

# **UKHSA North West**

# Health Protection Training Prospectus

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UKHSA North West Public Health Training

# Contents

1	Training location details	4
2	Introduction	4
3	UKHSA North West	5
4	Health Protection	9
5	Internal placements and experience	1 <u>1</u>
6	Appendix	13

# **1** Training location details

### **1.1 Name of training location**

1.1.1 UK Health Security Agency - North West

### **1.2 Type of training location**

1.2.1 Generalist and specialist health protection public health training.

#### **1.3 Health Protection Placements**

- 1.3.1 Health Protection attachments:
  - Mandatory Short-Term attachment (three months whole time equivalent (WTE)) post MPH and having passed the Faculty of Public Health Diplomate Examination (DFPH – Part A).
  - Optional Long-Term Health Protection Placement (two\_years WTE) post MPH and having passed the DFPH.

1.3.2 Sub-Regional Lead Trainers contact details: -

Cumbria & Lancashire – Janey Otunnu-Kenyon

Janey.Otunnu-Kenyon@ukhsa.gov.uk CC: CL.HPT@ukhsa.gov.uk

- Cheshire & Merseyside Evdokia (Wicki) Dardamissis
  <u>Evdokia.Dardamissis@ukhsa.gov.uk</u>
  CC: candmHPU@ukhsa.gov.uk
- Greater Manchester Kristina Poole
  <u>Kristina.Poole@ukhsa.gov.uk</u>
  CC: gmancHPU@ukhsa.gov.uk

# 2 Introduction

- 2.1.1 This prospectus outlines the specialist public health training opportunities available at UKHSA North West and provides details of what specialty registrars (StRs) in public health and other prospective trainees can expect or may want to consider when organizing their attachment.
- 2.1.2 This prospectus should be read in conjunction with the Faculty of Public Health, Public Health Specialty Training Curriculum<sup>1</sup> and Health Education North West Public Health website<sup>2</sup>

### **3 UKHSA North West**

- 3.1.1 The UK Health Security Agency (UKHSA) is responsible for protecting every member of every community from the impact of infectious diseases, chemical, biological, radiological and nuclear incidents and other health threats. We provide intellectual, scientific and operational leadership at national and local level, as well as on the global stage, to make the nation's health secure.
- 3.1.2 UKHSA health protection teams (HPT) provide specialist public health advice and operational support to NHS, local authorities and other agencies.

Local HPTs lead the UK Health Security Agency (UKHSA)'s response to all health-related incidents. They provide specialist support to prevent and reduce the impact of:

- infectious diseases
- chemical and radiation hazards
- major emergencies

HPTs can help with:

- local disease surveillance
- maintaining alert systems
- investigating and managing health protection incidents and outbreaks
- implementing and monitoring national action plans for infectious diseases at local level

3.1.3 UKHSA North West has three sub-regional bases covering the North West of England:

- Cumbria & Lancashire based in Preston
- Cheshire & Merseyside based in Liverpool
- Greater Manchester based in Manchester

<sup>&</sup>lt;sup>1</sup> <u>https://www.fph.org.uk/training-careers/specialty-training/curriculum/</u>

<sup>&</sup>lt;sup>2</sup> <u>https://www.nwpgmd.nhs.uk/Specialty\_Schools/Public\_Health</u>

### **3.2 Competencies and organization of placements**

3.2.1 All competencies required for StRs can potentially be addressed within UKHSA and working with system stakeholders on programmes of work.

Opportunities available will cover:

- surveillance and assessment of the population's health and well-being
- assessing the evidence of effectiveness of health and healthcare interventions, programmes and services
- policy and strategy development and implementation
- strategic leadership and collaborative working for health
- health and wellbeing
- health protection
- health and social service quality
- public health intelligence
- academic public health
- commitment to environmental sustainability
- 3.2.2 In January the prospectus is updated for the coming year. In February/March an online 'health protection placement awareness session' is held for those considering a short or long term health protection placement in the coming 12 months. Invites will be shared via HEE, and the session will be recorded so a recording will be available for watching back via Teams for anyone unable to attend. Following the placement awareness session further details can be sought as below:
  - For the 3-month placement: any StRs wishing to discuss placement opportunities and confirm start dates should contact their sub regional lead trainer and TPD
  - For the 2-year long term placement: the advert for places available for the coming year will be shared via HEE, which will include details of who to contact for further information

#### 3.3 Training opportunities

3.3.1 Where possible/relevant, StRs on attachment are given the opportunity to attend:

- Induction meetings with internal team members and supporting NW teams (for example, Radiation, Chemical and Environmental Hazards Team (RCE), Field Service Team, Microbiology Department and Food & Water colleagues)
- Daily health protection handover meeting
- Incident Management and Outbreak Control meetings
- Weekly regional and national health protection teleconference
- North West team meetings
- Sub-Regional team Meetings
- National operations and strategic leadership meetings (as appropriate)
- On-call training sessions
- Other local, regional and national training

- 3.3.2 StRs will also be encouraged to attend Health Protection Conferences and join other relevant partners fora.
- 3.3.3 UKHSA North West has links to local universities and academic institutions, and StRs may have the opportunity to get involved with teaching or research opportunities with university partners.
- 3.3.4 StRs have opportunities for undertaking regional projects. In addition, there may be opportunities for working with national colleagues on national projects.

#### **3.4 Supervision & Induction**

- 3.4.1 Each StR will have an Educational Supervisor. There are a number of accredited Educational Supervisors within the region. The Educational Supervisor will have oversight of StR training needs throughout the time in the training location. In addition, due to the nature of the varied work at UKHSA, other trainers will be available as project supervisors, and people who are not accredited trainers or from other professional groups may also help deliver specific training in areas where they have expertise (in agreement with the Educational Supervisor).
- 3.4.2 There will also be opportunities for StRs on long term attachments to work alongside the Senior Leadership Team to develop relevant leadership competencies.
- 3.4.3 The progress of the StR will be monitored throughout the attachment via regular meetings with the educational or project supervisor
- 3.4.4 When StRs start their placement they will undergo an induction programme for two to three weeks so that they can meet key people and find out what is happening across the region. During this time, along with their Educational Supervisor, they will identify opportunities to meet some of their public health training needs. This will be addressed using a learning agreement to outline projects, timeframes, outcomes and the date of the next review.

#### **3.5 Administration**

- 3.5.1 StRs will have use of a UKHSA laptop and headset. Desks at all sites have facilities for linking laptops to a monitor, keyboard and mouse for agile working.
- 3.5.2 Some business administration support may be provided if required, linked to relevant case or project work. Computer software includes Microsoft Office and other packages as appropriate. There is access to journals through library services. All StRs are able to access university libraries using their NHS ID. Teleconference and video conference facilities are available.
- 3.5.3 Usual HR arrangements via the Lead Employer for StRs will be in place during the attachment. No additional funding will be available for the attachment.

### 3.6 Location, accessibility and sustainability

- 3.6.1 StRs are expected to complete their three-month mandatory health protection training with the sub-regional team within their allocated training zone. Since 2022, UKHSA have been operating a hybrid working arrangement, with the majority of staff undertaking a combination of office working and home working (currently staff are expected to work from the office at least 2 days per week, pro rata). The policy and guidance relating to this remains under review. An update will be provided at the annual placement awareness session and this, along with home working arrangements, will be discussed at an individual basis at the start of the placement.
- 3.6.2 Office locations are fully accessible by a range of transport modes. Sustainable travel, by train, bus, walking or bicycle (mileage reimbursed via the lead employer), is actively encouraged as part of the daily commute and to meetings within the day. Further information is given in Section 6: Appendix
- 3.6.3 Registrars are encouraged to use journey planning tools including those listed below to support sustainable travel;
  - o <u>https://www.traveline.info/</u>
  - o <u>https://www.google.com/maps</u>
  - o <u>https://www.cyclestreets.net/journey/</u>

## **4 Health Protection**

- 4.1.1 The health protection team (HPT) identifies and responds to health hazards and emergencies caused by infectious disease, hazardous chemicals, poisons or radiation. It does this by providing advice and information to the general public, to health professionals such as doctors and nurses, and to national and local government. Furthermore, the Health Protection team takes action to control sources, break pathways and control receptors to reduce or prevent exposure.
- 4.1.2 During the placement, you will gain understanding of:
  - surveillance of communicable diseases and environmental hazards
  - the role of the various agencies in diagnosis, prevention and control of communicable diseases and environmental hazards
  - the legal basis of communicable disease control and environmental public health
  - the basis of infection control in the community
  - the role of immunisation including systems for monitoring vaccine uptake
  - the public health role in emergency planning
  - environmental epidemiology and health risk assessment

4.1.3 You can also develop skills in:

- applying surveillance skills in prevention and control of communicable disease and environmental public health
- investigation of single cases of common communicable diseases
- investigation of clusters / outbreaks / environmental hazards including the application of appropriate epidemiological methods
- advising professionals and the public on communicable diseases and potential health effects of environmental hazards
- identification and management of clusters / outbreaks / health effects of environmental hazards
- decision making and time management
- media handling and interview techniques
- risk assessment

#### 4.2 What type of work might I do?

- 4.2.1 The work available is likely to include:
  - managing enquiries relating to and cases and incidents of infectious disease, hazardous chemicals, poisons or radiation
  - undertaking literature reviews
  - data analysis
  - teaching

- audit, such as Immigrant Screening for TB, Review of Chemical Incident Form
- cluster investigation, e.g. alleged cancer clusters
- critical literature review, e.g. hand hygiene
- 4.2.2 See Appendix for examples of recent StR projects/experiences in health protection

#### 4.3 Three-month placement (mandatory)

- 4.3.1 All trainees in the Public Health StR training scheme are required to undertake a threemonth attachment in health protection. The purpose of this placement is to meet the health protection relevant outcomes and to prepare the StR for participation in the out-of-hours health protection rota
- 4.3.2 Trainees **must** have passed the DFPH Part A before starting their health protection placement. If they have not yet passed the examination, they can arrange a date to start a placement that is conditional upon passing the DFPH.
- 4.3.3 Full time StRs will work the whole time with the health protection team for three months. It is not generally acceptable for StRs to undertake joint placements with other training locations during the short-term placement
- 4.3.4 Placements for StRs who work part-time will be extended so they have three months equivalent experience

#### 4.4 Two-year placement

- 4.4.1 Long term placements comprise more in-depth experience in all aspects of health protection than can be obtained in a three-month attachment.
- 4.4.2 This may include longer placements in related departments, such as Centre for Radiation, Chemical and Environmental Hazards (RCE), the Field Service (FS) and the Manchester Public Health Laboratory if appropriate. Trainees will also be expected to maintain wider competencies through project work with other parts of UKHSA and/or a local authority.
- 4.4.3 Up to two longer term StRs can generally be accommodated per UKHSA North West base at any one time (i.e. a total of six across the North West). Two-year placements are advertised across the North West and are subject to competitive interview.
- 4.4.4 Long-Term placements availability is reviewed annually and subsequently advertised to StRs in the North West.
- 4.4.5 In specific cases, one-year placements may be arranged for StRs who wish to pursue a career in health protection if it is not possible to fit a two-year placement before CCT.
- 4.4.6 Key contact: Kristina Poole Kristina.Poole@ukhsa.gov.uk

### **5** Internal placements and experience

- 5.1.1 There are a variety of training experiences/secondments available to StRs on UKHSA\_attachments, depending on the StR's individual career interests and plans.
- 5.1.2 StRs should liaise with their Educational Supervisor and lead trainers in their area, ideally early on in their attachment or even before they start, to plan these training opportunities.

### 5.2 Field Services (FS)

- 5.2.1 The Field Service (FS) is part of UKHSA Regions directorate and comprises six regional teams, as well as the Real-Time Syndromic Surveillance Team (ReSST), the UK Field Epidemiology Training Programme (FETP) and the Rapid Investigation Team (RIT).
- 5.2.2 Each team has consultant epidemiologists who are accredited Educational Supervisors and can provide specialist training placements for StRs with an interest in infectious disease epidemiology.
- 5.2.3 FS North West can provide a full range of experience in infectious disease epidemiology: outbreak investigation, surveillance work, data management, data analysis, statistics, research methods, and scientific writing and presenting. FS North West works with UKHSA health protection colleagues to provide a health protection service covering infectious, chemical and radioactive hazards across the area, providing technical support with incident management. FS North West also maintains, manages and reports from several surveillance systems, and is actively involved with academic research.
- 5.2.4 FS North West is also a training location for the UK Field Epidemiology Training Programme (which is not covered in this prospectus, as it has a different entry route and training programme).
- 5.2.5 Key contact: Paul Cleary paul.cleary@ukhsa.gov.uk

#### 5.3 Centre for Radiation, Chemical and Environmental Hazards (RCE)

- 5.3.1 StRs may wish to undertake experience with Radiation, Chemical and Environmental Hazards (RCE), which is part of the UKHSA the Science Group.
- 5.3.2 RCE provides advice, research and services to protect the public from hazards resulting from exposure to chemicals and poisons, ionising and non-ionising radiation, and other environmental hazards. RCE's Environmental Hazards and Emergencies (EHE) Department provides authoritative scientific advice to government, the NHS and other bodies about the public health effects of acute and chronic chemicals exposures and the impact of other environmental hazards.

- 5.5.3 Experience as part of the team includes
  - Response to chemical & environmental hazard incidents and enquiries which threaten people's health, through the provision of public health risk assessments
  - Provision of specialist advice at local and national level on the public health impact of acute and chronic non-infectious environmental exposures
    - Supporting complex risk assessments, risk communication and development of the evidence base

# 6 Appendix

#### 6.1 Location details: Cheshire & Merseyside

- 6.1.1 UKHSA North West's Cheshire & Merseyside office is located in Suite 3B, 3<sup>rd</sup> Floor, Cunard Building, Water Street, Liverpool, L3 1DS.
- 6.1.2 The Cunard Building is located in Liverpool City Centre, around a 20-minute walk or 10-minute cycle from Lime Street Station, which provides rail connections to Manchester, Preston and nationally. James Street Station is a 5-minute walk and provides local connections to Lime Street Station, the Wirral, Chester and Moorfields (for onward journeys to Southport and South Liverpool). Details of local bus and train timetables can be found at <u>here</u>.
- 6.1.3 Further details about the building location, facilities and nearby car parking can be found <u>here</u>.
- 6.1.4 The key academic links in the region are: University of Liverpool, Liverpool John Moores and the Liverpool School of Hygiene and Tropical Medicine.

#### 6.2 Location details: Cumbria & Lancashire

- 6.2.1 UKHSA North West's Cumbria & Lancashire office is currently located at Lancashire County Council, Pitt Street Reception, County Hall, Preston, PR1 8XB
- 6.2.2 County Hall is opposite Preston railway station, which provides national rail connections to London, Manchester and Liverpool, alongside local services. Many local buses also stop outside County Hall. Local journey planning and details of bus and train timetables can be found <u>here</u>.
- 6.2.3 Secure cycle storage is available at both the railway station and outside County Hall, with changing facilities also available within County Hall. Further details about cycle routes across Lancashire can be found <u>here</u>.
- 6.2.4 The Council operates several Park and Ride sites to help reduce congestion in the city centre, and details of these can be found <u>here</u>.
- 6.2.5 The key academic links in this region are: Edge Hill University, University of Central Lancashire, University of Cumbria, and University of Lancaster.

#### 6.3 Location details: Greater Manchester

- 6.3.1 UKHSA North West's Greater Manchester office is currently based in 3 Piccadilly Place, London Road, Manchester, MA 3BN.
- 6.3.2 Three Piccadilly Place is located opposite Piccadilly railway station, which provides national and local rail connections. Piccadilly also has a Metrolink stop, providing local tram services. Information on train, tram and bus times and routes, and journey

planning can be found here

- 6.3.3 Secure cycle storage is available at both Manchester Piccadilly Station and on floor of the car below 3 Piccadilly Place, with showers and changing facilities available cycle racks. Bike hire is available from the railway station and more information can be found <u>here</u>.
- 6.3.4 The key academic links in this region are: University of Manchester, and Manchester Metropolitan University. The Greater Manchester base also offers regular joint clinico-epidemiology meetings with the Regional Infectious Diseases Unit at North Manchester General Hospital

#### 6.4 Examples of projects and experiences in Health Protection

- 6.4.1 Evaluation of the carbapenemase-producing Enterobacteriaceae (CPE) screening policy: The StR worked with partners in microbiology, infection control and surveillance at MFT and colleagues in health protection and field services. The work involved interpreting evidence and current guidance, undertaking an analysis of the data and drawing appropriate conclusions to inform public health guidance for ongoing control of CPE in the hospital setting. The work was published in the Journal of Hospital Infection and presented at the Infection Control Study day in Manchester.
- 6.4.2 **AMR Clinical Scenarios & Literature Review:** UKHSA\_and Champs received funding from HEE to pilot a AMR training programme using virtual reality (VR) with Cheshire & Merseyside primary care prescribers. This piece of work involved developing an evidence-based approach to the training including a formal literature review of the evidence-base around delayed antibiotic prescribing in primary care. Alongside this, the StR was required to develop scenarios about antibiotic prescribing including evidence-based recommendations of where different antibiotic prescribing methods were most appropriate in primary care as the basis for the VR training. This involved researching current clinical guidelines and liaison with a wide range of clinical stakeholders to gain consensus about the most appropriate prescribing strategies.
- 6.4.3 **Clinical incident management:** After UKHSA were informed of a damaged piece of medical equipment by an acute trust, the StR was tasked with supporting the consultant with incident management. Due to the low evidence-base around risk of communicable diseases from this specific piece of equipment, the StR had to conduct a thorough literature review and lead discussions with national specialists to determine the risk of transmission to other patients and define the appropriate steps that needed to be taken for patients who may have been exposed to IDs from the damaged equipment. Due to the low existing evidence-base and the unique methods of risk ascertainment in this case, this incident is now being submitted for publication to share the learning with the wider public health community.
- 6.4.4 **Health Protection Redesign:** Supporting the lead consultant, the StR has provided deputy leadership for the redesign of patch-based working (geographical areas of responsibility for consultants and practitioners) within the UKHSA NW Health Protection Team. This has included running focus groups with HPT staff, assimilating information and evidence from a range of different sources to inform an

evidence-based options appraisal. Over the coming months, the StR will be involved in supporting the implementation of any changes in working practices across the UKHSA NW area and evaluating the success of any change.

#### 6.4.5 Health Protection Experiences:

I am currently in my second year of long-term HP training with the GM HPT. Since the start of my placement, I have been involved in acute and strategic health protection work. During my first year in this placement, I was more focused on acute health protection experience, and gaining further experience of this on the practitioner rota on the acute response centre (ARC). This provided me with a range of experience, from managing individual cases of infectious diseases to being involved in outbreaks in complex settings such as care homes and prisons. I also spent time with the Radiation, Chemicals and Environmental Hazards team (RCE) and this involved joining the national duty desk and exposure to ongoing incidents and strategic work.

As I moved into my second year of placement, my focus changed towards gaining experience as a consultant in health protection. I have been taking part in duty desk work on the consultant rota to consolidate my knowledge of acute health protection work, but I am also gaining an understanding of how Health Protection Teams are structured and how they work with various stakeholders, local, regional and national. I have been given a local authority patch to work with, with whom I liaise with regards to HP issues in the locality as well as providing support to local meetings such as IPC meetings and health protection boards as a UKHSA representative. I have been leading Outbreak Control Team meetings (OCTs) and managing complex incidents with support from the consultant team. I am working with external stakeholders on strategic health protection priorities which has given me experience of healthcare public health, as well as experience with environmental hazards.

I've really enjoyed this placement and would definitely recommend it to other trainees. There's never a dull day and there are so many opportunities in terms of training!

#### Doaa Farag, ST5, GM HPT.

I came to my three month placement feeling trepidatious as I felt very inexperienced in health protection practice, particularly regarding infectious diseases, due to my lack of clinical experience.

This placement was unlike any previous placement I had experienced due to the requirement to regularly be on duty. At first I found it very difficult to manage the competing demands of the duty desk, however I was introduced to it slowly via shadowing which I found very helpful, particularly as it showed me the different methods and approaches of the various practitioners to the demand. As I took on duty responsibilities independently I grew in confidence in my own abilities, as well as my knowledge of when to ask duty colleagues, the ARC manager or the Duty Consultant. I found the team to be very

supportive in this process and over time needed support less for lower risk activities.

The placement helped me develop my skills in the core tenets of health protection, including conducting risk assessment and management, investigations of outbreaks, decision making and partnership working.

#### Lucy Vanes, ST4, GM HPT

I am an ST4, currently on my second year of the health protection placement at the Cheshire and Merseyside health protection team, prior to that I completed my 3 months health protection placement in the Cumbria and Lancashire Health protection team. I thoroughly enjoyed my short-term placement, it was geared towards giving me the opportunity to have a broad experience of acute response in preparation for going on to the on call rota. I felt that my educational supervisor and the team were intentional in building my health protection skills and ensured they pulled me into any cases, situations or incidents that provided a learning opportunity. I enjoyed the structure and the frequent catch up with my ES to assess learning progress was useful.

All the team in both zones are welcoming, helpful and supportive individually and collectively making me feel like I am part of the team. During my placement I have been fortunate enough to participate and lead on different projects search as audits, COVID19 variant work, winter planning, environmental public health, incident/outbreak management meetings, health protection boards/forums and different teaching opportunities. This varied work has enabled me to make use of my skills but also enhance my learning and experience in not only health protection but also wider public health. I have had the opportunity to work with different stakeholders outside UKHSA such as local authority colleagues which has been great for my leadership, negotiating, networking and communication skills. Everyone makes time to listen and support which makes it a great learning environment. My learning is prioritised even during some challenging and demanding incidents; I like the different opportunities this placement has offered. As I progress in my training, I am looking forward to the gaining more experience as a consultant in health protection.

I would recommend it as a placement.

#### Tabitha Kavoi, (ST4) C&M HPT