



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 Fellows, 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 [Fellowship curriculum](#) and adhere to the [quality indicators \(QIs\)](#).

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.

University Hospitals of Leicester NHS Trust Training Interface Group Fellowship post in Hand Surgery

Unit Lead Trainer:

Name
Kunal Kulkarni, Reena Agarwal

Local Educational Provider (LEP)

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

	Hospital/Trust A	Hospital/Trust B	Hospital/Trust C
Name of Trust	University Hospitals of Leicester NHS Trust		
Address of Trust	Leicester Royal Infirmary Infirmary Square Leicester LE1 5WW		

Peripheral units (if to be visited by Fellow):

	Hospital/Trust N	Hospital/Trust O	Hospital/Trust P
Name of Trust			
Address of Trust			

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LEP Consultants / Trainers

Parent Specialties of main trainers:

Parent Specialty	Number of main trainers from this Specialty
Orthopaedic surgery	5
Plastic surgery	2

Other Trainer(s) involved with fellowship:

Parent Specialty	Number of other trainers from this Specialty
Hand Therapist (OT)	1
Hand Therapist (Physio)	1
Specialist Nurse (Hands)	1
Specialist Plaster Technician	1

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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.

Multi-disciplinary team meeting (MDT), Supporting Professional Development (SPD), Operating theatre (Th), Ward round (WR), Outpatient clinic (OPC)

Trust A	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM	MDT/Th	OPC/Th	Th	Th	OPC/Th	Th (TBC)	Th (TBC)
PM	Th	SPD/Th	SPD/Th/OPC	Th/MDT	Specialty M&M (1st) / Hand MDT (2nd) / Th (4th) / SPD (3rd and 5th)		

Trust B	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

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Training Delivery

Overview of the unit's TIG Fellowship Training Delivery plan:

Indication of units operative workload (five most frequent procedures relevant to this fellowship)		
Procedure	Number of cases per year	Proportion anticipated to be performed by the fellow under supervision
Dupuytren's surgery	125	>80%
Peripheral nerve decompression	150	>80%
Thumb base OA surgery	50	>80%
Fracture fixation (wrist/hand/forearm)	500+	>80%
Neurovascular/tendon injury surgery	200	>80%

*Approximate numbers from orthopaedic team records. Additional cases also performed by the plastics teams.