

# Personal Data

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## History

Member for  
5 years 5 weeks

## Personal details

## Employment details

## Home Address Details

## Business Address Details

## Registration Details

# PDP Overview

## MEDICAL CONSULTANT MANAGEMENT APPRAISAL

### SECTION A – PERFORMANCE REVIEW 1 April 2011 to 31 March 2012

(To be completed by the Reviewer, in consultation with other relevant parties if applicable and after discussion with the Jobholder)

JOBHOLDER'S PERSONAL INFORMATION			
Name:		Job Title:	
Division/ Centre:		Location:	
Reviewer:		Countersignatory:	
<b>A1.</b>	<b>Who else has been consulted when completing this review (if applicable)?</b>		
<b>A2.</b>	<b>Achievement of Objectives or standards agreed for review year</b>		
List the objectives and standards agreed for the year and describe progress towards each one.			
Objectives	<b>Met?</b> Y N		<i>Progress if not met</i>
All met from previous year	Y		
<b>Supporting comments as necessary, please include the impact of any relevant training undertaken during the review year.</b>			

<b>A3 Review against HPA Values, Behaviours and Generic Competencies</b>		
<i>Values and Competencies</i>	<b>Met / Not Met</b>	<b>Comments: Provide evidence of having met competency; or development need as appropriate.</b>
<b>Striving for excellence</b> <ul style="list-style-type: none"> <li>Communicate often and clearly</li> <li>Manage stakeholder relationships</li> <li>Strategic influencing skills</li> <li>Political astuteness</li> <li>Work collaboratively with others, particularly external stakeholders</li> </ul>	Met	Good evidence of completion of strategic work with partner agencies. Many letters of thanks and appreciation.
<b>Respecting others</b> <ul style="list-style-type: none"> <li>Promote equality and diversity</li> <li>Value and recognise contributions of team members.</li> </ul>	Met	Works effectively with others and is a good member of the team
<b>Innovation</b> <ul style="list-style-type: none"> <li>Demonstrate corporate awareness</li> <li>Provide clear leadership</li> <li>Lead and inspire change</li> <li>Deliver projects and services</li> <li>Drive activities to achieve results</li> </ul>	Met	Leads regional audit group. Innovator and contributor to research initiatives and work on developing evidence base.
<b>Integrity</b> <ul style="list-style-type: none"> <li>Manage performance</li> <li>Manage the commercial aspects of HPA's work</li> </ul>	Met	Written evidence and verbal discussion
<b>Focus on quality service</b> <ul style="list-style-type: none"> <li>Balance resources and priorities</li> <li>Professional development</li> <li>Manage performance</li> <li>Health, Safety and Security</li> </ul>	Met	Participates actively in CPD. Completed all mandatory training. Excellent performance
<b>ADDITIONAL COMMENTS</b>		
You may wish to comment here on any aspect of your work e.g. what you find best about it, what you like least about it, a desire for different duties, your workload, or an interest in a different post.		
Enjoys work, finds it stimulating and interesting. Currently acts as CCDC for 3 geographical patches – this will be reviewed in May 2012.		
<b>A4. Statement by Line Manager/Reviewer on Performance</b> (See Medical Consultant Management Appraisal Guidance Notes on HPAnet at <a href="http://hpanet/Content/LearningDevelopment/AppraisalAndPersonalDevelopmentPlanningAndReview/">http://hpanet/Content/LearningDevelopment/AppraisalAndPersonalDevelopmentPlanningAndReview/</a> )		
Performance <b>exceeds</b> requirements of job	X	
Performance <b>meets</b> requirements of job	<input type="checkbox"/>	
Performance <b>does not meet</b> requirements of job	<input type="checkbox"/>	
<b>Comments/justification on the above marking:</b>		
XY is very enthusiastic and seeks out opportunities to advance health protection both across Greater Manchester and at national level.		

SECTION B – FORWARD JOB PLAN April 2012- March 2013

To be completed by the Reviewer and the Jobholder

<b>B1. AGREED OBJECTIVES (OR STANDARDS) to be achieved during 2012-2013</b> To link to HPA Programmes/projects, Centre/Division Business Plans, Dept/Team service delivery and improvement, and any actions relating to the job holder's Performance Review.		
Objectives (or standards)	Which HPA programme or business plan objective is this linked to?	Timescale for completion
As part of a team within GMHPU, provide a health protection service in Greater Manchester. Respond effectively and appropriately to incidents as they arise. Take on topic lead roles as agreed within the team.		ongoing
Keep abreast of developments in health protection		ongoing
Continue formal appraisal process, ensuring appropriate continuing professional development. Attend training events, journal clubs etc.		ongoing
To participate in preparation for HPA response to Olympics and to provide health protection response, as required during the Olympics period.		Sept 2012
To contribute to the design of the GM Public Health England Unit and provide a robust health protection service , including active management of external relationships, during the transition period leading up to the establishment of PHE.		April 2013
<b>Publications:</b> Write up paper on social networking in outbreak management		Sept 2012
<b>Audit:</b> Lead development of Regional Audit Plan for 2012-13		August 2012
<b>Meet requirements for external duties</b> Attend Research Ethics Committee meetings and undertake training and other activities as necessary Participate in magistrate training and court sittings as required		
<b>National work:</b> Faculty adviser on AACs North West Regional Faculty CPD Co-ordinator Faculty Director of CPD		Ongoing July 2012 Ongoing from July 2012
<b>Trainees:</b> Support shortlisting process for appointments to the public health training scheme Lead trainer for Faculty issues in GMHPU Educational supervisor to public health trainees Supervision of medical students and other trainees on attachment to GMHPU Input to on-call training and other training events Participate in assessment of medical students at University of Manchester		ongoing
<b>B 2. CAREER ASPIRATIONS</b> Agreed outcomes/actions from discussion relating to the jobholder's career aspirations.		
Maintain current level of excellent activity through to retirement		
<b>B 3. REVIEW MEETING WITH COUNTERSIGNATORY</b> This section is optional. Should you also wish to meet with your Countersignatory after your Review, please indicate here and make the necessary arrangements.		
	YES <input type="checkbox"/>	N <input checked="" type="checkbox"/> X O

B 4. SIGNATURES OF AGREEMENT TO PERFORMANCE REVIEW AND FORWARD JOB PLAN			
Jobholder Signature:		Date:	13 <sup>th</sup> March 2012
Line Manager or Reviewer Signature:		Date:	
I note and agree the performance review <b>and</b> the forward job plan. Comments on the above (as necessary):			
Counter-signatory Signature:		Date:	

## MEDICAL CONSULTANT MANAGEMENT APPRAISAL SECTION C - PERSONAL DEVELOPMENT PLAN (PDP)

*TO BE COMPLETED JOINTLY BY REVIEWER AND JOBHOLDER*

JOBHOLDER'S PERSONAL INFORMATION			
Name:		Job Title:	
Division/ Centre:	Location:	Employee Number:	
Reviewer:		Countersignatory:	

C1. PERSONAL DEVELOPMENT PLAN (PDP) 2012/13			
To ensure attainment of Job-related Objectives and HPA Values and Competencies. (please refer to HPA L&D Policy)			
Please state <b>exact/specific</b> requirements and allocate a priority as follows: <b>High</b> (very significant/urgent – to be addressed in this review/training period); <b>Medium</b> (significant but not urgent), <b>Low</b> (desirable but not urgent).			
Mandatory Training Requirement (Refer to HPA Mandatory Training List on HPAnet at <a href="http://hpanet/Content/LearningDevelopment/MandatoryTraining/">http://hpanet/Content/LearningDevelopment/MandatoryTraining/</a> )			
All mandatory training up to date apart from Health and Safety (booked onto Webinar training 2012) and STAC training (awaiting suitable training opportunity)			
Development need agreed	Why Required?	How will it be met?	Priority
Management and Personal Development training provided by HPA management training programmes			

Maintain Health Protection knowledge and skills	To maintain competency as health protection professional and meet revalidation requirements	5 Nations Health Protection Conference  North West Zoonoses Workshop  In-house training such as journal club, incident review meetings, NWCDEG meetings  Other training events as opportunities arise	High
Develop and maintain competencies for management of chemical incidents	To ensure safe and competent health protection input into major incidents	STAC training  Attendance at COMAH or similar emergency planning exercise	High
Maintain public health competencies	To maintain competency as public health professional and meet revalidation requirements	Attendance at relevant training events  Attendance at Faculty of Public Health Conference  Attendance at Faculty Local Affairs Committee  Private reading	High
Preparation for health protection input into Olympics	To ensure safe working during Olympic games period	In-house training	High
Further develop understanding of impact of NHS reorganization on HPA and partner agencies and strategies for managing external relations	To maintain organizational effectiveness during and after transition to PHE	Attendance at Faculty of Public Health Conference  Attendance at Faculty Local Affairs Committee	High
<b>On-the-job Training / Miscellaneous &amp; IT Training</b>			
Maintain health protection/public health knowledge and skills	To maintain competency as health protection professional and meet revalidation requirements	Attendance at HPA training events and other suitable events as opportunities present	Med
Meet training requirements for REC Chair	To meet NRES requirements	Training provided by NRES	High
Undertake training as required to meet requirements of Faculty of Public Health	Maintain professional standards	Training provided by Faculty of Public Health	Med

<b>C2. Agreement of PDP &amp; Development Review outcome- including declaration of conflict of interests.</b>			
<ul style="list-style-type: none"> <li>I have complied with the HPA conflict of interest policy. I have reviewed my entry on the declarations of interest register and I confirm that the declaration is appropriate.</li> <li>I confirm that any professional registration required for my post has been maintained throughout the year and that required CPD has been undertaken.</li> </ul>			
Signature:		Date:	13 <sup>th</sup> March 2012
	Jobholder		
Signature:		Date:	13 <sup>th</sup> March 2012
	Reviewer		
I note, agree and will fund the PDP where necessary.			
Signature:		Date:	
	Countersignatory		

MEDICAL CONSULTANT MANAGEMENT APPRAISAL  
**SECTION D - INTERIM REVIEW**  
 (Due October 2012)

*TO BE COMPLETED JOINTLY BY REVIEWER AND JOBHOLDER*

Please refer to [Medical Consultant Management Appraisal Guidance Notes](#) before completing this form

JOBHOLDER'S PERSONAL INFORMATION			
Name:		Job Title:	
Division/ Centre:		Location:	
Reviewer:		Countersignatory:	
Interim Review Date:			

D1. INTERIM REVIEW OUTCOMES			
To include revisions to previously agreed objectives, performance, and any resulting training needs.			
Revisions Agreed:			
Other Outcomes/objectives Agreed:			
Additional Training Needs Agreed:			
Development need agreed	Why Required?	How will it be met?	Priority
Comments on overall performance at Interim Review stage:			

**Remember to update the objectives specified at Section B – the Forward Job Plan**

D2. AGREEMENT OF OUTCOMES OF THE INTERIM REVIEW
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Signature:		Date:	
Jobholder			
Signature:		Date:	
I agree and will fund the above requirements where necessary (delete as appropriate) Reviewer			
I note, agree and will fund the above requirements where necessary (delete as appropriate).			
Signature:		Date:	
Countersignatory			

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## Annual mandatory form data

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Dr **XY** has submitted a mandatory cpd returns form for year **2012/2013**

Annual Total : 75

Other info is :

CPD Year : 2012/2013

Name :

Job title : CCDC

Employer : Greater Manchester Health Protection Unit

Time Status :

Terms And Conditions : Accepted

## Activity log

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Description	Start date	CPD Year	Credits	Activity type
<a href="#">Navigating the Future: Annual Event of the NW School of Public Health</a>	26 Mar 2013	5	Conferences, workshops and educational meetings	
<a href="#">Advisory Appointment Committee training - Faculty of Public Health</a>	14 Mar 2013	4	Group work, seminars and journal clubs	
<a href="#">Incident review meeting February 2013</a>	07 Feb 2013	2	PH audit, appraisal and reflective practice	

<b>Description</b>	<b>Start date</b>	<b>CPD Year</b>	<b>Credits</b>	<b>Activity type</b>
<a href="#"><u>United Utilities Annual Liaison Meeting</u></a>	06 Feb 2013	3	Learning as part of your job	
<a href="#"><u>Eligibility checking training - Faculty of Public Health</u></a>	30 Nov 2012	4	Learning as part of your job	
<a href="#"><u>EHO/HPU training day - Buile Hill Salford</u></a>	27 Nov 2012	4	Conferences, workshops and educational meetings	
<a href="#"><u>National Research Ethics Advisers Chairs meeting</u></a>	19 Nov 2012	1	Learning as part of your job	
<a href="#"><u>Journal Club November 2012</u></a>	15 Nov 2012	1	Group work, seminars and journal clubs	
<a href="#"><u>NW Zoonoses Group - Presentation on toxocara</u></a>	14 Nov 2012	1	Learning as part of your job	
<a href="#"><u>NRES Training Day - Freemason's Hall Manchester</u></a>	07 Nov 2012	4	Conferences, workshops and educational meetings	
<a href="#"><u>Pertussis guidelines review</u></a>	31 Oct 2012	2	Learning as part of your job	
<a href="#"><u>STAC Training, Weetwood Hall, Leeds</u></a>	20 Sep 2012	5	Group work, seminars and journal clubs	
<a href="#"><u>Faculty appraiser training</u></a>	14 Sep 2012	5	PH audit, appraisal and reflective practice	
<a href="#"><u>Faculty of Public Health Summer Conference</u></a>	19 Jul 2012	5	Conferences, workshops and educational meetings	
<a href="#"><u>Preparation of scenario for NW Zoonoses Conference</u></a>	07 May 2012	2	Private study and reading	
<a href="#"><u>NW Zoonoses Conference - Old threats, new</u></a>	10 Jul 2012	5	Conferences, workshops and educational	



<b>Description</b>	<b>Start date</b>	<b>CPD Year</b>	<b>Credits</b>	<b>Activity type</b>
<a href="#"><u>challenges</u></a>				meetings
<a href="#"><u>Festival of Public Health, University of Manchester</u></a>	02 Jul 2012	3		Conferences, workshops and educational meetings
<a href="#"><u>Visit to waste processing plant, Leyland</u></a>	29 Jun 2012	2		Learning as part of your job
<a href="#"><u>CIEH workshop - Ellesmere Sports Club</u></a>	25 Jun 2012	2		Group work, seminars and journal clubs
<a href="#"><u>Olympic emergency planning and CBRN update</u></a>	24 May 2012	2		Learning as part of your job
<a href="#"><u>Joint Chairs NREA Meeting</u></a>	21 May 2012	2		Learning as part of your job
<a href="#"><u>Five Nations Health Protection Conference, Belfast Day 2</u></a>	02 May 2012	3		Conferences, workshops and educational meetings
<a href="#"><u>Five Nations Health Protection Conference, Belfast day 1</u></a>	01 May 2012	5		Conferences, workshops and educational meetings
<a href="#"><u>Olympic Update -</u></a>	27 Apr 2012	1		Learning as part of your job
<a href="#"><u>Preparation for talk on GI disease on international health and epidemiology course</u></a>	26 Apr 2012	2		Training, teaching, examining and preparation time

**Total Activities for 2012/2013: 25**

**Total Credits for 2012/2013: 75**

# Reflective notes

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## **FPH - CPD Entry - Navigating the Future: Annual Event of the NW School of Public Health**

### **CPD activity - Details**

#### **Description of activity**

Navigating the Future: Annual Event of the NW School of Public Health

#### **Start date:**

26 Mar 2013

#### **End date:**

26 Mar 2013

#### **CPD Year:**

2012

#### **Credits:**

5

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am an Educational Supervisor and training lead for Greater Manchester HPU. This was a programme aimed at trainees and trainers.

### **What was the learning need or objective that was addressed?**

Although this was a day for trainers and trainees, the content was valuable for public health practitioners not in training roles too. There were useful sessions on the future for public health in Public Health England and in Local Authorities. I found the Local Authority session particularly useful as it is outside my usual sphere and is knowledge which will help me in my work with public health colleagues in LAs and in advising trainees. There were some excellent short presentations and posters from StRs, using a 5 minute maximum presentation format which was very stimulating. Discussion with other educational supervisors helped to identify ways in which I might improve as a trainer; I think I need to be more organised, and to think more carefully in terms of ARCP outcomes.

## **What was the outcome of the activity?**

I now have a better understanding of the environment in which colleagues in Local Authorities are working. I was very impressed with the 5 minute presentations - one of the trainees used no visual aids and that is a technique I would like to practice. I will be much more structured in my approach to trainees, focussing on ARCP outcomes, although this needs to be balanced with ensuring that training produces a rounded consultant, not just someone who has ticked the boxes.

## **Further learning needs**

I need to continue to remind myself of relevant ARCP outcomes - I usually have phase 2 trainees but sometimes I supervise what will now be phase 3 trainees - and ensure that training is suitably structured to allow flexibility and stretch the trainee whilst meeting required outcome measures.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

# **FPH - CPD Entry - Advisory Appointment Committee training - Faculty of Public Health**

## **CPD activity - Details**

### **Description of activity**

Advisory Appointment Committee training - Faculty of Public Health

### **Start date:**

14 Mar 2013

### **End date:**

14 Mar 2013

### **CPD Year:**

2012

### **Credits:**

4

## **Reflective notes**

## **Why was this activity selected for CPD?**

I sit on Consultant Advisory Appointment Committees. I had not attended training for two years so needed an update.

## **What was the learning need or objective that was addressed?**

This training day provided me with a reminder of the legal framework for appointment of consultants within public health. I also learned how the reorganisation of public health in England may impact on the appointment process, appointment of staff within an Acute Trust, and through discussion of scenarios with others on my table was able to reflect on my practice and understanding.

## **What was the outcome of the activity?**

I now feel more secure in my understanding of my role on an AAC. I feel more competent to participate in AACs for jobs in a wide range of public health roles, not just health protection. I better understand the requirements of the role and how to deal with providing feedback to unsuccessful candidates. However, I still don't understand what the difference is between a candidate being 'above the line' and a candidate being 'appointable'. I asked the question and received a hail of responses, none of which adequately clarified the difference (if any). In future I will not address whether a candidate is 'above the line' as this seemed to mean something different to everyone and so has very limited validity.

## **Further learning needs**

I need to ensure I attend similar training events at least every two years and also to maintain my equal opportunities training.

## **Linked PDP Entries**

Faculty of Public Health roles

[\[ Details \]](#)

# **FPH - CPD Entry - Incident review meeting February 2013**

## **CPD activity - Details**

### **Description of activity**

Incident review meeting February 2013

### **Start date:**

07 Feb 2013

### **End date:**

07 Feb 2013

## **CPD Year:**

2012

## **Credits:**

2

## **Reflective notes**

### **Why was this activity selected for CPD?**

As audit lead I arrange for twice yearly meetings where staff at GMHPU present incidents they have managed which have given some pause for thought. We reflect on the incidents in order to learn from others' experiences and to consider whether we need to change our policies and procedures. This also helps to reinforce good health protection practices. I presented an incident I had dealt with (hospital outbreak of listeria) and preparation for this helped me reflect on the challenges of dealing with such incidents.

### **What was the learning need or objective that was addressed?**

Through this activity I learned that a proactive public health approach can be effective in the management of community outbreaks of measles, that good surveillance can be a valuable tool in measles outbreaks, and that we should not be afraid of scaling down our response in the face of widespread transmission.

From the hospital outbreak of listeria I learned that hospitals may be unwilling to accept cases are hospital acquired, that food distribution networks are so complex that one should take care not to spend too much time trying to disentangle them, and that it is possible to over-interpret typing results as being significant when the reason there are so few cases of a particular type is that the typing method has only recently been introduced.

A presentation on a fire at a plastics factory alerted me to the difficulties that may arise if a major incident is not declared and STAC convened.

A presentation from the nursing staff in the unit opened my eyes to some of the difficulties they experience on the duty desk.

### **What was the outcome of the activity?**

I now feel more competent in dealing with measles outbreaks. I was reassured that my management of the listeria outbreak was considered appropriate by team members and that they identified similar difficulties in dealing with hospital outbreaks. By knowing what difficulties the duty team work under, I am better able to support them. I may be more willing to convene a STAC if I am leading on incidents.

### **Further learning needs**

Much of the learning requires reinforcement by practice. I will address this by ensuring I participate fully in the consultant duty rota at the health protection unit.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

Competencies for major incidents

[\[ Details \]](#)

# FPH - CPD Entry - United Utilities Annual Liaison Meeting

## CPD activity - Details

### Description of activity

United Utilities Annual Liaison Meeting

### Start date:

06 Feb 2013

### End date:

06 Feb 2013

### CPD Year:

2012

### Credits:

3

## Reflective notes

### Why was this activity selected for CPD?

I am the lead for water for Greater Manchester HPU. This annual liaison meeting with United Utilities, the water company for the North West of England, gives an update on health protection issues relating to water, facilitates collaborative working and enables input into the policy/strategic direction of the public health department within United Utilities.

### What was the learning need or objective that was addressed?

I learned about the progress on plans for water distribution networks within the north west, about the sort of water issues that members of the public contact the company about, water quality in buildings, bathing waters in the North West, and an update on shale gas exploration. All the presentations provided me with considerable new learning, in particular the update on shale gas exploration (fracking). I had very little knowledge of what fracking is and how (if at all) it might have an impact on water supplies.

### What was the outcome of the activity?

I now have sufficient knowledge on the topics presented to be able to discuss queries intelligently. The knowledge gained and the opportunity for networking with United Utility staff has made management of water incidents work more smoothly, since we each understand the other's organisations better.

## **Further learning needs**

This is an annual event, and each year there is substantial new material within the presentations. I intend to attend next year's liaison meeting.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

# **FPH - CPD Entry - Eligibility checking training - Faculty of Public Health**

## **CPD activity - Details**

### **Description of activity**

Eligibility checking training - Faculty of Public Health

### **Start date:**

30 Nov 2012

### **End date:**

30 Nov 2012

### **CPD Year:**

2012

### **Credits:**

4

## **Reflective notes**

### **Why was this activity selected for CPD?**

I volunteered to assist with long-listing for applicants to the Public Health Speciality Training Scheme. Applications for public health are processed nationally, and this was the first stage of applications. In order to participate in long-listing there was a requirement for me to attend training.

### **What was the learning need or objective that was addressed?**

I knew nothing about the long-listing process or about applications via the NHS jobs website. Nor did I have any knowledge of the foundation competency framework for junior doctors and how it is assessed. This training covered all aspects of the long-listing, including how to access the on-line applications, what criteria we should be using for medically qualified

applicants, other clinical applicants and non-clinical, how to record our results and how to ask for help. I also learned what an incredibly complex process this is - I had previously wondered how we would fill a whole day with training to long-list, but the in-depth training was absolutely necessary.

### **What was the outcome of the activity?**

I was able to participate in the long-listing. That helped to reinforce what we learned on the training and also identified some areas where I had misunderstood or was not completely clear. Fortunately there were experienced long-listers to help the newbies.

### **Further learning needs**

I hope to participate again next year and will need a refresher course.

## **Linked PDP Entries**

# **FPH - CPD Entry - EHO/HPU training day - Buile Hill Salford**

## **CPD activity - Details**

### **Description of activity**

EHO/HPU training day - Buile Hill Salford

### **Start date:**

27 Nov 2012

### **End date:**

27 Nov 2012

### **CPD Year:**

2012

### **Credits:**

4

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am the GI lead for Greater Manchester HPU. This training day was organised by me to allow LA staff, GMHPU staff and microbiologists to learn from each other and to identify more effective ways of working. I gave one of the presentations (on follow-up of sporadic cases) and also organised an afternoon session on scenarios.



## **What was the learning need or objective that was addressed?**

Preparation for this workshop helped me clarify what the role of the HPU is and what we expect of LA and microbiology colleagues in the public health management of infectious diseases. The training day covered a range of issues, including a presentation from laboratory staff which helped to identify more effective ways for EHOs and HPU staff to work. The scenario discussions covered a range of issues, including how we should manage incidents out-of-hours, how we should prioritise incidents and what the expectations of each organisation are as well as specific learning needs around management of legionnaires disease, VTEC, enteric fevers and listeria.

## **What was the outcome of the activity?**

I now have a better understanding of the concerns that EHOs may have when investigating infectious disease. I am clearer about what is expected of each organisation outside working hours and of what support (if any) I might expect from Local Authority colleagues when on-call and during office hours. The scenarios helped to clarify what we should be prioritising, both in and outside working hours.

## **Further learning needs**

There is need for ongoing dialogue with LA staff so that I can maintain an understanding of the issues affecting them as a result of resource restriction, and it is intended that this activity should be repeated next year.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

# **FPH - CPD Entry - National Research Ethics Advisers Chairs meeting**

## **CPD activity - Details**

### **Description of activity**

National Research Ethics Advisers Chairs meeting

### **Start date:**

19 Nov 2012

### **End date:**

19 Nov 2012

### **CPD Year:**

2012

## **Credits:**

1

## **Reflective notes**

### **Why was this activity selected for CPD?**

I chair a research ethics committee. The chairs meet regularly with the National Research Ethics Advisors and as part of the meeting we have a developmental session.

### **What was the learning need or objective that was addressed?**

This session looked at the results from a Shared Ethical Debate. This is an activity whereby the same application is sent to several research ethics committees and the outcome of deliberations is compared. We were able to reflect on the study application itself and on how our committee had performed compared with other committees.

### **What was the outcome of the activity?**

The application we had reviewed concerned Mental Capacity Act issues, with participants unable to consent for themselves. Our REC is not flagged for MCA, so it was useful to see how other RECs had approached the issue. I found out that there is a standard proforma which should be used for MCA applications. In the event, when we undertook the review in our REC we had decided that it fell outside MCA (ie that patients without capacity should not be included in the research).

### **Further learning needs**

If I decide my REC should apply to be flagged for Mental Capacity Act I will need to arrange training and frequent updates.

## **Linked PDP Entries**

Research Ethics Committee

[\[ Details \]](#)

# **FPH - CPD Entry - Journal Club November 2012**

## **CPD activity - Details**

### **Description of activity**

Journal Club November 2012

### **Start date:**

15 Nov 2012

**End date:**

15 Nov 2012

**CPD Year:**

2012

**Credits:**

1

**Reflective notes****Why was this activity selected for CPD?**

The journal club is a cpd activity arranged within Greater Manchester Health Protection Unit. Articles are usually presented by trainees, but it also benefits the rest of the team who can practice their critical appraisal skills as well as discussion of new issues in the journals.

**What was the learning need or objective that was addressed?**

This activity helped me hone my critical appraisal skills and also updated my knowledge of rotavirus vaccination. The two papers were very different, one was an economic evaluation of rotavirus vaccine whereas the other looked at vaccine efficacy. I had never used an appraisal tool for economic evaluations before so this was a new experience (I didn't even know that such tools existed). I participated in the discussions for both papers and this helped me to develop my critical appraisal skills and reinforced my knowledge/skills of research methods.

**What was the outcome of the activity?**

I now know that there are critical appraisal tools for economic evaluation. This will enable me to use the most appropriate tool for papers I am appraising in the future.

**Further learning needs**

I need to continue to participate in journal clubs to reinforce critical appraisal skills.

**Linked PDP Entries**

Maintain public health competencies

[\[ Details \]](#)

**FPH - CPD Entry - NW Zoonoses Group -  
Presentation on toxocara****CPD activity - Details****Description of activity**

**Start date:**

14 Nov 2012

**End date:**

14 Nov 2012

**CPD Year:**

2012

**Credits:**

1

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am zoonoses lead for Greater Manchester HPU and attend the North West Zoonoses meetings. At each meeting there is a presentation (often from a discipline other than medicine) to highlight research being undertaken.

### **What was the learning need or objective that was addressed?**

I had been vaguely aware of toxocara control measures in Wales and thought they were still in place. This activity showed how surveillance can be used to monitor toxocara control and also the effectiveness of control measures. Unfortunately free worming of dogs was withdrawn in Wales and it is now possible to see re-emergence of infection within the sheep population.

### **What was the outcome of the activity?**

I now have a better understanding of what (little) control measures there are for toxocara, despite evidence that measures can be highly effective. While this is of limited value in Greater Manchester where there are relatively few sheep farms, it helps to inform my work more widely. I have learned, yet again, that even when control measures are relatively easy, unless there is a political drive, it can be difficult to maintain support once the problem appears to have been dealt with. This can be especially so when the intervention (worming of dogs) is only indirectly connected with protection of human health (through reducing risk of toxocara in sheep).

### **Further learning needs**

I need to continue to maintain my knowledge of current practice in relation to zoonoses and to be aware when control measures are no longer being practiced.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

# **FPH - CPD Entry - NRES Training Day - Freemason's Hall Manchester**

## **CPD activity - Details**

### **Description of activity**

NRES Training Day - Freemason's Hall Manchester

### **Start date:**

07 Nov 2012

### **End date:**

07 Nov 2012

### **CPD Year:**

2012

### **Credits:**

4

## **Reflective notes**

### **Why was this activity selected for CPD?**

I chair a Research Ethics Committee and am required to attend training events. This was an opportunity to update myself on a range of topics relating both to the move to HRA and aspects of ethical review. I was also able to learn and reflect on opinions of members/chairs from other Committees.

### **What was the learning need or objective that was addressed?**

The interactive sessions addressed my learning needs in relation to qualitative research (I was very ropey), scientific review of ethics applications, and helped me to understand the new organisation and the framework for ethical review.

### **What was the outcome of the activity?**

My Research Ethics Committee has now been flagged for qualitative research. The training has very much helped me to understand the structural basis for the different qualitative methodologies, so that I can assess whether the methodology proposed in research applications is appropriate for the intended outcome, and appreciate the ethical issues which may arise.

## **Further learning needs**

I need to maintain and further develop my knowledge of qualitative research. This could be addressed by training provided by NRES. I need to keep my eyes open for qualitative research method training, maybe at a more advanced level.

## **Linked PDP Entries**

Research Ethics Committee

[\[ Details \]](#)

# **FPH - CPD Entry - Pertussis guidelines review**

## **CPD activity - Details**

### **Description of activity**

Pertussis guidelines review

### **Start date:**

31 Oct 2012

### **End date:**

01 Nov 2012

### **CPD Year:**

2012

### **Credits:**

2

## **Reflective notes**

### **Why was this activity selected for CPD?**

It had been identified within the Health Protection Unit that the local operating procedures did not seem to be consistent with new national guidelines. I therefore agreed to review our local procedures and to present them to the rest of the team.

### **What was the learning need or objective that was addressed?**

This activity gave me an opportunity to update myself on the latest guidance for the management of contacts of cases of pertussis. This included clarifying actions to be taken when there are at-risk contacts (including being clear what constitutes an at-risk contact) and

to communicate what turned out to be a rather complex set of guidance to consultants, practitioners and admin staff within the HPU.

### **What was the outcome of the activity?**

I realised how complex the guidance was and was able to structure it so that it could be followed easily. My understanding of current control measures for pertussis has improved, and this, coupled with guidance I have produced for the rest of the team, will help to ensure best practice.

### **Further learning needs**

This activity made me appreciate how important it is to constantly review local SOPs in the light of new national guidance and to ensure that I am up to date. This is particularly challenging given the increasingly frequent changes to health protection guidance.

### **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

## **FPH - CPD Entry - STAC Training, Weetwood Hall, Leeds**

### **CPD activity - Details**

#### **Description of activity**

STAC Training, Weetwood Hall, Leeds

#### **Start date:**

20 Sep 2012

#### **End date:**

20 Sep 2012

#### **CPD Year:**

2012

#### **Credits:**

5

### **Reflective notes**

**Why was this activity selected for CPD?**

As a CCDC I could be expected to chair a Scientific, Technical and Advisory Cell in the event of a major incident. This was therefore mandatory training.

### **What was the learning need or objective that was addressed?**

The activity provided me with knowledge about the structure of the various parts of command and control during a major incident, the function of the STAC, the role of individuals and how it relates to other parts of the emergency response. The presence of facilitators from blue light agencies helped me to understand how they work and what their priorities are in an emergency. Role playing both as a STAC and as part of a Senior Co-ordinating group was an opportunity to practice skills and to further understand the dynamic during an incident.

### **What was the outcome of the activity?**

I was very nervous about having to chair a STAC if there were a major incident, but I now feel much more confident (although I still hope I will never have to do it for real). I realise that my technical knowledge is highly appreciated. I also learned the importance of the STAC not taking on roles which others should be undertaking, even if the SCG find it irritating. For example, we had a scenario where the police service were asking for occupational health advice, and we referred them to their own occupational health service, much to their annoyance. I am certain that was the right approach, otherwise we would quickly get out of our depth.

### **Further learning needs**

I am unlikely to have to use the knowledge and skills gained on this day in a real situation in the near future, so I need to ensure that I find other ways of reinforcing my development, eg through attendance at COMAH exercises.

## **Linked PDP Entries**

Competencies for major incidents

[\[ Details \]](#)

# **FPH - CPD Entry - Faculty appraiser training**

## **CPD activity - Details**

### **Description of activity**

Faculty appraiser training

### **Start date:**

14 Sep 2012

### **End date:**

14 Sep 2012



**CPD Year:**

2012

**Credits:**

5

**Reflective notes****Why was this activity selected for CPD?**

One of my roles with the Faculty is as an appraiser for public health specialists who need to revalidate through the Faculty (currently only doctors). This was mandatory training to enable me to fulfil the role and for the Responsible Officer to be assured that appraisal would be undertaken to the required standard.

**What was the learning need or objective that was addressed?**

This activity gave me knowledge of the strengthened appraisal process and an opportunity to practice appraisal skills.

**What was the outcome of the activity?**

This activity gave me a clear understanding of the processes involved in revalidation and of strengthened appraisal. Through practicing appraisal in role play and reflecting on it, I learned not only how to appraise more effectively but also now appreciate better what sort of evidence I need to produce for my own revalidation/appraisal. I had taken part in the tri-faculty revalidation pilot last year and was uncertain about the amount of detail that should be included in the summary reports. I now feel much more comfortable about the process and more confident that I will undertake appraisals which will support the appraisee and enable the Responsible Officer to make a valid recommendation.

Further to this reflection I undertook appraisal of a colleague working in a PCT/LA using the MAG framework. Although this appraisal did not come under the GMC strengthened appraisal for revalidation system, because the appraisee would not be having 'formal' appraisal until much later in the year and needed a PDP, we agreed that I would provide a professional appraisal. We found the process very satisfying and it was a good opportunity for me to practice my skills. I further appreciated the usefulness of keeping a copy of 'Good Medical (Public Health) Practice as a guide during the appraisal interview.

**Further learning needs**

I have not been allocated any appraisees for the latest round. As I think it is important to practice I have arranged to undertake appraisal of a public health colleague, who is also a Faculty appraiser, using the MAG framework. We will then both reflect on the process.

**Linked PDP Entries**

Faculty of Public Health roles  
[\[ Details \]](#)

# **FPH - CPD Entry - Faculty of Public Health Summer Conference**

## **CPD activity - Details**

### **Description of activity**

Faculty of Public Health Summer Conference

### **Start date:**

19 Jul 2012

### **End date:**

19 Jul 2012

### **CPD Year:**

2012

### **Credits:**

5

## **Reflective notes**

### **Why was this activity selected for CPD?**

It is over 20 years since I had been to a Faculty conference. As newly appointed Director of CPD I thought it would be useful to see what the conference had to offer. It was also an event with opportunities for CPD outwith health protection; with the probable expansion of the roles of HPUs to include health improvement when they move into Public Health England, I thought it was important to be aware of developments in health improvement.

### **What was the learning need or objective that was addressed?**

Updating on developments in public health, particularly health improvement and wellbeing. I attended parallel sessions on revalidation (discovered how much I don't know!) and on wellbeing (because this is a concept I find difficult).

### **What was the outcome of the activity?**

I now have a much better understanding of the revalidation process, where legal responsibilities lie and, importantly, the philosophical difference between current consultant appraisal system (supportive and you can choose a friend to do it) and revalidation enhanced appraisal (judgmental and the appraiser is chosen for you). I will now be much better placed to provide advice to colleagues, and I already have. I undertook appraisal for a colleague in a PCT last week, pre-revalidation process being introduced, and was able to explain the status of the appraisal cf enhanced appraisal for revalidation, and the likely arrangements for her future revalidation.

The session on wellbeing started well, but unfortunately one of the guest speakers was unable to stop talking. I learned the importance of session chairs giving clear instructions about timing in advance and sticking to them.

### **Further learning needs**

I have applied to be an appraiser for those seeking revalidation through the Faculty and will attend training in relation to this.

### **Linked PDP Entries**

Maintain public health competencies

[\[ Details \]](#)

## **FPH - CPD Entry - Preparation of scenario for NW Zoonoses Conference**

### **CPD activity - Details**

#### **Description of activity**

Preparation of scenario for NW Zoonoses Conference

#### **Start date:**

07 May 2012

#### **End date:**

08 Jun 2012

#### **CPD Year:**

2012

#### **Credits:**

2

### **Reflective notes**

#### **Why was this activity selected for CPD?**

I am on the organising committee for the NW Zoonoses Conference and agreed to write a scenario for small group discussion, in collaboration with a vet from Food Standards Agency.

#### **What was the learning need or objective that was addressed?**

This activity developed my knowledge of likely scenarios and transmission routes for salmonellas. I also learned about the roles of different agencies, including private vets,

farmers, AHVLA and FSA. The development of the scenario required me to undertake substantial research into likely pathogens, routes of transmission, methods of investigation and control outside my usual comfort zone of human health. We took the opportunity to include discussion of managing an incident with limited resources within the scenario using appropriate management models.

### **What was the outcome of the activity?**

I learned a great deal about the investigation of animal pathogens and how the information might get to the attention of public health agencies. When the scenario was at almost final draft I sought advice from a vet at AHVLA who commented that the pathogen we chose was not the most appropriate, and helped to make the scenario more realistic. I learned about Covey's approach to control and influence and used it to help participants think about how they deal with an environment of tightening resources.

### **Further learning needs**

I found this to be an excellent learning experience - the vets from FSA and AHVLA gave me a different perspective. I have agreed to be on the organising committee for next year's conference.

### **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

## **FPH - CPD Entry - NW Zoonoses Conference - Old threats, new challenges**

### **CPD activity - Details**

#### **Description of activity**

NW Zoonoses Conference - Old threats, new challenges

#### **Start date:**

10 Jul 2012

#### **End date:**

10 Jul 2012

#### **CPD Year:**

2012

#### **Credits:**

5

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am the zoonoses lead for Greater Manchester HPU and am on the organising committee for this conference. I acted as facilitator for the small group sessions.

### **What was the learning need or objective that was addressed?**

This workshop focussed on surveillance activities for human and animal health. As well as reinforcing my knowledge on human surveillance methods I gained a better understanding of veterinary surveillance and of the use of novel methods, including statistical modelling for real-time surveillance.

I had written one of the scenarios myself (with a vet - see separate reflective note). The discussions about this scenario - salmonella in milk, and a scenario on possible West Nile Virus, gave me a better appreciation of the roles of other agencies, how they might be involved and the pressures on their resources.

### **What was the outcome of the activity?**

If I have to deal with incidents involving zoonoses I will better appreciate resource pressures and will be more sympathetic to difficulties in timely responses (although still recognising that timely response may be essential).

I better appreciate the very large number of groups involved in zoonoses surveillance and the importance of co-ordination, particularly as emerging animal diseases are often viral and unpredictable. I also understand some of the drivers increasing the threat of zoonoses. Most importantly I learned the importance of organisations concentrating on doing things other organisations can't (unfortunately many organisations think it is good to have a high profile in other people's business).

I feel more enthused about developments in surveillance, and particularly about the use of modelling to help interpret data.

### **Further learning needs**

To maintain knowledge of zoonoses from animal health perspective through attendance at NW Zoonoses Group and private reading.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

# **FPH - CPD Entry - Festival of Public Health, University of Manchester**

## **CPD activity - Details**

### **Description of activity**

Festival of Public Health, University of Manchester

**Start date:**

02 Jul 2012

**End date:**

02 Jul 2012

**CPD Year:**

2012

**Credits:**

3

**Reflective notes****Why was this activity selected for CPD?**

Greater Manchester Health Protection Unit works closely with University of Manchester and this was an inaugural event which we felt we should support. It also gave me an opportunity to take a wider view of public health, rather than the fairly narrow focus on health protection which is much of my day job. This is particularly important in view of the probable expansion of the role of HPUs when we move into Public Health England. In collaboration with a colleague I gave a short presentation on TB.

**What was the learning need or objective that was addressed?**

The Festival provided an eclectic mix of public health experiences and formats. It is not possible to detail them all. The underpinning theme was the role of many agencies and disciplines in improving health:

Impact of technology on public health:-I had a discussion with post-doc staff from the Physics Department about possible impact of graphene on public health, including direct health care uses and general uses to improve lives.

Learned about the work of WHO in Europe from Dr Claudia Stein, Director of Division of Information, Evidence, Research and Innovation.

Presentation by lecturer from School of Architecture gave me more insight into the role of city planning on public health.

Several presentations looked at health information which was transferable across public health domains, so particularly useful to me as I prepare for move to Public Health England.

**What was the outcome of the activity?**

This activity gave me a taste of a wide range of public health activities including health improvement, information management, policy development and health protection. Because the Festival covered such a broad scope, nothing was in sufficient detail to influence my public health practice directly, but it served to reinforce my enthusiasm to find out more.

**Further learning needs**

This was a very 'busy' festival and it was not possible to get round all the posters/presentations. I need to continue to develop/maintain knowledge of wider determinants of public health by attendance at similar events (eg Faculty Conference).

## **Linked PDP Entries**

Maintain public health competencies

[\[ Details \]](#)

Health Protection Knowledge and Skills

[\[ Details \]](#)

## **FPH - CPD Entry - Visit to waste processing plant, Leyland**

### **CPD activity - Details**

#### **Description of activity**

Visit to waste processing plant, Leyland

#### **Start date:**

29 Jun 2012

#### **End date:**

29 Jun 2012

#### **CPD Year:**

2012

#### **Credits:**

2

### **Reflective notes**

#### **Why was this activity selected for CPD?**

I have had to deal with several ongoing incidents where residents complain about possible health effects from bioaerosols arising from nearby industrial processes. This activity comprised a discussion with staff from the Environment Agency and HPA followed by a tour of the waste reprocessing plant which had led to complaint from local residents. These complaints had originally been about the smell, but when that was not resolved there were concerns expressed about impact on health.

#### **What was the learning need or objective that was addressed?**

I learned about the different perspective and expectations held by the Environment Agency compared with the Health Protection Agency. I also learned how waste recycling and reprocessing took place at the plant and the points at which there might be a risk of emissions.

### **What was the outcome of the activity?**

I realised that the Environment Agency think it is possible for HPA to give an estimate of risk to health in the absence of any substantial literature, population risk estimates and data on local health. Even when HPA staff explained that it was not possible to provide any estimate of health impact for such small populations, EA still thought we could do it (it was as though no-one from HPA had spoken!). I realised that if the smell was dealt with, the health complaints would disappear, and that this probably holds true for other issues dealing with environmental complaints. I know understand how waste recycling and reprocessing works, how resource intensive it can be, how little understanding there seems to be in the industry of control of emissions, and how much waste can be reprocessed.

### **Further learning needs**

I don't think there are any specific learning needs arising from this, but there is plenty to inform my future practice.

### **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

## **FPH - CPD Entry - CIEH workshop - Ellesmere Sports Club**

### **CPD activity - Details**

#### **Description of activity**

CIEH workshop - Ellesmere Sports Club

#### **Start date:**

25 Jun 2012

#### **End date:**

25 Jun 2012

#### **CPD Year:**

2012

#### **Credits:**

2



## **Reflective notes**

### **Why was this activity selected for CPD?**

I was asked to present a session at this workshop on public health management of enteric fevers. That part had no new learning for me, but I stayed for the presentations from other speakers and found them very useful.

### **What was the learning need or objective that was addressed?**

There was a session from an EHO from Camden who undertakes development of safety plans for Sainsbury. This addressed the role of the lead EHO, how they deal with perceived conflict of interests, and the development of plans for food safety and other aspects of health and safety.

The next session was a presentation on mosquito control and the risks within the UK. This was of particular interest to me because of my role as zoonoses lead. While mosquito control as part of disease prevention is not currently an issue in the UK, if there is a significant rise in temperatures the UK may host species which can transmit pathogens. The third session looked at rat control. As my knowledge of vector control was minimal, these addressed gaps in my knowledge of current and possible future practice.

### **What was the outcome of the activity?**

I now understand the role of EHOs employed by Local Authorities and seconded to large food companies to help them develop safety plans. The intention is to reduce paperwork for local branches by having standardised HACCP and similar which can be agreed by a single authority on behalf of LAs where the branch is situated. This is a model which could be transferable to other sectors, eg health. There seemed to me to be some change management issues, with Local Authorities not always understanding the role of the company EHO which could cause frustration for some branches. I reflected that this can sometimes happen within health protection where a local HPU may interpret national guidance differently from everyone else or have different standards for plans and procedures.

I now appreciate the risk areas for mosquito and rat infestation and how to control them. I had not previously realised how much of an issue tyre dumps might be (water collecting in the tyres). I now understand how these problems can be better addressed and the role of Local Authorities in doing this.

### **Further learning needs**

I need to maintain my understanding of EHO role. This is partly addressed by my attendance at Greater Manchester Food Group.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

## **FPH - CPD Entry - Olympic emergency planning and CBRN update**

### **CPD activity - Details**

## **Description of activity**

Olympic emergency planning and CBRN update

### **Start date:**

24 May 2012

### **End date:**

12 Jul 2012

### **CPD Year:**

2012

### **Credits:**

2

## **Reflective notes**

### **Why was this activity selected for CPD?**

This was undertaken in preparation for London 2012. Greater Manchester was hosting some events (football) so it was important that we understood emergency planning arrangements and could respond to CBRN incidents.

### **What was the learning need or objective that was addressed?**

I learned the arrangements for management of CBRN (terrorist) incidents during the Olympics, including the role of other agencies. I learned about the role of the HPU and of other parts of the HPA, including the Emergency Response Division. I also learned about specific arrangements for chemical incidents and biological emergencies, and for surveillance during the Games.

### **What was the outcome of the activity?**

I felt much more confident about management of CBRN incidents, especially when on-call. I now understand the role of the Emergency Response Division of the HPA and how they link with high level committees (eg COBRA).

### **Further learning needs**

I need to ensure I read any updates prior to the Olympics.

## **Linked PDP Entries**

Olympic training

[\[ Details \]](#)

# **FPH - CPD Entry - Joint Chairs NREA Meeting**

## **CPD activity - Details**

### **Description of activity**

Joint Chairs NREA Meeting

### **Start date:**

21 May 2012

### **End date:**

21 May 2012

### **CPD Year:**

2012

### **Credits:**

2

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am Chair of a Research Ethics Committee. The meeting with the National Research Ethics Advisors was important to keep me up-to-date and to compare and reflect chairing practice with other chairs.

### **What was the learning need or objective that was addressed?**

At this meeting we had a presentation on the change of terms of reference of the National Research Ethics Adviser Panel and how it will contribute to training and advice to help Research Ethics Committees give more consistent, robust and fair decisions. We also had updates on proportionate reviews. Since I have participated in the pilot of proportionate reviews I found it particularly useful to reflect on my experience and consider how the review of applications with no material ethical issues could be taken forward. We also had an excellent presentation and discussion on the management of incidental findings in studies (for example, if a CT scan of the brain revealed an unexpected lesion).

When I saw the minutes of the previous meeting I was stunned by how much I appeared to dominate the discussions. I used this meeting to try to control my urge to contribute, using a strategy of giving myself targets (eg for total number/length of contributions) and only speaking if it was absolutely necessary.

### **What was the outcome of the activity?**

I have more knowledge of how changes to the NRES/HRA structures are likely to develop and plans for proportionate review and have already used the outcome of discussion on incidental findings in my review of applications. One of my most significant learning points was that it is possible to contribute fully without voicing every issue - if you wait long enough someone else may raise the point first, you only need to speak if no-one else raises the point, and if that point is sufficiently important.

### **Further learning needs**

I need to practice not speaking at meetings, developing strategies to control my extrovert nature while still ensuring that important points are made.

### **Linked PDP Entries**

Research Ethics Committee

[\[ Details \]](#)

## **FPH - CPD Entry - Five Nations Health Protection Conference, Belfast Day 2**

### **CPD activity - Details**

#### **Description of activity**

Five Nations Health Protection Conference, Belfast Day 2

#### **Start date:**

02 May 2012

#### **End date:**

02 May 2012

#### **CPD Year:**

2012

#### **Credits:**

3

### **Reflective notes**

#### **Why was this activity selected for CPD?**

This was the second day of a two day conference. As noted in the previous reflective note, I am one of the organisers. In previous years I have welcomed the opportunity to share practice with colleagues around the British Isles and to see how others do it.

## **What was the learning need or objective that was addressed?**

Since I am not the TB lead in the HPU, I have become rather rusty on some aspects of TB control. The session on Travel infections was all about TB and provided me with a useful update. The session on HCAI included a presentation on the pseudomonas outbreak in neonatal units in Northern Ireland. This gave me an appreciation of the nature of the outbreak and the challenges in controlling what actually appears to have been several incidents in a high profile setting. The final session included a presentation on the implementation of the national HPV vaccination programme in Ireland. I learned about the organisation of vaccination and school health services in Ireland, how to cope with less than optimal organisational structure when implementing a vaccination programme. I was surprised that religious objections to vaccinating young girls did not seem to have been any more vehement than in England, and this helped me reflect on my prejudices.

## **What was the outcome of the activity?**

I will not make assumptions about how religious beliefs might impact on planned health improvement (including vaccination) programmes, although I still recognise that one has to take account of and plan for religious/cultural concerns.

I now have much better understanding of TB control, including some of the detail around gamma interferon testing, which will assist me in dealing with TB incidents.

The experience from Northern Ireland pseudomonas outbreak will inform my response to similar outbreaks in hospitals in Greater Manchester.

## **Further learning needs**

This conference provided a valuable learning environment, with the opportunity to meet and discuss experience with colleagues. I hope to attend future similar conferences.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

# **FPH - CPD Entry - Five Nations Health Protection Conference, Belfast day 1**

## **CPD activity - Details**

### **Description of activity**

Five Nations Health Protection Conference, Belfast day 1

### **Start date:**

01 May 2012

### **End date:**

01 May 2012

## **CPD Year:**

2012

## **Credits:**

5

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am on the organising committee for the Five Nations, and this year I convened the organising committee and took much responsibility for the programme. This is one of the best conferences for meeting with colleagues from around the British Isles to compare practices, reflect on one's own practice, and pick up ideas for improving future practice.

### **What was the learning need or objective that was addressed?**

The keynote address from Michael Mc Bride, Chief Medical Officer for Northern Ireland, was inspirational. The big message I have taken away is the reminder that you don't see headlines saying that an outbreak didn't happen or that x number of deaths didn't occur because of public health activity. (Actually, during subsequent very wet weather, the Environment Agency did just that, explaining that although many properties were flooded, around 20,000 more would have suffered if they hadn't improved flood defenses).

In the next session on surveillance I gave a presentation on TB genotype clusters in collaboration with a colleague. In preparing for this I learned what TB genotype clusters are, how the analysis of clusters is undertaken, and reflected on the usefulness (or otherwise) of routine cluster analysis. I heard presentations from around the UK and was surprised to find that in some parts of England the efficiency of notification of infectious disease was inferior to that in Greater Manchester (which gave a boost to my confidence). I also saw some very interesting ways of presenting contact/transmission information in outbreaks, although I think some of the grander ideas which required the analysis of huge datasets may need further refinement before they will be practicable. In the sexual health session I learned how surveillance can inform infectious syphilis prevention activities and about the difficulties in getting messages through to young people. This gave me an opportunity to reflect on my own practices when I was sexual health lead and to further recognise the difficulties in controlling sexually transmitted infections.

### **What was the outcome of the activity?**

Michael McBride's talk has given me a more positive outlook on health protection and public health. The discussions following my presentation on TB clusters has led me to consider in what sort of circumstances cluster analysis might be of value. I will be more circumspect about which clusters I will investigate while recognising that there may be value in investigating some clusters. The presentations on transmission links has given me ideas for using similar methodology for certain outbreaks, although I don't think I'd go into as much detail about transmission risks for every patient. The presentations on surveillance reinforced my developing GI surveillance locally to improve timeliness and quality of data.

## **Further learning needs**

There was so much new going on, it highlighted the importance of using these opportunities in the future to share and discuss practice with colleagues from around the British Isles.

## **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)

Maintain public health competencies

[\[ Details \]](#)

# **FPH - CPD Entry - Olympic Update -**

## **CPD activity - Details**

### **Description of activity**

Olympic Update -

### **Start date:**

27 Apr 2012

### **End date:**

27 Apr 2012

### **CPD Year:**

2012

### **Credits:**

1

## **Reflective notes**

### **Why was this activity selected for CPD?**

London 2012 brought significant challenges for Health Protection Units. There were Olympic training venues and Olympic events in Greater Manchester, as well as the torch passing through twice. This was the first of several training sessions to bring the HPU staff up to date on arrangements for the Olympics and the role of the HPU.

### **What was the learning need or objective that was addressed?**

This session concentrated mainly on the organisation around the Olympics. I learned about the timetable for events and the role of the different organisations involved in emergency planning and how GMHPU fit in. I also learned what the expectations on the HPU would be in terms of preparedness and surveillance.

## **What was the outcome of the activity?**

I felt better informed about the arrangements and my role. I also had a better understanding of the rationale for emergency planning in relation to the Olympics and why such a high profile event needed what appeared to be over the top arrangements. (The events in Greater Manchester were football matches at Old Trafford.)

## **Further learning needs**

I need to attend the other Olympic training sessions planned within the Unit.

## **Linked PDP Entries**

Olympic training

[\[ Details \]](#)

# **FPH - CPD Entry - Preparation for talk on GI disease on international health and epidemiology course**

## **CPD activity - Details**

### **Description of activity**

Preparation for talk on GI disease on international health and epidemiology course

### **Start date:**

26 Apr 2012

### **End date:**

26 Apr 2012

### **CPD Year:**

2012

### **Credits:**

2

## **Reflective notes**

### **Why was this activity selected for CPD?**

I am the GI lead for Greater Manchester Health Protection Unit. The Unit has close links with University of Manchester and I was asked to talk on this course. I had not previously put a



great deal of thought to international aspects of GI disease, so preparing this presentation comprised significant new learning for myself, as well as the students.

### **What was the learning need or objective that was addressed?**

Preparation of the talk involved reviewing the literature in relation to various aspects of international health protection, including international epidemiology, impact of travel and legal aspects of international health. During preparation I updated my knowledge of these areas and particularly added substantially to my understanding of the International Health Regulations.

### **What was the outcome of the activity?**

As well as giving a successful presentation which was highly evaluated, I now have a better grounding in the International Health Regulations. Since I am also the legal lead for Greater Manchester HPU, this was a bonus. I also have a less parochial view of health protection.

### **Further learning needs**

I need to maintain my teaching skills by further practice and taking up opportunities for presenting.

### **Linked PDP Entries**

Health Protection Knowledge and Skills

[\[ Details \]](#)