SPECIALTY TRAINING PROGRAMME IN CLINICAL RADIOLOGY (SOUTHAMPTON)
PROGRAMME IN WESSEX DEANERY

This is a 5 year training programme in Radiology at ST1 aimed at doctors who can demonstrate the essential competences to enter this level of training. The programme is designed to support training for a CCT in Radiology. Details of essential competences and qualifications are detailed in the MMC person specification for Radiology at ST1 which is available from www.mmc.nhs.uk

It is anticipated that completion of this training programme, subject to satisfactory progression at the ARCP, will lead to a CCT or CESR (CP) in Radiology. The programme is based in hospitals in the Wessex Deanery including:

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<th>HOSPITAL</th>
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<tr>
<td>Basingstoke and North Hampshire Hospital</td>
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<tr>
<td>The Royal Bournemouth Hospital</td>
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<td>Poole Hospital</td>
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<td>Queen Alexandra Hospital</td>
<td>Portsmouth</td>
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<td>Salisbury District Hospital</td>
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<td>Southampton General Hospital</td>
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<td>Royal South Hants Hospital</td>
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<td>Princess Anne Hospital</td>
<td>Southampton</td>
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<td>Royal Hampshire County Hospital</td>
<td>Winchester</td>
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<td>Lymington, New Forest Hospital</td>
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The Wessex Deanery covers a geographical area from Basingstoke in North Hampshire to Dorchester in West Dorset and the Isle of Wight to the South. This is a spread of approximately 65 miles North to South and 76 miles East to West. The Wessex Deanery serves a population of around 2.8 million people.

The Wessex Deanery is part of NHS South of England, comprising South Central, South East Coast and South West Strategic Health Authorities. The Wessex Deanery currently covers the health communities of South Wiltshire, Dorset, and Hampshire and the Isle of Wight. The Wessex Deanery is responsible for the training of some 2,500 trainees.

**Rotation Information**

Expected rotation arrangements for this programme are:

This is a five year training programme leading to accreditation for the CCT by the Royal College of Radiologists / GMC. Courses are run for both parts of the FRCR. A Radiology Film Museum, a library and computer based teaching aids are available. There are well-equipped postgraduate medical centres at Southampton General Hospital in the South Academic Block and at the Royal South Hants Hospital. There are educational activities almost every day for all groups of graduates at all stages of their careers. There are also departmental teaching sessions and conferences, and intensive pre-examination practice sessions are held prior to each Final Fellowship Examination.
Years 1 to 3
The course begins in August with a two-week induction. This allows trainees to become familiar with the specialist sub-sections of the Radiology Department and to meet many of the staff. In the rest of the first year trainees rotate through up to 6 attachments including CT/MRI, ultrasound, x-ray screening and nuclear medicine. There is a comprehensive lecture programme shared with Portsmouth trainees, leading up to the Physics and Anatomy examinations for the First Part of the Fellowship of the Royal College of Radiologists. For the next two years, trainees take part in a programme of three month attachments. These are based in Southampton, Salisbury and Bournemouth. There is a programme of monthly teaching days during the first 6 months of years 2 and 3 based on the 6 modules of the FRCR 2A exam. Tutorials and film-viewing sessions are held on alternate Tuesday afternoons during the second 6 months of the second and third years. A second study session may be made available each week, at the discretion of the Rotation supervisor, for targeted research or study. The programme for the first 3 years is subject to modification due to the need for alignment with the new recently published RCR curriculum and will include training in research methods.

Years 4 and 5
Attachments in these years may be based in any of the hospitals involved in the Southampton-based training scheme. The aim is to provide a variable combination of further general radiology training and experience in the trainee’s chosen sub-specialty/specialties in keeping with the RCR 3+2 training structure. These attachments are very flexible and can be tailored to an individual trainee’s requirements following discussion with the Training Committee and relevant trainers. Trainees wishing to specialise in Interventional Radiology or Interventional Neuroradiology will be supported during years 4 and 5, with year 6 funding available for at least one post each year within Wessex. Appropriate time is allocated for personal study and flexible training attachments.

On-Call Arrangements
First year trainees sit an Emergency Radiology examination towards the end of the first year, commence A & E reporting if successful and commence on-call in the second year.

Study and Training
The primary aim of all posts is training and there is a region wide syllabus and minimum standards of education are agreed by all Trusts within the rotation.

The Deanery is committed to developing postgraduate training programmes as laid down by GMC, Colleges and Faculties and by COPMED - the Postgraduate Deans Network. At local level college/specialty tutors work with the Programme Director and Directors of Medical Education in supervising these programmes. Trainees will be expected to take part in these programmes (including audit) and to attend meetings with their nominated educational supervisor.

All posts within the training programme are recognised for postgraduate training by the General Medical Council (GMC) in accordance with their standards for training.

Study leave is granted in accordance with Deanery/Trust policy and are subject to the maintenance of the service.
All posts have a service element and the following covers the majority of duties. There will be minor variations in different hospitals but the list is aimed at covering the majority of duties:

1. Take part in rostered emergency work.
2. Study for higher examination and maintain continued professional development.
3. Attend weekly educational and multidisciplinary sessions.
4. Undertake audit at various times throughout the rotations.
5. Teach medical students as directed.
6. Co-operate with members of the personnel department when monitoring hours of work and other personnel issues.
7. Attend induction in each hospital or new department.
8. Comply with all local policies including dress code, annual and study leave.

University Hospital Southampton NHS Foundation Trust Generic/Specialty Information

University Hospital Southampton NHS Foundation Trust (UHS) provides services to some 1.3 million people living in Southampton and South Hampshire, plus specialist services such as neurosciences, cardiac services and children's intensive care to more than 3 million people in central southern England and the Channel Islands.

The Trust is also a major centre for teaching and research in association with the University of Southampton, offering opportunities for undergraduate and postgraduate teaching, and partners including the Medical Research Council and Wellcome Trust with excellent facilities for research and clinical care.

The Hospital treats around 112,000 inpatients and day patients, including about 50,000 emergency admissions, approximately 375,000 people at outpatient appointments and around 110,000 cases in the Emergency Department.

CLINICAL RADIOLOGY DIRECTORATE

The Department of Clinical Radiology currently undertakes some 300,000 examinations per year. The Department's annual expenditure budget is approximately £19m with a whole time equivalent staffing establishment of 309. Within this establishment there are 140 radiographic, 25 nursing and 43 admin and clerical staff.

The Main Radiology Department in the Centre Block was completed in 1978. It comprises 12 X-ray and 5 Ultrasound rooms and includes digital fluoroscopy, CT and general purpose X-ray rooms. The fluoroscopy service is currently being re-configured to provide enhanced access for ERCP, pain clinic and gastroenterological investigations.

A dedicated Interventional Radiology Suite with a three-bedded Day Case Unit and a further two-bedded recovery area are located within the General Department. A Siemens Axiom Artis Angiographic room is fully equipped for endovascular procedures. This room has Trans-abdominal Ultrasound, Intra-vascular Ultrasound, high speed Rotational and Carbon Dioxide Angiography. Ultrasound includes colour and power Doppler capabilities. A second Interventional room equipped with a Siemens Artis MP digital unit opened in Jan 2002. Again this room is equipped with trans-abdominal Ultrasound with colour and power Doppler capabilities, walled gases and is equipped for theatre cases. This room is used predominantly for non Vascular Intervention including Hepato-biliary, other GI and Endoscopic Interventions.
Uroradiology, Central Line placement and lung biopsies.

CT scanning takes place on both a newly installed GE HD750 Dual Energy multi-slice and Siemens Sensation 64 slice units immediately adjacent to the Interventional Radiology suite. As part of a major refurbishment and a new managed equipment service, MR scanners are to be installed in the area with additional upgraded Ultrasound accommodation and new consultant office suites.

Currently, PET/CT is available from a visiting mobile facility 2 days per week with plans to install a static scanner.

The 5 room Ultrasound suite which is within the Main Department comprises one Philips iU22, one Philips HDI 5000 and three Toshiba Apio XG and 80 machines and the whole department will be upgraded within the next year.

The Nuclear Medicine Department is responsible for routine radionuclide imaging and other isotope procedures for UHS and also provides a service for District General Hospitals in the Wessex Region. Four gamma cameras and a whole body counter are sited in the department together with advanced computer image processing and a patient database system. A new dedicated 4-ring Neuro Camera was installed in January 2008. The Department also has excellent physics and biochemist support. The hospital pharmacy provides radiopharmacy facilities. Research facilities are available for the development of new radionuclide imaging and therapeutic techniques.

The Wessex Neurological Centre is the Regional Centre for Neurosurgery, Complex Neurology and Clinical Neurophysiology.

Housed in a purpose-built block the Centre has 39 Neurosurgical and 30 Neurological beds with a 13 bed Intensive Treatment Area. The Centre is served by its own radiological facilities. A Bi-planar Siemens Artis dedicated neuro-interventional angiography room opened in March 2004. This room allows complex interventional procedures under full theatre conditions. The CT scanner is a Siemens Sensation 16 slice scanner installed in 2005. Adjacent to the Neurological Centre is a purpose-built MR Suite housing a Siemens 1.5T Symphony and a Philips 1.5T scanner. This is shared between the Radiological Specialties.

The Cancer Centre has been built on the SGH site with 3 new additional linear accelerators and ward accommodation for Radiotherapy and Medical Oncology. The Centre includes a plain film diagnostic Radiology Room, an Ultrasound Room and an 8 slice GE CT scanner.

The Paediatric Radiology Department is situated adjacent to the Main Xray and Ultrasound departments on C Level at Southampton General Hospital. The Department was completely rebuilt and refurbished in 2005 and comprises: Fluoroscopy Room, 3 General Radiology rooms and an Ultrasound Room with Toshiba Apio 80. There are two dedicated Paediatric CT lists, four sessions of MRI, of which two are shared with paediatric neuroradiology and include provision of general anaesthesia, with additional access to the scanners for emergency procedures. There is a close liaison with the Department of Nuclear Medicine.

Cardiothoracic Radiology is on E Level close to the Cardiothoracic Wards, Cardiac Catheter Rooms and Operating Theatres. There are 4 Cardiac Catheter Rooms, 2 bi-plane and 2 single
A new Cardiac MRI Scanner (Siemens Avanto) opened in October 2006. The Department provides a specialist cardiac and pulmonary imaging service to the Trust and beyond. There are plans to change one of these catheter labs into a further IR room to deal with the increase in EVAR/TVAR and acute trauma.

The Breast Imaging Unit was opened in 2007 on the Princess Anne Hospital site. The self-contained Unit includes three Mammography rooms, 2 with digital stereotaxis, 2 Ultrasound Rooms, Clinical and Counselling Rooms, providing services to Southampton, Salisbury and the Isle of Wight.

Trust wide PACS was installed in July 2006 and will be replaced in 2013.

Royal South Hants Hospital is a satellite unit of Southampton General Hospital. The radiology department at the Royal South Hants provides diagnostic radiology services for outpatients, GPs and a PCT minor injury unit. A GE Signa 1.5T MR scanner carries out a range of outpatient musculoskeletal, neurological, body and breast MRI studies. There is one digital fluoroscopy and four plain film radiography rooms. There is a refurbished ultrasound suite which is used for the ENT one-stop clinic.

The Trust is in the process of negotiating a Managed Equipment Service to support a rolling programme of equipment replacement.

Curriculum
All areas of the core curriculum, as required by the Royal College of Radiologists www.rcr.ac.uk, are covered during the first three years of the training programme, with rotational attachments both in Southampton and in the participating district hospitals. Subsequently, consolidation of general radiology experience is combined with development of specialist radiology skills depending on the trainee’s chosen sub-specialty.

Teaching
Formal teaching programmes are run throughout the 5 year training period. In the first year, lectures in physics and anatomy cover the RCR curriculum in preparation for the first part of the FRCR examination, together with lectures and practical sessions in radiographic techniques and procedural radiology. In the second and third years there is a comprehensive lecture programme, covering all aspects of the curriculum in preparation for the part IIA FRCR examination, and a separate preparatory course for the final part (IIB) examination: all of these are currently held on Tuesdays. There is an excellent post-FRCR course, comprising a series of study sessions held on various aspects of the role of the consultant, structure and function in the NHS etc. This is designed to supplement the regional professional development course, which is run throughout the 5 year training programme.

Main Conditions of Service
The posts are whole-time and the appointments are subject to:

1. The Terms and Conditions of Service (TCS) for Hospital Medical and Dental Staff (England and Wales)
2. Satisfactory registration with the General Medical Council
3. Medical Fitness – You may be required to undergo a medical examination and chest x-ray. Potential applicants should be aware of the Department of Health and GMC/GDC requirements with regards to HIV/AIDS and Hepatitis viruses. Candidates must be
immune to Hepatitis B. You will be required to provide, in advance of appointment, evidence of immunity or have a local blood test (as deemed necessary by the Occupational Health Department).

4. Right to work in the UK
5. Criminal Records Check/POCA check carried out by the Trust Medical HR department.
6. Pre-employment checks carried out by the Trust Medical HR department.

**Hours**

The working hours for junior doctors in training are now 48-hours (or 52-hours if working on a derogated rota) averaged over 26 weeks (six months). Doctors in training also have an individual right to opt-out if they choose to do so, but they cannot opt-out of rest break or leave requirements. However, the contracts for doctors in training make clear that overall hours **must not exceed 56 hours in a week** (New Deal Contract requirements) across all their employments and any locum work they do.

[http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/EWTD/Pages/EWT.aspx](http://www.nhsemployers.org/PlanningYourWorkforce/MedicalWorkforce/EWTD/Pages/EWT.aspx)

**Pay**

You should be paid monthly at the rates set out in the national terms and conditions of service for hospital medical and dental staff and doctors in public health medicine and the community health service (England and Wales), “the TCS”, as amended from time to time. The payscales are reviewed annually. Current rates of pay may be viewed at [http://www.nhsemployers.org/PayAndContracts/Pay%20circulars/Pages/PayCircularsMedicalandDental.aspx](http://www.nhsemployers.org/PayAndContracts/Pay%20circulars/Pages/PayCircularsMedicalandDental.aspx)

Part-time posts will be paid pro-rata.

**Pay supplement**

Depending upon the working pattern and hours of duty you are contracted to undertake by the employer you should be paid a monthly additional pay supplement at the rates set out in paragraph 22 of the TCS. The current payscales may be viewed at xx. The pay supplement is not reckonable for NHS pension purposes. The pay supplement will be determined by the employer and should be made clear in their offer of employment and subject to monitoring.

**Pension**

You will be entitled to join or continue as a member of the NHS Pension Scheme, subject to its terms and rules, which may be amended from time to time.

**Annual leave**

Your entitlement to annual leave will be five or six weeks per annum depending upon your previous service/incremental point, as set out in paragraphs 205 – 206 of the TCS.
Sick pay

Entitlements are outlined in paragraphs 225-240 of the TCS.

Notice

You will be required to give your employer and entitled to receive from them notice in accordance with paragraphs 195 – 196 of the TCS.

Study leave

The employer is expected to offer study leave in accordance with paragraphs 250 – 254 of the TCS. Local policy and procedure will be explained at your induction.

Travel expenses

The employer is expected to offer travel expenses in accordance with paragraphs 277 – 308 of the TCS for journeys incurred in performing your duties. Local policy and procedure will be explained at induction.

Subsistence expenses

The employer is expected to offer subsistence expenses in accordance with paragraph 311 of the TCS. Local policy and procedure will be explained at induction.

Relocation expenses

The employer will have a local policy for relocation expenses based on paragraphs 314 – 315 of the TCS and national guidance at

http://www.nhsemployers.org/PayAndContracts/MedicalandDentalContracts/JuniorDoctorsDentistsGPReg/Pages/DoctorsInTraining-JuniorDoctorsTermsAndConditions150908.aspx

You are advised to check eligibility and confirm any entitlement with the employer before incurring any expenditure. In addition to local policy there is Deanery guidance which can be viewed on www.wessexdeanery.nhs.uk

Pre-employment checks

All NHS employers are required to undertake pre-employment checks. The employer will confirm their local arrangements expected to be in line with national guidance at

http://www.nhsemployers.org/RecruitmentAndRetention/Employment-checks/Pages/Employment-checks.aspx
Professional registration

It will be a requirement of employment that you have professional registration with the GMC for the duration of your employment.

Health and safety

All employers have a duty to protect their workers from harm. You will be advised by the employer of local policies and procedures intended to protect your health and safety and to comply with these.

Disciplinary and grievance procedures

The employer will have local policies and procedures for dealing with any disciplinary concerns or grievances you may have. They will advise you how to access these, not later than eight weeks after commencement of employment.

Educational supervisor

The employer will confirm your supervisor on commencement.

General information

The Deanery’s management of Specialty Training programmes, including issues such as taking time out of programme and dealing with concerns or complaints, is available at www.wessexdeanery.nhs.uk and in the national ‘Gold guide’ to Specialty Training at http://www.mmc.nhs.uk/specialty_training_2010/gold_guide.aspx