

North East and north Cumbria Specialty Training

School of Radiology - Higher Training In Neuroradiology

Introduction

Clinical Radiology training is currently formatted with the first three years devoted to core training, the second two (“+2”) to subspecialty training. At the end of five years, the trainee will be awarded a CCT in Clinical Radiology with defined higher level competencies as laid out in their e-portfolio. Competencies are currently divided into “Core”, Level 1 and Level 2. A trainee would be expected to leave the School with a suite of Level 1 competencies, fit to practice at DGH level. Those wishing to work at tertiary referral level would be expected to be more highly specialised in a particular field. These are referred to as Level 2 competencies. In practice trainees tend to leave the School with a suite of both Level 1 and 2 competencies. This is laid out in the curriculum published by the Royal College of Radiologists (RCR) 2014.

In May 2012 the RCR released its Interventional Radiology (IR) subspecialty curriculum, covering vascular and non-vascular IR training, and which encompasses Interventional Neuroradiology. Diagnostic Neuroradiology training to Level 2 is covered in the original 2010 curriculum. Diagnostic Neuroradiology requires two additional years of higher training (+2), Interventional Neuroradiology requires three (+3). Both should be undertaken in a specialist centre, such as the Royal Victoria Infirmary (RVI), part of Newcastle upon Tyne Hospitals (NUTH), or James Cook University Hospital (JCUH).

The School currently offers two posts in higher Neuroradiology training. Historically these were created as fellowships, but in the current language of the RCR should be regarded as higher training. Completion of training results in award of Clinical Radiology (CR) CCT with subspecialisation in either Diagnostic or Interventional Neuroradiology (DNR or INR respectively).

The RCR’s stated position is that all training opportunities should be offered to local trainees first, and only advertised nationally if there is no local interest.

Current position

The School currently offers two posts which are nationally advertised. The School, in full agreement with the Departments of Neuroradiology at NUTH and JCUH now wish to offer these posts first to local registrars, and then only nationally if it is felt appropriate to do so, and if there is no suitable local interest. Funding for the posts, as with all extant School posts, is 50% HEE NE funded, 50% Trust funded, and remains unchanged. The posts do not currently attract on call payment or banding. If they did, payment would come from NUTH or JCUH.

Developing people
for health and
healthcare

Policy

1. With effect from January 2016, the School will continue to offer one post per annum, either in Diagnostic or Interventional Neuroradiology, to be based wholly or in greater part at the RVI, and rotating to other School hospitals only if required for training purposes, which, if entered at the start of ST4, will lead to the appropriate CCT.
2. Entry will be at the start of ST4 for INR, and may be at either (start of) ST4 or ST5 for DNR.
3. A pre-requisite for entry to Higher Training in the School is full FRCR IIA, which marks completion of Core Training, as covered elsewhere in other School policies. IIB is not a pre-requisite, which reflects recent RCR rule changes which prevent full FRCR being gained prior to the start of ST4.
4. Post allocation will be decided locally by mutual discussion with the TPDs and interested registrar(s) as is currently the case across the spectrum of Higher Specialist Training in the Region. In that sense, Neuroradiology is now normalised to the way other Higher Training is managed. The post will only be advertised nationally if there is no suitable local interest and if it is felt appropriate to do so. In that case, interviews will be formal and competitive. Interviews will follow HEE NE processes. As a de minimis the Interview Panel will be constituted by a representative of the School (Head or one of the TPDs), senior sessional Neuroradiology trainer and a HEE NE representative. A local (only) competitive interview may be held if there is more than one local candidate. Such an interview process would be managed as above.
5. In general, only one higher training opportunity will be available each year, although the School reserves the right to flex this to two depending upon the pattern of interest across year groups and the need to deliver a local consultant workforce.
6. There will only ever be a maximum of two higher trainees at any given time.
7. Once appointed, the Newcastle Scheme TPD will apply for the individual to have their CCT extended by up to one year if applicable (i.e. will be required for INR training, may or may not be required for DNR training depending upon whether the trainee enters DNR training at ST4 (no) or ST5 (yes)). Training will not be extended by more than one year, that is, +3 will be the maximum permitted, resulting in 6 years of whole time equivalent training. (An ARCP 3 outcome at some stage in training with award of additional training time is the sole exception to this.)
8. In addition to the above, recruitment will be limited to fulfilment of the following criteria:
 - a. If the applicant is applying for INR subsequent to ST4, they must already be on the appropriate sub-speciality INR curriculum and must be recognised as such by the GMC and the RCR. Written proof of this will be required, and lack of its production will result in the individual not being appointed. Trainees from other Schemes will not be accepted into the Northern School in order to undertake any form of special interest training in INR or DNR.
 - b. The intention here is for the RVI to offer out of programme training or completion training for trainees in other Schemes, where those Schemes cannot fulfil the whole of the curriculum.
 - c. The applicant must, at the point of being accepted into the Northern School, possess an ARCP1.
 - d. The applicant must, at the point of being accepted into the Northern School, be in good standing with the GMC and have no outstanding or pending criminal convictions. A failure to disclose such issues will be dealt with as a serious breach of probity and will result in a referral to the GMC. The School reserves the right to pursue termination (with or without prejudice) of contract in such a situation.

Higher Training In Neuroradiology

- e. The trainee must, at the point of being accepted into the Northern School, have an up to date e-portfolio, and be able to demonstrate through it full engagement with the educational process.
9. The School may also accept local trainees only into the Neuroradiology Department for higher special interest training at the discretion of the School and of the Neuroradiology Department which may lead to an award by the RCR and GMC of CR CCT with special interest in INR or DNR, but not subspecialty. Whether or not the School decides to apply to the RCR for training to be extended by up to a maximum of one year is entirely at the discretion of the School, HEE NE and the Department of Neuroradiology, weighing such factors as candidate suitability, workforce needs, training capacity and funding. Such an individual would occupy one of the two available spaces for higher training, and this would therefore not be available for specialist (or indeed national) recruitment. Therefore a reasonable reason to decline a request for local special interest training would be the risk of “slot blocking”.
10. Failure to progress in 3+3 INR training would result in reversion to 3+2 diagnostic radiology training and award of CCT in diagnostic neuroradiology subject to satisfactory progress, and following discussion with the registrar to arrive at a mutually agreed position.