

Wrightington, Wigan & Leigh NHS Foundation Trust *and* Alder Hey Children's NHS Foundation Trust *and* St Helens & Knowsley Teaching Hospitals NHS Trust , Training Interface Group fellowship post in Hand Surgery



Introduction

The fellowship programme is run through the Joint Committee on Surgical Training (JCST).

Fellowship posts are open to all higher surgical and where appropriate, non-surgical trainees, that meet the person specifications. Details of eligibility are found through the [JCST](#).

Any unit applying to host Training Interface Group fellows must have trainer representation from all parent specialties.

Applicant units are required to be able to deliver the TIG curriculum and adhere to the quality indicators (QIs). The curriculum can be found on the [ISCP website](#) in the curricula of the most relevant parent Specialties (as mentioned above) and the QIs are listed on the [JCST website](#).

The data included in the form below is an extract of the data submitted by the unit in their application to become a TIG unit.

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Unit Lead Trainer:

Name
Chye Yew Ng

Local Educational Provider (LEP)

Main hospitals/trusts involved with teaching (base units):

	Hospital A	Hospital B	Hospital C
Name of Trust	Wrightington Hospital	St Helens and Knowsley Teaching Hospitals NHS Trust Whiston Hospital	Royal Albert Edward Infirmary
Address of Trust	Hall Lane Appley Bridge Wigan WN6 9EP	Warrington Road Rainhill Prescot L35 5DR	Wigan Lane Wigan WN1 2NN

Peripheral units (if to be visited by trainee):

	Hospital/Trust N	Hospital/Trust O	Hospital/Trust P
Name of Trust	Alder Hey Children's NHS Foundation Trust	Leigh Infirmary	
Address of Trust	Eaton Road Liverpool L12 2AP	The Avenue Leigh WN7 1HS	

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LEP Consultants / Trainers

Primary Educational Supervisor (may be a trainer): Chye Yew Ng

Main Trainer(s) involved with fellowship:

A main trainer must undertake more than five programmed activities (PA) in their job plan and they must also be a surgeon primarily in the relevant sub-specialty area and recognised by the GMC as a trainer. At least one trainer from each specialty must have five years full time experience in the NHS.

List of parent Specialties of main trainers:

Parent Specialty	Number of main trainers from this Specialty
Orthopaedics	6
Plastics	4

Other Trainer(s) involved with fellowship:

Parent Specialty	Number of other trainers from this Specialty
Radiology	2

Any other Specialties who are members of the multidisciplinary team not already mentioned as appropriate to the TIG:

Specialty	Trust A (numbers)	Trust B (numbers)	Trust C (numbers)
Hand therapy	3		

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Indicative Timetable

The fellow should be based at the main hospitals/Trusts for most of their educational activity but one session (professional activity) may occur outside these units each week. A trainee may work for 48 hours per week and if there is no on-call, all this time may be used for training.

Below is an indicative timetable that indicates the type of proposed activity and includes supporting professional development (SPD). SPD should be one half day each week. Please note that the timetable must be compatible with the Quality Indicators specific to the relevant TIG. All Quality Indicators may be found online at: <https://www.jcst.org/training-interface-groups/quality-processes/>

Types of activity

Combined outpatient clinic (COC)

Other outpatient clinics (OOC)

Operating theatre (Th)

Multi-disciplinary team meeting (MDT)

Supporting Professional Development (SPD)

Teaching ward round (WR)

Research activities (RA)

In addition to the above, the TIG fellow is also expected to attend and take an active role in the following clinical governance meetings:

MDT (A) – MDT occurs monthly with discussion of complex and challenging cases. A musculoskeletal radiologist and microbiologist also attend to give their input and expertise.

Audit meeting (A) – Audit meetings occur monthly with the entire orthopaedic department and the anaesthetic department (Bimonthly). Trust agenda and audit presentations are discussed.

M&M (A) – M&M meetings occur monthly following the upper limb MDT.

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The following is a sample rotation, which may be modified according to the specific interests of the fellow.

Timetable 1 – 6 months

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	AHC Th (PM)	WTN Th (MH)	WHI Th/OPD (PM)	WTN OPD (MH)	Wk 1 and 3 List SA
Afternoon	AHC Th (PM)	WTN Th (MH)	WHI Th/OPD (PM)	WTN OPD (MH)	Wk 1 and 3 List SA

Timetable 2 – 3 months

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	RAE OPD (CN)	WTN/RAE Th (CN)	Wk 1 and 3 SA clinic	Wk 2 and 4 List SA	WTN Th (CN)
Afternoon	RAE OPD (CN)	WTN/RAE Th (CN)	WK 1 and 3 SA clinic	Wk 2 and 4 List SA	WTN Th (CN)

Timetable 3 – 3 months

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	WTN TH (ST)	Flexible	OPD Leigh (ST)	WTN Th (ST)	WTN OPD (ST)

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Afternoon	WTN TH (ST)	Flexible	WTN OPD (ST)	WTN Th (ST)	Flexible
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Training Delivery

Please an overview of the Unit's TIG Fellowship Training Delivery plan:

This is a newly designed training rotation, which combines the best training opportunities available from Wrightington and Liverpool. It offers exposure to the full spectrum of hand surgery subspecialties, including microsurgery, arthroscopic surgery, image-guided surgery and open surgery. The conditions treated in the Units include brachial plexus injuries, peripheral nerve injuries, spasticity, congenital hand differences, Dupuytren's disease, osteoarthritis, rheumatoid arthritis, carpal instability, tendon injuries and fractures.

The fellowship not only provides an excellent volume of complex cases, but also a supportive environment for the fellow to complete the hand diploma. There are regular MDT meetings for challenging cases as well as weekly consultant-led teaching programme.

The fellow is also encouraged and supported in undertaking research projects, which could lead to presentations in scientific meetings and publications in peer-reviewed journals.

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Module 1: Skin / Soft tissue / Microsurgery / Dupuytren's Disease

Between the two Units, we provide the whole spectrum of treatment options for Dupuytren contractures, ranging from needle fasciotomy, collagenase, fasciectomy and dermofasciectomy. In Liverpool, the fellow will obtain exposure and training in the full spectrum of soft tissue reconstruction from skin graft to free tissue transfer.

Module 2: Fractures and Joint Injuries including Wrist instability

We have a significant surgical workload for fractures of the hand and wrist. The acute referrals come from the local A&E departments, and we regularly receive tertiary referrals for treatment of complex intra-articular injuries from the neighbouring Trusts, including Isle of Man.

Wrightington has been the pioneer in the treatment of wrist instability. We run a significant sports practice and the fellow can expect to acquire the basic skills of wrist arthroscopy, progressing to more advanced techniques depending on individual development during the fellowship.

Module 3: Osteoarthritis and inflammatory arthritis

We have accumulated extensive experience and caseload in the treatment of degenerative and inflammatory arthropathy. We offer silastic, pyrocarbon, and metal-on-plastic arthroplasty options for PIPJ. We also have expertise in the primary and revision arthroplasties of the ulnar head, DRUJ in Liverpool and wrist joint. The fellow can expect to have exposure and training in those procedures as well as developing insight of the clinical outcomes as observed in the outpatient clinic.

Module 4: Tendon and tendon-related disorders

In Liverpool, the fellow will be exposed to the whole range of acute and chronic flexor and extensor tendon injuries and their reconstructions. In addition, the fellow can expect to acquire competence in the management of tendinopathy (de Quervain's tenosynovitis, trigger digits), ECU instability, swan-neck and Boutonniere finger deformities. Between the Units, we also offer tendon transfer options for late or failed peripheral nerve palsy as well as spastic disorders.

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Module 5: Nerve and nerve related disorders

Entrapment neuropathy constitute a significant surgical workload of the departments. The fellow will also be exposed to the surgical exposures of the supra and infraclavicular brachial plexus, as well as peripheral nerves in the upper and lower limbs. The fellow is expected to gain competence in performing primary nerve repair and develop skills in nerve grafting and nerve transfer. In addition, we also provide surgical treatment for persistent idiopathic nerve palsy (Parsonage Turner syndrome / neuralgic amyotrophy).

Module 6: The child's hand, vascular disorders and tumours

The fellow has regular sessions in the Alder Hey Children's Hospital, where he/she will be exposed to the management of congenital hand differences and spasticity. The fellow can expect to acquire competence in the management of benign lumps and bumps in the hand and wrist. In addition, we also manage benign nerve sheath tumours such as schwannoma and neurofibroma with involvement of the local MDT as necessary.