Further information relating to clinical & professional responsibilities within Belfast Trust
Clinical Lecturer in Endocrinology / Honorary Consultant Endocrinology and Diabetes

Context of Belfast Trust Clinical Post

The Belfast Health Care Trust:

The Belfast Health and Social Care Trust was established in April 2007, comprising the Belfast City Hospital, Mater Hospital, Musgrave Park Hospital, Royal Hospitals and South and East Belfast, and North and West Belfast Health and Social Services Trusts.

Hospital Profiles:

- **The Royal Hospitals** is the largest hospital complex in Northern Ireland, comprising the Royal Victoria Hospital (RVH), the Royal Jubilee Maternity Hospital (RJMH), the Royal Belfast Hospital for Sick Children (RBHSC) and the School of Dentistry. It provides virtually all referral services in Northern Ireland and undoubtedly the vast majority of local research. It is the designated Regional Trauma Centre for Northern Ireland. The Royal Hospitals play a major role in clinical education, training and research, with most academic departments linked to the Queen's University Medical School on the Royal Hospital's complex – medicine, surgery, ophthalmology, child health, obstetrics and gynaecology, and pathology. Major re-developments of the Royal Hospitals are underway, which includes RBHSC. A new Critical Care Building with Emergency Department and operating theatres is currently in the process of opening.

- **The RBHSC** provides most of the provinces tertiary paediatric referral services such as neurology, cardiology, cystic fibrosis, and nephrology, oncology and surgery (including scoliosis surgery). The hospital also provides general paediatric services with a dedicated children's Emergency Department. There is an active academic university department with links to Queens' University, Belfast with an extensive undergraduate and postgraduate teaching programme.

- **Belfast City Hospital** (BCH) is a major teaching hospital, most of which is housed within the Tower (opened in 1985). The new Northern Ireland Cancer Centre opened on the campus in March 2006. A strong strategic focus on molecular medicine, cancer and renal services has enabled the development of a vigorous research programme, together with a large Cancer Clinical Trials Unit. There is a modern radiology department and substantial AHP Services (eg Physiotherapy, Podiatry, Occupational Therapy, Speech & Language Therapy, Nutrition & Dietetics, etc) and a comprehensive range of pathology.

- The **Mater Hospital** (MIH) is a long established general hospital with teaching status affiliated to the Queen's University of Belfast. The McAuley Building, was opened in January 2002. The X-Ray Department is sited in the Dempsey Building, which was opened in 1991. The Dempsey Building also houses the Emergency Department, the Operating Theatres, the Intensive Care/High Dependency Unit, the Outpatient Department and the Maternity Unit. The main Psychiatric Unit occupies a separate building next to the Dempsey Building. There is also a Psychiatric Day Hospital on a separate site, approximately one mile from the main hospital.

- **Musgrave Park Hospital** is the Regional Orthopaedic Unit for Northern Ireland. The Musgrave Park Regional Orthopaedic Service is the largest in the British Isles with over 30 consultant orthopaedic surgeons and staff. On site is the Queen's University Department of Orthopaedic Surgery which is the largest academic unit in Orthopaedics in the British Isles with an international reputation and an extensive research output.

A summary of the services across the different hospitals is provided in the table below:

Site	General Services	Specialist Services
Royal Hospitals	Emergency Department Acute & General Medicine Anaesthesia (including critical care) Pain Management	Recognised trauma centre Paediatrics (RBHSC) Obstetrics & Gynaecology (Royal Jubilee Maternity Hospital) School of Dentistry Regional services include: vascular and endovascular surgery, interventional radiology, neurosciences, medical and surgical cardiology, thoracic surgery, ophthalmology and specialised endocrinology, ENT, emergency general surgery, hepatology
Belfast City Hospital	Emergency Department (temporarily closed) Acute & General Medicine Anaesthesia (including critical care) Pain Management	Adult Cystic Fibrosis Breast Services (including reconstructive surgery) Cardiology Gynaecology & Gynaecological Oncology Haematology Haemophilia Service Medical Genetics, Medical Oncology Nephrology (including Renal Dialysis) Radiotherapy, Respiratory Medicine Transplant Surgery, Urology
Mater Hospital	Emergency Department Acute & General Medicine Anaesthesia (including critical care) Pain Management	Surgical specialties, Ophthalmology, Gynaecology, Psychiatry *Note: Mater Emergency Department paediatric radiology is reported by the RBHSC consultants.*
Musgrave Park Hospital	Anaesthesia Pain Management	Regional Orthopaedic unit Rheumatology Rehabilitation Regional Acquired brain injury unit Care of the elderly unit

All of the major laboratory services are also available including:

- Immunology
- Haematology (including Transfusion Services)
- Bacteriology
- Virology
- Pathology
- Immunopathology

The Belfast HSC Trust functions through a series of directorates. The Medical Specialties, including Endocrinology and Diabetes, form part of the Unscheduled and Acute Services Directorate.

Unscheduled and Acute Services Directorate:

The Directorate is responsible for maintaining non-elective medical admissions as part of it current take-in responsibility, as well as elective admissions following referral from the general practitioner, outpatients or other hospitals.

On the RVH site, non-elective medical patients are managed through an admission unit, with patients undergoing assessment and management there, prior to either discharge, transfer to an appropriate medical bed or triage to a medical specialty.

The Belfast Hospital Trust contains a wide range of medical specialties including:

- Acute Internal Medicine
- Respiratory Medicine
- Hepatology
- Medical Gastroenterology
- Endocrinology and Diabetes
- Genitourinary Medicine
- Infectious Diseases
- Renal Medicine

Other specialist interests include Clinical Immunology, Lipid Metabolism and Clinical Pharmacology.

Endocrinology and Diabetes:

Overview of Current Services

The Regional Endocrinology and Diabetes Centre is located in the Royal Victoria Hospital with additional outpatient services provided in the Belfast City Hospital and Mater Hospital. The Regional Centre provides regional referral services for the treatment of complex endocrine and diabetes-related disorders. This includes virtually all patients in Northern Ireland diagnosed with pituitary disease (eg pituitary tumours, Cushing's syndrome, acromegaly), neuroendocrine tumours, adrenal disease and gonadal failure.

There is a large clinical interest in all aspects of hypertension (both endocrine and refractory hypertension), thyroid and parathyroid disease, including thyroid carcinoma.

Comprehensive care is provided for all aspects of diabetes mellitus including diagnosis, screening, initial management, long-term review, annual review, epidemiological recording and the Multidisciplinary Diabetic Foot pathway, which started in November 2019. There is a developed service for continuous subcutaneous insulin infusion (CSII) and continuous glucose monitoring (CGMS). Strong links exist with neurosurgery, endocrine surgery, vascular surgery, ophthalmology, renal medicine, paediatric services and the maternity unit to provide a comprehensive diabetes service.

A Belfast Diabetes Steering Group has been in place since 2008 to guide the re-organisation and development of services across the Trust area. This group has overseen the appointment of a Diabetes Education Manager and has a particular interest in integrating diabetes services across secondary, community and primary care. This has been further enhanced by the appointment of a Consultant Community Diabetes, and additional community dietetic, podiatry and specialist diabetes nursing staff in 2017 under the agenda of Transforming Your Care. The Trust is actively reviewing the strategy for the management of inpatient diabetes.

The above care is underpinned by Endocrine, Neuroendocrine and Joint Metabolic/Antenatal Multidisciplinary meetings.

Outpatient Clinics:

Outpatient clinics include the following:

– New patient clinic	1 per week
– Diabetic Clinics	3 per week and additional Saturday monthly clinic (including Young Person's, Pump and Foot clinics)
– Endocrine Clinic	3 per week and additional monthly clinic
– Hypertension Clinic	2 per month
– Pituitary clinic	1 per month

and joint special interest clinics including:

– Gynae/Endocrine	2 per month
– Transition Diabetes	1 per month
– Antenatal Endocrine	1 per week
– Neuroendocrine	1 per week (including Regional Neuroendocrine Tumour service)

A key aspect of outpatient working is the interaction with other members of the multidisciplinary team including Diabetes Specialist Nurses, Dietitians and Podiatrists, many of whom run separate clinics and education sessions including DAFNE courses for carbohydrate counting courses. There is an established structured patient education programme for patients with newly diagnosed type 2 diabetes which is based in local Health and Wellbeing Centres and overseen by multidisciplinary staff.

Medical Staffing:

A team of 10 WTE Consultant Physicians currently provides the Diabetes and Endocrinology inpatient service on the Royal Victoria Hospital site, with support from a BCH colleague to provide what is currently a 1 in 9.5 on call out of hours' rota. An additional diabetes clinic is delivered by a colleague in clinical chemistry in the Royal Victoria Hospital.

Resident medical staffing levels across the three sites includes 4 Specialist Registrars in Diabetes and Endocrinology based in RVH and IMT3 doctors based in RVH and MIH. The 2 acute sites are further supported by a team of FY1, FY2 and IMT's. There is also a specialty doctor working in the Multidisciplinary Diabetic Foot Team who also delivers sessions in antenatal diabetes clinic and inpatient diabetes.

The FY2 posts are recognised by the Royal College of Physicians of London for general professional training; the specialist registrar/ST posts have all been recognised for Higher Specialist Training.

Consultant members of the Regional Centre for Endocrinology and Diabetes (Royal Victoria Hospital) include: Dr Hamish Courtney (Clinical Lead), Prof Steven Hunter, Prof Karen Mullan (Patient Safety and Clinical Governance Lead), Dr Helen Wallace, Dr Claire McHenry, Dr Robert D'Arcy, Dr Anthony Lewis (Clinical Director for Acute Medicine, Diabetes and Endocrinology and GIM in MIH), Dr Ian Wallace and Dr Philip Johnston.

Other Consultant Physicians with an interest in Diabetes/Endocrinology in the BHSCT include Dr Ailish Nugent (Belfast City Hospital), Dr John Lindsay, Dr Pawel Bogusz (Mater Infirmorium Hospital) and Dr Glynis Magee (Community Diabetologist). The specialty doctor working in the Multidisciplinary Diabetes Foot Service is Dr Raluca Oprean.

The lead nurse for Diabetes and Endocrinology is Joanne Quinn. There is a full multidisciplinary team including Diabetes Specialist nurses, Diabetes specialist dietitians, diabetes specialist pharmacist (inpatient), Endocrine specialist nurses, podiatrists and clinical psychologist specialising in diabetes.

Values:

The Belfast Trust aims to recruit staff not only with the right skills but also with the right values to ensure the delivery of excellent patient care and experience. Staff will be expected to be committed to provide safe, effective, compassionate and person-centred care by:

- Treating Everyone with Dignity and Respect
- Displaying Openness and Trust
- Being Accountable
- Being Leading Edge
- Maximising Learning and Development

By embedding the above values, we will make a significant contribution to the delivery of the Trust's Vision.

Further information about clinical responsibilities:

- The prime responsibility of the post-holder will be to provide an outpatient and inpatient service in Endocrinology and Diabetes. Options may become available to develop a sub-specialty interest depending on the needs of the service and wishes of the successful candidate. The job plan outlined below may require modification to reflect this however it is expected that the post holder will deliver sessions in general endocrinology including a specialist pituitary endocrinology clinic, and general diabetes to support current services.
- The post has a 10PA commitment (5.0 PA BHSCT, of which 0.75 SPA and 5.0PA QUB, of which 0.75PA SPA) – see proposed job plan attached.
- The successful applicant will participate in a consultant of the week model (rota 1 in 19) whereby each week (over 7 consecutive days) there is a single consultant looking after all endocrinology inpatients on the RVH site. The consultant of the week will provide:
  - Ward round 9am-1pm every day Monday to Friday. During this time he/she will see all new patients triaged to the endocrine service, any direct admissions and review all existing patients. Based on current inpatient numbers, this period of time will also allow for discussion of any issues relating to ambulatory care work.
  - At weekends, there will be a 3-4 hour ward round every Saturday and Sunday covering the RVH site. Endocrinology cover of BCH out of hours is provided by phone advice.
  - Out of hours cover will be shared equally within the team and the consultant of the week will normally be on call every week night. An allowance of 2 hours per week for out of hours calls is included in the job plan.
  - For the remaining 8 weeks out of 9, the consultant will not have endocrinology inpatient responsibilities.
- The on call rota is 1 in 9.5 and as this is a joint appointment the on-call provided for this post will be half of that provided by the other consultants (1 in 19 weeks).
- It is anticipated that the inpatient ward rounds may displace some morning clinics but priority will be given to the ward work. Clinics may be moved to the non-acute week, utilising the time released by not having any ward work.
- In addition to general Endocrinology and Diabetes clinics, the successful applicant will have the option to develop a sub-specialty interest in a number of areas. These may be based on the needs of the service or the desires of the successful candidate. The job plan outlined below may require modification to reflect this. Sub-specialty areas may include:
  - Maternity diabetes
  - Adolescent/transition diabetic clinic
  - Neuroendocrine clinic
  - Thyroid disease
  - Community diabetology
  - Enhanced inpatient diabetes service
  - Diabetic foot service
  - Pituitary service

  - Adolescent Endocrinology
  - Transgender endocrinology
- The successful applicant will have continuing clinical responsibility for patients in his/her care at outpatient and day care locations and those admitted/discharged through the medical take-in.
- The successful applicant will be expected to share in the management of other Consultants' patients in their absence, e.g. annual leave, study leave or sick leave.
- To co-operate with managers in meeting access targets. This may involve pooling waiting lists where appropriate, caring for consultant colleagues' cases in their absence and accepting transfers of cases from, or providing transfers to, colleagues.
- Outpatient Clinics templates are standardised and in line RCP outpatient guidance with on expected workload of 2 new patients and 8 review patients per clinic/

On-Call Commitment:

- Currently the out of hours on-call rota is a 1 in 9.5 for night, weekend and bank holiday cover for Endocrinology and Diabetes. There will be out of hours' responsibilities, including rota commitments and cover for consultant colleagues' leave. Given this is a joint appointment the successful applicant will contribute to the on call rota on a 1 in 19 frequency.
- On average there are approximately 15-20 acute Endocrinology/diabetes admissions per week while on call. On average there are 20-25 Endocrinology/diabetes inpatients requiring daily review.
- There is a separate team managing the multidisciplinary diabetic foot patients during working hours (9-5pm). During out of hours and weekends/bank holidays, cover of these patients is provided by the endocrine consultant on call and is included in the on call responsibilities of this post.

ILLUSTRATIVE JOB PLAN

The prospective job plan below will be amended as appropriate following discussion between the post-holder and the Academic and Clinical Directors on appointment. The job plan will be reviewed after three months and annually thereafter, or earlier where workload changes are proposed. Joint job planning and review follows the 'Follett principles'.

Direct Patient Care

- You will deliver 2.0 clinics per week in Endocrinology and Diabetes, approximating to 84 per year. The clinic template will be based on RCP guidelines and will be supported by members of the resident medical and multi-disciplinary teams.
- You will receive 0.5 PA per week for administrative work related to the outpatient care in line with RCP and trust guidance.
- You will receive 0.405 PA per week to provide inpatient care and related administrative work. This includes participation in the consultant of the week model whereby each week (over 7 consecutive days) there is a single consultant looking after all endocrinology inpatients on the RVH site. The consultant of the week will provide:
- You will receive 0.5 PA for Endocrine specialty work. This recognises extra work provided by the RVH Endocrinology team to provide monthly Endocrine MDM, specialist investigation review, radioiodine service and extra administration.
- You will be allocated 0.25PA per week to attend the weekly grand round which discusses current inpatient and enables handover to the consultant the following week
- You will be allocated 0.25PA per week to attend the endocrine X-Ray meeting
- You will be allocated 0.255PA for out of hours and weekend work to include weekend ward rounds and phone calls
- It is expected that you will maintain flexibility to ensure that you deliver maximum projected Direct Patient Care and we will support/assist you in achieving this.
- It is agreed that, in order to achieve maximum waiting time targets, close working between all elements of the service will be required. However, cognisance will be taken should any unforeseen circumstances arise which impact significantly on your ability to meet these targets.

Supporting professional activity

- You are allocated 0.75 SPA of your core clinical 5 PAs to include time for activities that will support re-licensing and recertification and ensure the quality and safety of services. These activities include appraisal, job planning, audit and CPD activities.
- An additional 0.5 SPA is allocated to support induction and will be reviewed after 6 months when it is anticipated that it will convert to DCC.
- Maintaining skills and knowledge in endocrinology and diabetes in line with the outcomes of the annual appraisal process.
- You will take the lead on an audit or Quality improvement project this year as identified by you or the audit co-ordinator and agreed with the Clinical Director.
- You will undertake clinical management within your core SPA to assist in the development of the service including unit and Trust activities both internal and external.
- You will ensure research governance procedures are followed for research projects.

This job plan outlines the number of DCC PAs that you would normally expect to perform on an annual basis. In so doing, the purpose is to clarify for you the Belfast Trusts' expectation that you would attend these PAs. However, both parties recognise that it may not be possible for you to do so because of factors partly, or entirely, out with your control.

In such circumstances the Trust may ask you to be flexible in trying to maintain the level of service and take on alternative duties/PAs. Any alternative PAs that you undertake would be by mutual

agreement and would as far as possible, not disrupt planned activities already outlined in your job plan.

The Trust also undertakes to provide reasonable notice of such changes. Failure to fulfil this commitment due to factors outside your control would not result in any penalty to you; specifically it would not be grounds for preventing pay progression.

Programmed Activities

The table below gives a breakdown of the total agreed PAs on **average per week and the agreed annualised** PAs due to the nature of certain elements within the job plan.

Programmed Activity	**PAs per week**	**Number**
Direct Clinical Care to include on average:		
	Specialist Clinics	1.59
	Clinic admin	0.5
	Endocrine Specialist Work (including MDM)	0.5
	Grand Round	0.25
	XRay meeting	0.25
	Diabetes & Endocrinology on call	0.255
	Endocrine COTW	0.405
Total DCC'S		**3.75**
Supporting Professional Activities		
Core SPA	**Total**	**0.75**
	Induction (for 6 months then converts to DCC)	**0.25**
Other Professional Activities		
Clinical academic for Queen's University Belfast (includes 0.75 SPA)		**5.0**
TOTAL PA'S		**10**

The following is illustrative and indicates all your **regular weekly** commitments as agreed. It does not include activities that occur on an ad hoc basis. Ad hoc ward attendance to ensure continuity of care of patients and clinical administration time is included in your Direct Patient Care PAs. The timetable does not include external duties unless timetabled in SPAs.

Day	Time	Work Activity	Location	DCC	SPA	QUB	QUB SPA
Mon	0900-1300	Endocrine Clinic	RVH	1.0			
	1300-1700	Pituitary Clinic	RVH	0.34			
Tues	0800-1600	QUB	QUB			2	
Wed	0900-1300	Diabetes Clinic	RVH	0.25			
	0900-1300	SPA BHSCT	RVH		0.75		
	1300-1700	QUB	QUB			1	
Thu	0830-1030	Clinic Admin	RVH	0.5			
	1030-1130	Educational Grand Round	RVH	0.25			
	1200-1300	XRay meeting	RVH	0.25			
	1300-1500	Endocrine Specialist Work (including MDM)	RVH	0.5			
Fri	0800-1600	QUB				1	0.75
Flexible	Endocrine COTW		RVH	0.405			
	Endocrinology & Diabetes On Call		RVH	0.255			
	Additional SPA for induction (for 6 months)				0.5		
Total	**10PA**			**3.75**	**1.25**	**4.00**	**0.75**

Note:
The above timetable is an illustration of weekly commitments within the Trust and QUB. In practice, this will be worked flexibly with colleagues.

Note that QUB and Trust buildings are adjacent so minimal travel time between clinical and academic workplaces.

ADDITIONAL INFORMATION

Induction

All newly appointed Consultants will be issued with an individualised Induction Programme and Trust Induction and it is mandatory for all aspects of the induction programme to be undertaken. Arrangements are also in place to seek advice from senior management and specialist staff within the specialty team.

Indemnity

Belfast Trust employees are normally covered by the HPSS and Community Health Service Indemnity against claims for medical negligence. However, certain circumstances may not be covered by the Indemnity, especially where a separate fee is received. The Department of Health, Social Services & Public Safety (DHSS&PS) therefore advises that membership of a medical indemnity organisation is maintained.

Mentoring

The Belfast Trust supports schemes for mentoring of newly-appointed consultants and a mentoring programme will be offered to the successful candidate. Support within the speciality will be provided by senior colleagues in the department including the clinical lead Steven Hunter.

Quality Improvement, Multiprofessional Audit and Continuing Medical Education

The post holder will be required to undertake such continuing educational activities as are necessary for them to remain accredited by their Royal College. The Trust supports the requirements for continuing professional development as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities.

The Trust has the required arrangements in place, as laid down by the Royal College of Physicians, to ensure that all doctors have an annual appraisal with a trained appraiser and supports doctors going through the revalidation process.

The post-holder will be required to take part in the Trust's quality improvement and audit programme.

Quality

Patient satisfaction must be at the forefront of the concern of each member of staff. Every patient is to be treated as an individual and provided with high quality service in terms of courtesy, kindness, interest and efficiency.

The Belfast HSC Trust is committed to providing safe and effective care for patients. To ensure this there is an agreed procedure for medical staff that enables them to report, quickly and confidentially, concerns about the conduct, performance or health of medical colleagues. All medical staff, practicing in the Trust, should ensure that they are familiar with the procedure and apply it.

Residence

In order to meet the on-call requirements of the post, the appointee is required to reside within a reasonable distance to their principal place of work, as per terms and conditions of service.

Equality

Employees of the Trust are required to comply with the Trust's Equality Scheme. A full copy of this scheme is available in the Human Resources Directorate, Employment Equality Team.

Ionising Radiation Regulations

The Ionising Radiation (privisitin Exposure) Regulations (2000) require that any person clinically or physically directing a procedure which involves exposure to radiation should have appropriate training. This can be provided locally as necessary.

Information Governance

All employees of Belfast Health & Social Care Trust are legally responsible for all records held, created or used as part of their business within the Belfast Health and Social Care Trust, including patient/client, corporate and administrative records whether paper based or electronic and also including e-mails. All such records are public records and are accessible to the general public, with limited exceptions, under the Freedom of Information Act 2000, the Environment Regulations 2004, the General Data Protection Regulation (GDPR) and the Data Protection Act 2018. Employees are required to be conversant and to comply with the Belfast Health and Social Care Trust policies on Information Governance including for example the ICT Security Policy, Data Protection Policy and Records Management Policy and to seek advice if in doubt.

Environmental Cleaning Strategy

The Trust's Environmental Cleaning Strategy recognises the key principle that "Cleanliness matters are everyone's responsibility, not just the cleaners". Whilst there are staff employed who are responsible for cleaning services, all Trust staff have a responsibility to ensure a clean, comfortable, safe environment for patients, clients, residents, visitors, staff and members of the general public.

Infection Prevention and Control

The Belfast Trust is committed to reducing Healthcare associated infections (HCAIs) and all staff have a part to play in making this happen. Staff must comply with all policies in relation to Infection Prevention and Control and with ongoing reduction strategies. Standard Infection Prevention and Control Precautions must be used at all times to ensure the safety of patients and staff.

Personal Public Involvement

Staff members are expected to involve patients, clients, carers and the wider community where relevant, in developing, planning and delivering our services in a meaningful and effective way, as part of the Trust's ongoing commitment to Personal Public Involvement (PPI). Please use the link below to access the PPI standards leaflet for further information.

http://www.publichealth.hscni.net/sites/default/files/PPI_leaflet.pdf

Governance

The successful candidate will be expected to work within the Belfast HSC Trust and Queen's University Belfast governance frameworks.

QUB and the Trust are committed to conducting a process of yearly Follett-compliant, joint appraisal of consultant staff, which is used to support GMC revalidation.

SUPPORT FOR ROLE (BHSCT AND QUB)

Offices, access to PCs, IT support etc will be provided in both clinical and academic sites.

Wellbeing support initiatives are provided by both institutions.

B Well (Belfast Trust) provides employees with support and information on a wide range of health and wellbeing issues in key themes, complimented by training and a wide range of activities and events including the popular 'Here 4 U' support service.

Staff Wellbeing (QUB) provides staff with details of a large range of events, training and support to maintain mental and physical health, a positive work-life balance and connect staff with each other. These include stress management courses, mindfulness, physical exercise resources, and 24 hour access to high-quality counsellor support through the Employee Assistance Programme.

Occupational health support is available both within QUB and the Belfast Health and Social Care Trust. Queen's University Occupational Health Service is an independent, confidential health service provided by the Belfast Health and Social Care Trust (BHSCT). The same service is provided within the Belfast Trust. Referral is via line manager, or Human Resources Business Partner if staff are unable to discuss issues with their line manager.

Contact details for the QUB Occupational Health Service are: 5 Lennoxvale, Belfast BT9 5BY. Telephone number(s): 028 9504 0275 & Email address: occhealth@qub.ac.uk

Contact details for the Belfast Trust Occupational Health Service are: 2nd Floor, McKinney House, Musgrave Park Hospital, Stockman's Lane, Belfast BT9 7JB. Telephone: (028) 95040401 & Email: occupationalhealth@belfasttrust.hscni.net. Opening Times are 8.00am to 4.00pm (Monday to Friday).