

# **Proposal for a Temporomandibular Joint (TMJ) Fellowship, University Hospitals Birmingham NHSFT.**

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## **Current status of TMJ Surgery in the UK**

Sub-specialisation is becoming increasingly common in modern surgical training. In oral and maxillofacial surgery, we currently have interface fellowships for sub-specialty training in a number of areas including head and neck cancer surgery, cleft lip and palate surgery, cosmetic and trauma surgery; these are currently administered by the Joint Committee on Surgical Training (JCST). There is no subspecialty training available in the UK for the surgical management of TMJ disorders.

Currently, there are approximately 15 maxillofacial surgeons in the UK who undertake the full range of medical and surgical interventions required to manage these disorders. These specialists have been through the conventional UK training pathway in Oral & Maxillofacial surgery and will have sub-specialised with an interest in TMJ disorders. The latest commissioning guide for TMJ disorders <sup>1</sup>, highlights that patients referred to secondary care services “should be able to expect a high quality service from an appropriately trained surgeon.” This should not only encompass open surgical intervention, but also arthroscopic surgery and access to a full range of multi-disciplinary support. At present, very few trainees on obtaining their Certificate of Completion of Training, are competent or happy to perform TMJ arthroscopy <sup>2</sup>.

Members of the British Association of TMJ surgeons contribute to a national database/registry for patients undergoing total joint replacement. This has arisen from the need to show the continued efficacy of this procedure to regulatory bodies such as NICE, but also to encourage surgeons to contribute to, and develop, a national framework of dedicated TMJ surgeons.

Currently, of the surgeons who contribute to this data collection, there is no recognised NHS provider of tertiary TMJ services in the South East of England. This is reflected in the increased numbers of patients being referred out of area for an opinion and/or surgery. In Birmingham, we have seen both an increase in the number of overall referrals, and an increase in our geographical referral base. It is anticipated that this situation is likely to worsen over the next five years with the impending retirement of several dedicated TMJ surgeons. Posts for an OMFS surgeon with expertise in TMJ surgery have gone unfilled in the past, either due to a lack of interest or potential applicants failing to meet the person specification for the post.

TMJ surgery does not have the same national regulation and funding as dedicated to supra-regional services such as craniofacial surgery. However, there is clearly a need to increase the numbers of appropriately trained TMJ surgeons to meet both current demands and to future-proof TMJ services in the UK. Patients already may have to travel considerable distances to receive the care that they require, a situation which may worsen without expansion of surgeon numbers.

## **Post CCT TMJ Fellowship University Hospitals (Queen Elizabeth Hospital) Birmingham**

For many years, the TMJ service in the West Midlands was provided by a single surgeon (Bernie Speculand). University Hospitals Birmingham (UHB) recognised that a single provider carried with it potential clinical risk and clinical governance issues. This, coupled with an increasing workload and waiting times, led to the appointment of a second dedicated TMJ surgeon, appointed in 2010 (Jason Green).

The impending retirement of Bernie Speculand in 2015 meant that there would be a potential gap in service given the lack of appropriately trained surgeons available. Training of a successor whilst in post would result in a reduction of output within the unit and negatively impact on an expanding secondary and tertiary service.

In an attempt to circumvent this problem, the Trust and OMFS department at UHB developed a unique plan to advertise for, appoint to and train a post CCT OMFS surgeon in a one year fellowship post in TMJ surgery. It was anticipated that successful completion of the fellowship year would enable the candidate to enter into a dedicated TMJ surgery practice without the need for further training once appointed as a consultant. The appointed fellow would then be in a position to apply for the impending vacancy, with appointment subject to the usual rigorous and open consultant interview process.

Funding for the position was met by the Trust and the fellowship commenced in January 2014. The successful applicant was directly attached to both consultant trainers (BS and JG) and had almost exclusive clinical exposure to TMJ surgery. Visits to other units with a significant TMJ practice in Europe and the United States was actively encouraged to widen the experience gained during the fellowship year.

The successful appointee was able to learn and undertake all aspects of TMJ surgery during the year.<sup>3</sup>

### **Previous Fellowship Experience**

The previous fellowship provided a comprehensive exposure to the medical and surgical treatment of TMJ disorders. During the twelve months of the post, the fellow undertook (under direct consultant guidance and supervision):

- 70 arthroscopic procedures
- 13 TMJ cryotherapy
- 16 TMJ arthrocentesis
- 9 open TMJ procedures (arthroplasty, mensesicopexy, meniscectomy)
- 20 total prosthetic joint replacements

Considerable support was given to fulfilling the educational component of the fellowship and the fellow was encouraged to visit units both in the UK and overseas. Over the course of the year, the fellow attended:

- The British Association for the Study of Headaches, Study Day, Coventry, March 2014
- TMJ Arthroscopy Course, Baltimore, USA, April 2014
- AATMJS, EATMJS, BATS Joint Annual Conference, Chicago, USA, April / May 2014
- TMJ Surgery Clinical Attachment, Department of Oral & Maxillofacial Surgery, University Hospital, Groningen, Netherlands, September 2014
- S.O.R.G. Trauma Surgery of the Fractured Condyle of the Mandible – Current Concepts and Innovations, Dresden, October / November 2014
- S.O.R.G. Arthroscopic and Open Temporomandibular Joint Surgery – Basics and New Horizons, Lectures and hands-on Human Cadaver Course, Vienna, November 2014

### **Completed Fellowship Feedback**

*‘The fellowship year has been extremely rewarding. It has allowed me to acquire the knowledge and develop the expertise required to deliver a high quality and comprehensive service covering the breadth and depth of TMJ and related conditions. It has given me insight into the broader aspects of this field, and allowed me to develop a sound rationale for management planning and case selection, thereby reducing risk of iatrogenic injury secondary to poor case selection’.* Alan Attard, Birmingham, August 2015

### **Future Fellowship Appointments**

Having set up and successfully completed the first UK TMJ fellowship, we at UHB feel that we are able to offer our services to train future TMJ surgeons who will be able to meet the demands of providing a complex tertiary service upon appointment as a consultant. The previous fellowship was deemed successful not only by the unit and the fellow, but also by the Trust. We were then in a position to appoint a suitably trained individual who was able to seamlessly take over an existing practice, develop the service locally and contribute to the training of higher surgical trainees within the region.

### **Unit information**

The post would be based at the University Hospital Birmingham NHS Foundation Trust, Queen Elizabeth Hospital. For hospital details see ‘Job Description’ below.

### **Expenditure**

The successful appointee would be paid as per current pay scales for junior doctors in England 2016-2017. As the fellow will be within 3 months of their certificate of completion of training this will fall between £43,868 - 47,647 pa (ST7 - 9)

An additional sum of £600 would be expected to be allocated towards the study leave budget.

### **Proposed timeline**

If funding is secured, the post could be advertised and an appointment would be feasible within 6 months from advertisement.

### **Future Consultant Appointment**

There is no successional consultant appointment attached to this fellowship.

### **Clinical and Educational Supervision**

The appointed fellow will be supervised clinically by both current TMJ surgeons (JG and AA). Educational supervision will be provided by JG. There would be an opportunity to contribute to the OMFS on-call rota (currently 1:6).

### **Summary**

There is a clear need to train and develop TMJ surgeons in the UK to meet the criteria recommended in the latest Commissioning Guidelines from the Royal College of Surgeons of England<sup>1</sup>. Currently there is no dedicated training pathway for higher surgical trainees to achieve this level of expertise prior to taking up their consultant post. The lack of exposure for trainees to both simple and complex TMJ surgery has recently been highlighted<sup>2</sup>. Fellows of BAOMs have also suggested there is a lack of dedicated TMJ surgery training and the need for development of a regional/supra-regional service for more complex cases<sup>4</sup>.

In Birmingham we feel we are in a unique position to provide a high quality post CCT training programme that fills this void, which would allow the successful candidate to take up a dedicated TMJ subspecialty consultant appointment upon completion. We have a proven track record in this area, as demonstrated by our initial fellowship, and this initiative is fully supported by our own department and Trust.

### **References**

1. Commissioning guide: Temporomandibular Joint Disorders. Royal College of Surgeons of England (2014).
2. Training in surgery of the temporomandibular joint: perceptions of trainees in oral and maxillofacial surgery in the United Kingdom. R. Elledge, B. Speculand, J. Green, A. Attard. British Journal of Oral and Maxillofacial Surgery. (2016) 54: 941–945
3. Training In TMJ Surgery: experience of a one year fellowship. Speculand B, Attard A, Green J. British Journal of Oral and Maxillofacial Surgery (2016) 54:160-2.
4. Training in TMJ surgery: the UK Trainers' perspective. Elledge R, Green J, Attard A. British Journal of Oral and Maxillofacial Surgery (Accepted for publication September 2016)

**UNIVERSITY HOSPITAL BIRMINGHAM  
NHS FOUNDATION TRUST**

**JOB DESCRIPTION**

**JOB SPECIFICATION FOR POST CCT  
FELLOWSHIP IN TMJ SURGERY**

## **1. INTRODUCTION**

Applications are invited for the post of Fellow in TMJ Surgery at the University Hospital Birmingham NHS Trust.

This is a unique opportunity in the UK for post CCT trainees to develop and obtain skills relevant to the development of a comprehensive practice in the management of TMJ disorders.

The post holder will work under the direct guidance and supervision of two Consultant Oral & Maxillofacial Surgeons with a dedicated interest in the management of TMJ Disorders, based at the University Hospital Birmingham NHS Trust (Mr J Green and Mr Attard). This Trust is the Regional Cleft, Skull Base and Craniofacial Centre for the West Midlands. The Oral & Maxillofacial Unit admits adult patients for both acute care and reconstructive surgery. The University Hospital Birmingham NHS Trust is a specialist centre for skin oncology, skull base and head and neck surgery, craniofacial surgery, cleft surgery. paediatric oral & maxillofacial surgery, craniofacial surgery and cleft surgery take place at the Birmingham Children's Hospital.

## **2. DETAILS OF THE DEPARTMENT/SERVICE**

Oral & Maxillofacial Surgery is a separate speciality within Division D Group 3, which also includes ENT and Urology. The Divisional Director is Dr Andy Toogood, the Clinical Service Lead in Oral & Maxillofacial Surgery is Mr Prav Praveen.

The new Queen Elizabeth Hospital Birmingham opened in June 2010 and has 1250 beds, providing secondary care to its local population and tertiary care to the West Midlands, the wider community and neighbouring counties. This provides state of the art operating theatres, a 100-bedded critical care department, excellent radiology support and first class in-and-out-patient facilities. The Centre for Defence Medicine is based in the hospital and is the main receiving hospital for the British military casualties from conflict areas around the world. QEHB is a Level 1 Trauma Centre receiving major civilian trauma from the West Midlands and neighbouring counties.

The Oral & Maxillofacial Unit has access to inpatient beds on Ward 408 and ambulatory care (23 hour stay). There is reasonable access to ITU beds.

Oral & Maxillofacial Surgery inpatients are based on Ward 408 at the Queen Elizabeth Hospital Birmingham and the department an allocation of 4 beds on this ward, which is also shared with ENT and Plastics. Short-stay elective surgery is undertaken in an Ambulatory Care Unit with dedicated theatres and ward space.

The Department of Oral and Maxillofacial Surgery within University Hospital Birmingham NHS Trust provides all components of a fully comprehensive oral and maxillofacial surgery service: district oral and maxillofacial surgery services, a regional cleft service, a supra-



regional craniofacial surgery service (in partnership with Birmingham Children's Hospital NHS Trust), intra and extra-oral implant expertise and maxillofacial prosthetic laboratories.

The Department provides a comprehensive TMJ service across three sites (QEHB, City Hospital and Birmingham Dental Hospital). It is one of the UK centres providing TMJ replacement surgery and receives both secondary and tertiary referrals on a regional and national basis.

At the current time, diagnostic arthroscopic surgery is performed at Birmingham Treatment Centre (City Hospital) and in-patient surgery carried out at QEHB. The Department also carries out a wide range of minimally invasive and open joint procedures. Both consultants participate in Facial Pain clinics and the appointee would have exposure to the non-surgical management of chronic facial pain.

The appointee will gain experience in:

- Diagnosis and Treatment planning in TMJ Disorders
- Diagnostic and Therapeutic Arthroscopic Surgery
- Management of Recurrent TMJ Dislocation
- Non Surgical Management of TMJ/Chronic Facial Pain
- Open Joint Surgery
- Management of Adult TMJ Ankylosis Cases
- Temporomandibular Joint Replacement Surgery

### **Links with other trusts**

The department is closely associated with a number of other services: in particular, staff from the department provide oral and maxillofacial surgery and cleft lip and/or palate services at the Birmingham Children's Hospital and are core members of the craniofacial unit. There are close links with ENT and Neurosurgery.

Maxillofacial Surgery services in Birmingham are organised on a 'hub and spoke' arrangement with spoke services at Sandwell and West Birmingham Hospitals NHS Trust, Heart of England NHS Foundation Trust. All elective in-patients are treated at the Queen Elizabeth Hospital

The department has important academic and clinical links with the Birmingham Dental Hospital and School, and is involved in the full range of undergraduate and postgraduate teaching activity. Close links are maintained with the units of Oral Pathology, Oral Surgery, Orthodontics, Oral Medicine and Restorative Dentistry.

### **Current staffing**

The Oral & Maxillofacial department is an 12 consultant unit based at the Queen Elizabeth Hospital Birmingham. There are 6 specialist registrars, 10 dental core trainees, 4 Specialist dentists, 1 Head & Neck Fellow and 1 Craniofacial Fellow.

The Consultants based at University Hospital Birmingham NHS Trust also provide services to Birmingham Heartlands and Solihull NHS Trust, City Hospital Trust and and Birmingham Children's Hospital.

Mr A Attard	MFDSRCS; FRCS
Mr MS Dover	FDSRCS; FRCS
Mr M J Evans	FDSRCS; FRCS
Mr J Green	FDSRCS; FRCS; MSc
Mr T Martin	FDSRCS; FRCS; MSc
Mr A Monaghan	FDSRCS; FRCS
Mr K McMillan	MFD; FRCS
Mr S Parmar	FDSRCS; FRCS; BMedSci
Mr P Praveen	FDSRCS; FRCS (Clinical Service Lead)
Mr I Sharp	FDSRCS; FRCS; MBA
Mr K Webster	FDSRCS; FRCS; M.Med.Sci PGCE FHEA
Mr R Williams	FDSRCS; FRCS

### **Teaching and Research**

Supporting activity commitment for teaching and research has been included in the job plan. It is anticipated that the appointee will attend the monthly Oral & Maxillofacial surgery audit meetings and contribute to the teaching and support of trainees. The department has strong links with the University of Birmingham. The appointee will be expected to conduct and complete a research project relating to TMJ surgery, during the Fellowship period.

In addition, support will be given for travel to other units undertaking TMJ surgery, both within the UK and overseas.

### **On-Call Duties**

There is no on-call commitment associated with the Fellowship. Opportunities for additional on-call may become available during the twelve month period.

### **Audit**

The Division has an audit team that co-ordinate data collection and submission for the major national audits. The successful applicant will be expected to participate in the Directorate audit programme as well as that of the sub-speciality area.

A rolling audit and teaching programme is conducted in the Oral & Maxillofacial department on a monthly basis. This is chaired by one of the consultants and co-ordinated by a member of the junior staff.

In addition, the appointee would be expected to participate in the National TMJ Replacement Audit and complete at least two audits locally as part of their fellowship.

### **Clinical Governance**

The appointee will be expected to participate in all aspects of clinical governance as developed by the Trust to monitor, maintain and develop the quality and effectiveness of care.

The Trust is committed to the development and maintenance of the highest clinical standards through individual appraisal. This will include the audit of personal and clinical practice as well as involvement in departmental and speciality reviews. It will also involve attention to continuing professional development and to meeting requirements for continuing medical education as expected by the relevant Royal College. It will also involve the awareness of professional standards and the responsibility to undertake safe and ethical clinical practice and the importance of responding promptly to any circumstances, which may result in increased clinical risk or adverse outcome.

## **4. MAIN CONDITIONS OF THE SERVICE**

A standard full time job plan will contain 10 programmed activities. A programmed activity will normally have a timetable value of 4 hours. The Fellowship will comprise of 8 sessions of Direct Clinical Care and 2 Supporting Professional Activity.

The postholder must be fully registered with the General Medical Council and have a dental qualification registerable with the GDC. It is advisable to maintain up to date membership of a recognised medical defence organisation.

An applicant who is unable, for personal reasons, to work full-time will be eligible to be considered for the post; if such a person is appointed, modification of the job content will be discussed with the Trust on a personal basis in consultation with Consultant colleagues.

The appointment is subject to pre-employment health screening.

## **5. FURTHER INFORMATION**

Further details may be obtained from Mr Jason Green and Mr Alan Attard (Consultant Oral & Maxillofacial Surgeons) via their Secretary Isobel Turner:

Telephone No.                      0121 371 5024

## Appendix 1

### **Provisional Timetable**

The Job Plan will comprise of ten programmed activities. The job plan will be subject to discussion with the successful candidate.

Monday  0800-1700 (weeks 1 & 3) 0900-1230 (weeks 2 & 4) 1400-1700 (weeks 2 & 4)	Theatre City Hospital (JG) Clinic (JG/AA) City Hospital Research/Audit
Tuesday  0900-1300 1400-1700 (week 3)  1400-1700 (weeks 1,2 & 4)	TMJ Clinic (JG/AA) QEHB MDT Facial Pain Clinic QEHB  Administration/Database/Lab
Wednesday 0900-1300 (weeks1 & 3) 0900-1300 (weeks 2 & 4)  1400-1700	TMJ Clinic City (JG) TMJ/Facial Pain Clinic BDH (AA)  Research/Audit
Thursday 0800-1700 (weeks 1 & 3) 0800-1700 (weeks 1 & 3) 0800-1700 (weeks 2 & 4)	Theatre (JG) QEHB Theatre (AA) City Hospital Theatre (AA) QEHB
Friday 0800-1300  1400-1700	Joint Clinics BDH/Good Hope  Research/audit

The flexible elements of the direct clinical care activities and the supporting professional activities will be discussed in detail with the successful candidate upon appointment and will result in an agreed job plan which will be included with the formal offer of appointment.