tr>
<td></td>
<td>Respiratory X-Ray meeting</td>
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<tr>
<td></td>
<td>PM General paediatric teaching</td>
</tr>
</tbody>
</table>
## Thames Valley

<table>
<thead>
<tr>
<th>Hospital / Centre</th>
<th>Placement Name</th>
<th>Duration (Months)</th>
<th>Educational Supervisor (name and e-mail)</th>
<th>Compulsory (C) or Optional (O)</th>
<th>Guaranteed (Y/N)</th>
</tr>
</thead>
</table>
| John Radcliffe Hospital    | Paediatric Respiratory | 12                | Andrew Ives  
Andrew.ives@ouh.nhs.uk                                                                                   | C                             | Y                |
| Southampton General Hospital | Paediatric Respiratory | 12                | Gary Connett  
Gary.connett@uhs.nhs.uk                                                                                   | C                             | Y                |

**Additional Information**
The trainee will spend 12 months in Oxford, then rotate with the grid trainee in Southampton.
Programme Description

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Paediatric Respiratory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Oxford</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>Oxford and Wessex (Southampton)</td>
</tr>
</tbody>
</table>

Outline of Programme
12 months in Oxford followed by 12 months in Southampton

Departmental Information
- Demographics
  The Oxford Children’s Hospital has 107 beds and in addition 6 HDU and 7 PITU beds. It is a referral centre for respiratory medicine, cardiology, neonatology, intensive care, oncology, infectious diseases, neurology, gastroenterology and surgery. Relevant associated surgical specialties include craniofacial and cleft centres, ENT, spinal and neonatal surgery. The regional population is 2.2 million with a childhood population of 550,000 and a birth rate of 25,000 per year.
- Team
  2 NHS consultants (Dr Jeremy Hull and Dr Andrew Ives)
  1 full time registrar
  1 senior house officer (shared with cardiology)
  3.5 respiratory nurses
  2 CF physiotherapists, 1 CF dietician, 0.6 CF psychologist
  1 respiratory technician
  1 secretary
  0.5 physiological scientist
- Supervisor(s)
  Dr Andrew Ives and Dr Jeremy Hull

Clinical Training Responsibilities
The trainee will be responsible for the day-to-day management of all respiratory patients. This will include assessment of new in-patient referrals and regional referrals. The trainee will provide a commitment to the out of hours on call service - either general paediatric or PICU

Workload / Rota Arrangements / Example Timetable
The respiratory department patient load is approximately:
- CF service: Currently 122 active patients (68 local Oxford)
- Sleep service: 500 studies per year
- Children on respiratory support at home: 60 children at any one time
- Outpatients: 250 new referrals per year
- Day care 150 per year
- Bronchoscopy 25 / year
- Emergency admissions: 150 per year (90 regional)
- Ward referrals: 50 per year

<table>
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<tr>
<th>Morning</th>
<th>Afternoon</th>
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<tbody>
<tr>
<td>Monday</td>
<td>Bronchoscopy</td>
</tr>
<tr>
<td>Allergy Clinic or Cardiac Clinic</td>
<td>Neuromuscular clinic</td>
</tr>
<tr>
<td>Respiratory Clinic</td>
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</tr>
<tr>
<td>Tuesday</td>
<td>Respiratory Clinic</td>
</tr>
<tr>
<td>Ward round</td>
<td>CF clinic</td>
</tr>
<tr>
<td>Journal Club</td>
<td>Radiology Meeting</td>
</tr>
<tr>
<td>Wednesday</td>
<td>CF meeting</td>
</tr>
<tr>
<td>General Clinic</td>
<td>Clinical Grand Round</td>
</tr>
<tr>
<td>Thursday</td>
<td>Sleep study reporting (alternate weeks)</td>
</tr>
<tr>
<td></td>
<td>Day case work (spirometry, exercise tests)</td>
</tr>
</tbody>
</table>
Non Clinical Training Responsibilities (expectations of research / audit / teaching)
All trainees will be expected to undertake and audit project. The Oxford Department of Paediatrics has a strong research background. There are opportunities to take part in clinically based studies. There is a journal club twice per week Trainees are expected to contribute to undergraduate teaching (for which Dr Ives is the University paediatric lead). The department takes an active role in research and plans to continue to do so (for which there would be opportunities for the trainee to participate).

Further training opportunities
There are opportunities for training to include training in allergy, cardiology, paediatric intensive care and sleep medicine. We have close joint working relationships with PITU, cleft palate service, one of only 3 national craniofacial centres, ENT service, spinal surgery, a large neuromuscular service (including a national diagnostic service for congenital myasthenia), and cardiology

Any further information
This post rotates to Southampton - a separate job description is available for the 12 months to be spent at Southampton. Contact Dr Gary Connett for further details: conneg@suht.swest.nhs.uk

Contact details for unit
Andrew.ives@ouh.nhs.uk
Programme Description

<table>
<thead>
<tr>
<th>Sub-specialty:</th>
<th>Respiratory</th>
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<tbody>
<tr>
<td>Base Unit:</td>
<td>Southampton</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>Oxford (Thames Valley) and Southampton (Wessex)</td>
</tr>
</tbody>
</table>

Outline of Programme
We offer a two year programme rotating between two tertiary centres in respiratory paediatrics. Both respiratory services are within large teaching hospitals in support of regional networks of specialist care. Further details pertaining to the Southampton training experience are outlined below:

Departmental Information

- Demographics
  Southampton is a tertiary centre for all paediatric sup-specialties servicing a population of around 3.5 Million. We have approximately 120 beds and a 15 bedded PICU supporting regional trauma, cardiac surgery, orthopaedics and neurosurgery. We provide specialist respiratory services for all aspects of care except for lung transplantation and tracheal reconstructive surgery. We have multi-professional teams in all aspects of respiratory care. All team members work together across a fully integrated service in collaboration with our Respiratory Network and across local District Hospitals throughout Wessex.

- Team
  Prof Gary Connett (Cystic Fibrosis)
  Dr Woolf Walker (Primary Ciliary Dyskinesia)
  Dr Julian Legg (Specialty Lead)
  Prof Graham Roberts (Asthma)
  Dr Hazel Evans (Long term Ventilation)
  A Prof Cathy Hill (Sleep)
  Prof Jane Lucas (Academic lead in Primary Ciliary Dyskinesia)

- Supervisor(s)
  Prof Gary Connett

Clinical Training Responsibilities
Prof Connett is the Clinical Supervisor for Respiratory Grid trainees rotating to Southampton and will work with the CSAC and Educational Supervisor in Oxford to ensure that trainees achieve competencies as dictated by the Respiratory CSAC Curriculum. The centre will provide training in all aspects of respiratory care including bronchoscopy, NIV, sleep medicine and Cystic Fibrosis to complement the training experience provided in Oxford.

Workload / Rota Arrangements / Example Timetable
Trainees will partake in the General Paediatric on-call rota. All day time duties (at least 70% of contracted hours) will be in respiratory paediatrics supporting the tertiary respiratory service and thus meeting the trainee’s learning needs. The trainee will have responsibility for a weekly respiratory clinic and with the support of the consultant of the week help lead and manage the tertiary respiratory in-patient case load. Funding will be made available to complete an appropriate bronchoscopy course and ongoing training will be provided to achieve competency with this clinical skill. We run many joint clinics with other specialties including orthopaedics, neurology and paediatric surgery.
Non Clinical Training Responsibilities (expectations of research / audit / teaching)
These will be as per ARCP requirements for trainee progression at Level 3 training. There are ample opportunities for participation in clinical research through our NIHR supported Clinical Research Facility and involvement with our academic programme across all aspects of our specialty. Please contact individual consultants for further details. We have a pro-active teaching programme using high fidelity simulation, regular journal clubs, and the STrIPES/PIERNetwork provides many other educational opportunities. You will be supported to complete the European HERMES exam in respiratory paediatrics and encouraged to participate and present at national and international meetings.

Further training opportunities
Wessex provides numerous additional training opportunities in preparation for working as a consultant paediatrician. We have a dynamic and successful leadership programme. There are opportunities to progress research in respiratory paediatrics towards the completion of an MD or PhD thesis within our academic department. Our Level 3 PREP training programme is also available for grid trainees and there is an expectation that trainees will attend these sessions as part of personal professional development.

Any further information
Wessex has been rated first in the United Kingdom for postgraduate training as feedback by trainees in the GMC survey for the last four years. Our Deanery provides a learning environment in which trainees are helped to pursue their own ideas and initiatives towards better patient care. See the PIERNetwork website for further details.

Contact details for unit
Prof Gary Connett Email: gary.connett@uhs.nhs.uk tel: 02381208973.
**West Midlands**

<table>
<thead>
<tr>
<th>Hospital / Centre</th>
<th>Placement Name</th>
<th>Duration (Months)</th>
<th>Educational Supervisor (name and e-mail)</th>
<th>Compulsory (C)</th>
<th>Optional (O)</th>
<th>Availability Guaranteed (Y/N)</th>
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<tbody>
<tr>
<td>Royal Stoke University Hospital</td>
<td>UHNMP Respiratory Paediatrics</td>
<td>12</td>
<td>Dr Francis Gilchrist <a href="mailto:francis.gilchrist@uhnmbuhospital.org.uk">francis.gilchrist@uhnmbuhospital.org.uk</a></td>
<td>C</td>
<td></td>
<td>Y</td>
</tr>
<tr>
<td>Birmingham Children’s Hospital</td>
<td>BCH Respiratory Paediatrics</td>
<td>12-24</td>
<td>Dr Isobel Brookes <a href="mailto:Isobel.brookes@nhs.net">Isobel.brookes@nhs.net</a></td>
<td>C</td>
<td></td>
<td>Y</td>
</tr>
</tbody>
</table>

**Additional Information**
This is a 2-3 year rotation including one year at Royal Stoke University Hospital and one or two years at Birmingham Children’s Hospital depending on the training level of the trainee.
Programme Description 2019

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<thead>
<tr>
<th>Subspecialty:</th>
<th>Tertiary Respiratory Paediatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Unit:</td>
<td>Royal Stoke University Hospital, Stoke-on-Trent</td>
</tr>
<tr>
<td>Deaneries involved:</td>
<td>West Midlands</td>
</tr>
</tbody>
</table>

**Outline of Programme**
This is a two centre program in tertiary respiratory paediatrics with 12 months at UHNS followed by 12-24 months at BCH. The change over should be flexible to satisfy each trainee's needs.

**Departmental Information**

**Demographics**
The paediatric department covers a total population of approx 700,000 with over 15,000 out-patient attendances and over 10,000 in-patient referrals following merger with Mid-Staffordshire Hospital in 2014. As well as General and Community Paediatrics, there are tertiary services for NICU, PICU and children's respiratory care. Gastroenterology and rheumatology are developing specialities.

**Team**
Dr Will Carroll is the academic and clinical lead for the Paediatric Respiratory Department.
Dr Martin Samuels works 2 days a week at GOSH and 3 days a week at RSUH. He heads the sleep / NIV service.
Dr Francis Gilchrist is the Paediatric CF Centre Director and heads the bronchoscopy service.
Dr John Alexander leads the PICU respiratory team and undertakes bronchoscopies and research.
Dr Mellissa Hubbard heads the allergy service.
Dr Ang Ho specialises in allergy, CF and sleep medicine.
Sadie Clayton is Respiratory nurse consultant and heads all aspects of respiratory nurse care and 5 other paediatric respiratory nurse specialists.

**Educational Supervisor:**
The grid trainee will be supervised by all the above but primarily by Drs Carroll and Gilchrist.

**Clinical Training Responsibilities**
The trainee will be an integral member of our large Paediatric Respiratory MDT. They will have the opportunity to take on clinical roles and responsibilities appropriate to their level of training. All obligatory and most of the desirable respiratory training modules are available at RSUH.

**Out-patient Clinics**
There are a wide range of out-patient opportunities including general CF, CF annual review, general respiratory, allergy, difficult asthma and TB. The trainee will be expected to attend these clinics and over time start to see and manage patients independently.

**In-patient Responsibilities**
The trainee take a key role in the management of paediatric respiratory in-patients. They will be supported by the Paediatric Respiratory Consultant of the Week who will undertake regular ward rounds. The trainee will also be involved in reviewing children on the general paediatric ward, NICU and PICU.

**Flexible Bronchoscopy**
We have a weekly paediatric bronchoscopy list and perform around 100 procedures / year. The trainee will therefore have extensive opportunities to undertake their required number of scopes.
Sleep Medicine and NIV
We undertake 34 sleep studies per week and have a large cohort of NIV patients. We are a quaternary referral centre for CCHS. The trainee will have the opportunity to become proficient in performing and interpreting sleep studies.

Lung Function
Standard spirometry and FeNO are performed routinely in our General Respiratory clinic. The trainee will be trained in taking these measurements and interpreting the results. More complex lung function is undertaken in the Respiratory Physiology Department. The trainee will have opportunity to be trained regarding this by our Chief Physiologist, Ian Cliffe.

**Workload / Rota Arrangements / Example Timetable** The Tier 2 rota is EWTD compliant (band 1A).

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<thead>
<tr>
<th></th>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THURS</th>
<th>FRI</th>
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<tbody>
<tr>
<td>AM</td>
<td>Allergy clinic / CF team meeting</td>
<td>CF Clinic</td>
<td>Paed Resp Team meeting</td>
<td>Bronchoscopy List</td>
<td>Respiratory Clinic</td>
</tr>
<tr>
<td>Lunch</td>
<td>Paediatric Grand Round</td>
<td>CF clinic MDT</td>
<td>X-Ray Meeting</td>
<td>Perinatal Morbidity Meeting</td>
<td>Respiratory clinic MDT</td>
</tr>
<tr>
<td>PM</td>
<td>Allergy clinic / CF annual review clinic</td>
<td>Ward round / Brittle asthma clinic</td>
<td>Sleep study interpretation</td>
<td>Ward round / Lung Function</td>
<td>Audit / research</td>
</tr>
</tbody>
</table>

In addition to their Paediatric Respiratory responsibilities, the trainee will be part of either the General Paediatric rota or the PICU rota.

**Non Clinical Training Responsibilities (expectations of research / audit / teaching)**
Our department is extremely research active. At any one time we are usually supervising at least one further degree student (MPhil / PhD) as well as an Academic Clinical Fellow. Member of our team are frequently named as Chief or Principal Investigator for commercial and non-commercial studies. This presents significant opportunities for the Grid Trainee. Whilst at RSUH, all our previous trainees have undergone GCP training so they can become involved in research projects and have presented abstracts at international or national conferences.

The trainee will be part of the Teaching Rota and be expected to give regular teaching sessions to the junior doctors. They will also be expected to complete a clinically relevant audit which they can hopefully re-audit after implementing necessary actions.

**Further training opportunities**
These can be developed on an individual basis depending on the particular interests of the trainee.

**Any further information**
We believe this Grid post at RSUH offers the trainee extensive experience in the clinical and research aspects of Paediatric Respiratory Medicine in a fun and friendly atmosphere.

**Contact details for unit**
Dr Will Carroll 01782 675289 will.carroll@nhs.net
Dr Francis Gilchrist 01782675289 francis.gilchrist@uhn.nhs.uk
Dr Sheng-Ang Ho 01782 675289 ang.ho@nhs.net
Subspecialty: Paediatric Respiratory Medicine
Base Unit: Birmingham Children's Hospital
Deaneries involved: West Midlands

Outline of Programme
Two-centre programme in respiratory paediatrics with 1 year at University Hospital of North Midlands (UHNM) and 1-2 years in Birmingham Women's and Children's Hospital (BWCH), depending on previous experience.

Departmental Information
Demographics: Birmingham Children's Hospital is the major tertiary paediatric centre for the West Midlands, serving a population of 5.5 million. All tertiary paediatric specialties are covered with some supra-regional services. Secondary care services are provided for the local population, and there is a busy Emergency Department.

Team - 6 Consultants (5.3 WTE), 7 CF/Respiratory nurse specialists (9.0 WTE), 5 physiotherapists (4.0 WTE), 2 dieticians (15 WTE), 4 lung function physiologists (3.6 WTE), 3 psychologists (15 WTE), 2 ST6-8 trainees (1-2 Grid posts), 1ST2-3 trainee and 1 FY2 trainee, 1 CF/Respiratory Fellow in post and one Clinical Research Fellow.

Supervisor(s)
Dr M Desai, Consultant Respiratory Paediatrician and CF Centre Director
Dr S Rao, Consultant Respiratory Paediatrician and Deputy Chief Medical Officer
Dr P Kenia Consultant Respiratory Paediatrician and Clinical lead
Dr I Brookes, Consultant Respiratory Paediatrician and Departmental Education Lead
Dr P Nagakumar Consultant Respiratory Paediatrician and Research Lead

Clinical Training Responsibilities
Our friendly department offers very comprehensive clinical training covering all obligatory modules and most of the desirable modules in Paediatric Respiratory Medicine. Our Clinical Research Fellowship programme is now in progress, with collaboration with colleagues at the Royal Brompton Hospital.
Trainees will be involved in the inpatient and outpatient management of children with acute and chronic respiratory conditions. We work closely with other specialties including PICU, Thoracic Surgery, Cardiology/Cardiac Surgery, Haematology/Oncology and Stem Cell Transplant, ENT and other Surgical specialties (including craniofacial, neurosurgery, liver transplant and cleft services). There are 5 Respiratory Clinics and 3-4 Cystic Fibrosis Clinics/week (including nurse led Asthma and CF clinics), and PCD, sleep and ventilation clinics. We are at the centre of a large paediatric CF network (300+ patients), as well as offering other services including difficult asthma, flexible bronchoscopy, cardio-respiratory sleep diagnostics, long term ventilation, and a large paediatric lung function laboratory. BCH also provides PCD multidisciplinary care as co-Lead with Leicester National Clinical Management Service.

Workload / Rota Arrangements / Example Timetable

<table>
<thead>
<tr>
<th>AM</th>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THURS</th>
<th>FRI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Respiratory Grand Ward Round</td>
<td>Consultant Ward round PICU/ Respiratory Meeting</td>
<td>Ward Round CF Team Meeting Bronchoscopy Respiratory MDT meeting</td>
<td>Ward round Non-CF bronchiectasis/PCD (monthly)</td>
<td>Consultant Ward round Difficult asthma Clinic/ MDT meeting PCD Annual review clinic (alt months)</td>
</tr>
</tbody>
</table>
Programme Description 2019

<table>
<thead>
<tr>
<th>Lunch</th>
<th>Departmental X-ray meeting (with Thoracic surgeons)</th>
<th>Long term ventilation MDT meeting</th>
<th>Hospital Grand round</th>
<th>Departmental seminar</th>
<th>Junior doctor teaching (hospital-wide)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PM</td>
<td>Ward work/consultations</td>
<td>Respiratory clinic</td>
<td>CF clinic</td>
<td>Registrar teaching Ward work/audit Sleep Clinic/ Long term ventilation clinic (alternate weeks)</td>
<td>Asthma/Respiratory Clinic</td>
</tr>
</tbody>
</table>

Grid trainees take part in the Hospital at Night (RMO) on-call full shift rota providing middle grade medical cover to 13 medical specialities out of hours. The rota design aims to maximise daytime training opportunities, and promote teamwork and continuity within both daytime speciality work and out of hours.

Non Clinical Training Responsibilities (expectations of research / audit / teaching)
The Department participates actively in multicentre research placed within an established R&D structure, with access to the Welcome Trust Clinical Research Facility. Participation in departmental audit is encouraged and supported. There are numerous opportunities for undergraduate and postgraduate teaching, as well as management roles.

Further training opportunities
An elective 6-month post on PICU within the 2-year training posting may be possible. Adult CF, Adult Respiratory/Sleep/LTV, Allergy, TB and cardiac clinic experiences can also be organised.

Any further information
The experiences at BCH complement those received at RSUH providing a comprehensive training programme.

Contact details for unit
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Dr Priti Kenia Tel 0121333 8205 pritikenia@nhs.net
We welcome contact from trainees at any stage of the application process, and are very happy to discuss our posts with interested candidates.