Senior Clinical Fellow in Major Surgery, Perioperative Medicine, and Research
(1 post)

Whole-time fixed-term appointment for 1 year
(Extendable to 2 years for completion of MSc subject to satisfactory review)

Band 1A EWTD and New Deal compliant

The Royal Marsden NHS Foundation Trust

The Royal Marsden is recognised worldwide for the quality of its cancer services. The Royal Marsden NHS Foundation Trust’s strategic aim is to achieve excellence in cancer treatment and diagnosis, through partnership and collaboration. The Royal Marsden with its associated Institute of Cancer Research constitutes a centre of excellence for research and development, education, treatment and care in cancer. It is acknowledged to be one of the largest Comprehensive Cancer Centres in the world.

The prime purpose of the Trust is the provision of state of the art cancer services as well as enabling research into the development of improved methods of prevention, diagnosis and treatment of cancer. Its other main purpose is teaching and the dissemination of knowledge both nationally and internationally. In 1991 it became the first NHS hospital to be awarded the Queen's Award for Technology for drug development. The hospital gained National Charter Mark Awards in 1995, 1998 and again in 2001 for the excellence of its service and in 1996 achieved the international quality standard ISO 9001 for radiotherapy and for chemotherapy in 2003. In the latest NHS performances ranking published by the Healthcare Commission, The Royal Marsden was the only NHS trust to be awarded the highest score of ‘excellent’ by the Healthcare Commission for both quality of services and use of resources for the fourth year running.

The Royal Marsden with our academic partner, The Institute of Cancer Research, has been awarded one of 11 National Institute for Health Research Biomedical Research Centre grants. We are the only institution to be designated a National Biomedical Research Centre for Cancer.

The Royal Marsden NHS Foundation Trust comprises two units (currently 87 beds at Chelsea and 8 day beds and 128 beds at Sutton including paediatrics). Over 40,000 patients attend the Royal Marsden each year. The Trust employs 2500 staff, including 335 medical staff. As a specialist cancer centre, the Trust serves local populations within the London Boroughs of Merton, Sutton, Wandsworth, Kensington, Chelsea and Westminster, as well as accepting referrals both nationally and internationally.

The Royal Marsden supports a number of junior doctor training programmes and provides core training across a wide range of tumours in Clinical and Medical Oncology and Surgical Oncology (including gynaecological, gastro-intestinal and breast cancers, melanoma and sarcoma). The Trust participates in rotations for training of junior doctors in a number of other specialties including Anaesthesia, Pain and Intensive Care Medicine.
**Organisation**

The Trust Board comprises an independent chair, executive directors, (Chief Executive, Chief Nurse, Director of Finance, Medical Director), and five non-executive directors from outside the NHS.

At the Royal Marsden NHS Foundation Trust, the hospital management structure is organised into two Divisions: Cancer Services and Clinical Services. This post sits within the Clinical Services Division. Each Division is managed by a General Manager supported by Clinical Business Unit Leads. The Medical Director, Directors of IT, Business Development, HR, Facilities and Finance, together with the General Managers and the Chief Nurse form the Management Executive. This body is chaired by Ms Cally Palmer, the Chief Executive.

**Clinical Services Division**
Anaesthetics, Intensive Care, Pain, Cancer Genetics, Palliative Care, Pathology, Imaging, Radiotherapy, Theatres, Day Surgery, Nuclear Medicine, Physics, Pharmacy, Medical Records, Patient Transport, Outpatients.

**Cancer Services Division**
Head and Neck Unit, Haematology Unit, Neuro-oncology Unit, Paediatric Unit, Sarcoma Unit, Thyroid Unit, Skin and Melanoma Unit, Clinical Pharmacology Unit, Breast Unit, Gastrointestinal Unit, Lung Unit, Urological Unit, Gynaecology Unit.

**Community Services Division**
Community NHS services for Sutton and Merton

In addition, the Divisions are supported by the following Directorates:

**Nursing, Rehabilitation and Quality Assurance Directorate**
Rehabilitation Department (Physiotherapy, Occupational Therapy, Dietetics, Speech Therapy, Lymphoedema Service, Therapeutic Massage, Pastoral Care, Clinical Psychology, Complementary Therapies, Patient Information, Volunteer Services, Community Liaison, Social Services)
Quality Assurance Department

**Finance Directorate**

**Human Resources Directorate**

**Computing and Information Directorate**

**Facilities Directorate**

**The Institute of Cancer Research**

The Institute of Cancer Research is a College of the University of London. It was established in 1909 to investigate the causes of cancer and develop new strategies for its prevention, diagnosis, treatment and cure and is now a centre of excellence employing some of the world’s leading scientists working on cutting edge research.

The institute is on two sites located adjacent to both the Chelsea and Sutton sites of the Royal Marsden and is closely integrated with the NHS clinical provision.
Present Staffing in the Anaesthetics Department

Senior Medical Staff: Chelsea and Sutton

Dr T Beuthauser (Head of Paediatrics/Urology/Gynaecology)
Dr G Browne (Gynaecology/CCU/Sarcoma)
Dr D Chisholm (Paediatrics/Gynaecology/Plastics/Vascular access)
Dr P Farquhar-Smith (Pain management/Plastics)
Dr J Filshie (Pain)
Dr P Gruber (Head of CBU/CCU/Breast)
Dr V Grover (CCU/Gynaecology)
Dr M Hacking (Head of Department/Upper GI/Gynaecology/Plastics)
Dr J Handy (CCU/Breast/Paediatrics)
Dr C Irving (Head & Neck/Plastics)
Dr S Jhanji (CCU/Urology/Plastics)
Dr R Juneja (Audit/Sarcoma/Paediatrics/Preassessment)
Dr R Kasivisvanathan (Lead for Preassessment/Urology/IR)
Dr O Lacey (Paediatrics/Head & Neck)
Dr A Majumder (Sarcoma/Upper GI/Paediatrics)
Dr A McLeod (College Tutor/Head&Neck/Paediatrics/Breast/Preassessment)
Dr O Mingo (Plastics/Hepatobiliary/Paediatrics/Simulation lead)
Dr A Oliver (Preassessment/Paediatrics/Breast/Lower GI)
Dr R Raobaikady (Hepatobiliary/Endoscopy/Breast/Vascular access)
Dr M Rooms (Paediatrics/Endoscopy/Urology)
Dr R Self (Gynaecology/Urology/Paediatrics/Plastics)
Dr G Wares (Education Lead/CCU/Gynaecology/Breast/Urology)
Dr T Wigmore (Head of CCU/Urology)
Dr S Walker (Paediatrics/Breast/Fellowships coordinator)
Dr J E Williams (Head of acute and chronic pain/Upper GI/Breast)
Dr M Frow Trust grade (Breast/Plastics/Chest Drain Clinic/On-call – Sutton)
Dr A Smith Trust grade (Breast/Plastics/On-call – Sutton)

Junior Medical Staff: London and Sutton

Anaesthesia:
12 ST 5,6 or 7 trainees (Imperial / Royal Free / UCLH Schools of Anaesthesia)
2 Pain Fellows (1 advanced pain trainee, and 1 academic fellow)
1 Patient Safety Fellow
1 Education Fellow
4 Perioperative Medicine and Anaesthesia Fellows
2 Specialty Doctors in Anaesthesia

Critical Care:
2 ST 5, 6, or 7 Trainees from Imperial School of Anaesthesia, ICM module
ST 3 from London ICM CCT Program
ST 4 from London ICM CCT Program
2 Intensive Care Fellows
4 Foundation Year 2 Trainees in critical care medicine
**Workload**

There are currently 7 theatres, and a 16 bedded critical care unit in Chelsea. There are 2 theatres and a 2 bedded ‘treat and transfer facility’ in Sutton for stabilisation of critical care patients.

**Theatres:**
This is a Consultant led and delivered service, with senior trainees available for training and continuity in theatres.

There is one senior trainee on call in theatre between the hours of 8am and 8pm, supported by a nominated daytime Consultant, with night time cover provided by the ITU SpR (on site) and on call General anaesthesia Consultant (off site from 6pm, covering Sutton and Chelsea).

**Chelsea:** There are seven theatres and the average workload is currently 250 procedures per month, of which on average 100 per month are admitted to the critical care unit (CCU). The case mix is predominantly complex major surgery including:
- Upper GI – Thoraco-abdominal Oesophago-gastrectomy, Gastrectomy, Whipples procedure, Hepatobiliary Surgery
- Head and Neck – Major resection and free flap reconstruction
- Lower GI – including Sacrectomy and total exenterative procedures
- Gynae-Oncology – including pelvic exenteration and an increasing amount of robotic surgery
- Sarcoma – tertiary referral centre for complex retroperitoneal sarcoma and melanoma
- Urology – increasing amount of robotic surgery including cystectomy, prostatectomy and nephrectomy.
- Plastics – across discipline reconstructive and free flap surgery
- Breast Surgery

**Sutton:** There are currently two theatres and one paediatric day-procedure theatre. The theatre workload averages 300 procedures per month of which on average 4 per month are admitted to the Critical Care step-up Unit. Included within this total figure are 100 paediatric procedures, which take place in the paediatric day-procedure suite, and an average of 40 paediatric CT/MRI cases a month.

**Critical Care:**
The Marsden Critical Care unit provides excellent outcomes for both elective surgical (75% of admissions) and medical patients. Following the fire in 2008, a new 16-bedded CCU opened in September 2010. This is the largest critical care unit dedicated to the care of oncology patients in Europe. The units (Chelsea and Sutton) treat a mixture of level two and three patients comprising elective admissions following major surgical procedures and emergency surgical, medical and haematology-oncology admissions. With active chemotherapy and bone-marrow transplantation programmes within the Trust, immunosuppressive and immune mediated complications are regularly encountered. The specialist nature of the Trust also requires that the units double as respiratory, coronary and renal high-dependency units for our patients.

In keeping with national standards and guidelines, active programmes of evolution and modernisation are underway in the critical care unit with the development of evidence-based protocols for the management of severe sepsis, nutrition, ventilation, renal replacement therapy and infection control. Sub-specialist interests are being developed within the ICU team. Weekly multi-disciplinary team meetings are undertaken to discuss and decide upon best courses of care and treatment for our patients and provides a forum for regular morbidity and mortality reviews. Development is also occurring in the recording and analysing of our patient care and outcome data and we are introducing a programme to benchmark our care against other comparable units nationally and internationally.

Senior medical cover is provided by seven intensive care consultants who undertake on-call duties on a weekly or split week roster. They provide dedicated cover to the unit undertaking morning and evening ward rounds. Junior medical cover is provided by Specialist Registrars.
(SpRs), Trust Grade Doctors or Fellow in Anaesthesia and ICM for each site. Foundation Year 2 (FY2) trainees are also attached to the Chelsea critical care unit. Night-time cover is provided by the SpR in Anaesthesia and/or ICM and a FY2 with the on call Consultant. There is a 24/7 nurse led outreach service on the both sites.

There are 2 “treat and transfer” beds in Sutton which provide cover primarily for haematological oncological emergencies, with patients being transferred up to Chelsea should they require level 3 care. Communication with Sutton is augmented by the presence of webcams and teleconferencing facilities at both sites.

**Preassessment**
There is an Anaesthetic lead pre-assessment service with 2 sessions per week at Sutton and 5 sessions at Chelsea. We also run a preoperative Cardiopulmonary Exercise Testing (CPET) service.

**Major Surgery, Perioperative Medicine, and Research Fellowship**

| Managerially Accountable to: | Dr M Hacking (Lead Clinician for Anaesthetics) |
| Professionally Accountable to: | Dr R Kasivisvanathan (for Perioperative Medicine) |
| | Dr S Jhanji (for Research) |

This is a substantive 6-month post, initially extendable to 12 months subject to satisfactory internal review, open to all post-fellowship anaesthetic specialist registrars who wish to develop a further interest in anaesthetic preassessment and cardiopulmonary exercise testing (CPET). The trainee would be expected to have 2 sessions per week in high-risk preassessment clinics, including training in CPET, a minimum of 1 major cancer surgery list per week, and an additional on-call commitment based in Chelsea or Sutton. This would add up to an average 48-hour week.

The trainee would also have the opportunity to be involved in recruitment and consent to all ongoing multicentre trials, including “Preoperative intravenous iron to treat anaemia in major surgery” trial (PREVENTT), “Prevention of Insufficiency after Surgical Management” trial (PRISM), and “The BALANCED Anaesthesia Study”.

The post-holder will be encouraged to pursue a Diploma in Perioperative Medicine (University College London), and the post can be extended to 2 years to enable completion of the MSc in Perioperative Medicine, subject to satisfactory review, should they so wish. Full financial support towards the qualification will be available.

The post is currently considered “Out of programme experience” and taken in addition to their specialty training. Some of the programme can be recognised towards training if applied for prospectively.

**Specific objectives and opportunities of this post:**

Opportunities include, but are not limited to, the following:

**Education**

1. **Opportunity to undertake Diploma or MSc in Perioperative Medicine (fully funded)**
2. In-house training on how to perform and interpret CPET, followed by **funded attendance on a CPET training course**.
3. Opportunities to be involved in education for preassessment, theatres and ICU nursing staff, and ODP training.
4. Opportunity to be involved in, facilitate and teach on the weekly registrar teaching.
5. Opportunity to teach and run courses including Basic Assessment and Support in Intensive Care Course, and Critical Care Transfer Course.
6. The post-holder would be expected to participate in Continuing Medical Education to the level required by the Royal College of Anaesthetists.

7. Fully funded Good Clinical Practice Training Course (international ethical, scientific and practical standard to which all clinical research training is conducted).

Research
1. Recruit and consent major surgery patient to ongoing multicentre trials
2. To be involved in:
   - Ethics proposals
   - Data Collection
   - Abstract Writing
   - Presentation
   - Publication
3. Opportunity to be involved in Basic Science research, in conjunction with the Institute of Cancer Research, if appointee interested.

Audit
1. The appointee will lead on various preassessment projects, to be agreed with Dr R Kasivisvanathan.
2. The appointee will take part in regular Department, Academic and Audit meetings.

Anaesthesia
1. Experience in major surgery cases, including Sarcoma, Urology, Gynae-oncology and Gastro-intestinal.
2. Preassessment including use of CPET as a risk assessment tool. Initially fully supervised by consultants, but progressing to independently running and interpreting CPET tests
3. Assisting with Patient Blood Management Programme
4. Funded attendance on The Royal Marsden TCI Practicum

Management
1. Attend, and participate in appropriate board and hospital meetings.
2. Attend preassessment MDT meetings when possible
3. Funded attendance on the Royal Marsden Management Course

Additional Requirements
1. The appointee will be expected, with colleagues, to provide a first class anaesthetic and critical care service.
2. Clinical duties include, but are not limited, to the day to day provision of high quality anaesthetic and medical care to patients in theatres and the ICU and preassessment of patients in the Preassessment Centre.
3. The post holder is expected to be familiar with and adhere to the Trust’s policies on Clinical Governance, Confidentiality and Infection Control.
4. The post holder is required to act in accordance with the General Medical Council’s “Code of Professional Conduct”.
5. The appointee will be expected to adhere to the Trust’s values and behave in a way that reflects these.

Annual Review

The post-holder will have a six-monthly appraisal with the head of department and with his/her educational supervisor. In addition it is anticipated that the post-holder will meet at least monthly with his/her supervisor to review the progress of their audit/research work.
General Information

Access to Computer System
Computer data should only be accessed if this has been authorised and is necessary as part of your work. Unauthorised access to computer data or helping others to access such data will result in disciplinary action being taken in accordance with the Trust’s disciplinary procedure and may lead to dismissal.

The Post-holder’s attention is drawn to the Data Protection Act 1984 and the Computer Misuse Act 1990.

Confidentiality Clause
All information concerning patients and staff must be held in the strictest confidence and may not be divulged to any unauthorised person at any time, unless to do so is in the best interest of the individual. In this instance, the post-holder should be appropriately advised by a Senior Manager. A breach of confidentiality will result in disciplinary action being taken in accordance with the Trust’s disciplinary procedure and may lead to dismissal.

Safety
The post-holder has personal responsibility for safety as outlined in the Hospital’s Health & Safety Policy and the Health & Safety Work Act 1974.

Smoking
The Trust has implemented a No Smoking policy, which applies to all staff.
## EMPLOYEE SPECIFICATION

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<tr>
<td>FRCA or equivalent</td>
<td>Experience, or understanding of the UK health care system</td>
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<td>GMC registration</td>
<td>Experience working in the Oncology environment</td>
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<td>ALS current certification</td>
<td>BSc, B Med Sc or MSc</td>
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<td>Experience in Intensive Care Medicine</td>
<td>An interest in peri-operative medicine, preassessment and/or major surgery</td>
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<td>Paediatric anaesthesia experience</td>
<td>APLS or PILS current certification</td>
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<td>A strong work ethic with an ability to systematically progress clinical, research and audit tasks in collaboration with a consultant supervisor</td>
<td>Previous work in an academic environment with basic laboratory skills and the motivation and drive to initiate, work through, and complete a scientific research project under supervision</td>
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<td>The ability to collaborate and communicate effectively with patients, relatives and colleagues and work well as part of a multi-disciplinary team across management and clinical disciplines, grades and abilities.</td>
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