



DELIVERING
OUTSTANDING
CARE AND
EXPERIENCE



RECRUITING,
DEVELOPING AND
RETAINING OUR
WORKFORCE



AN ANCHOR
IN OUR
COMMUNITIES



WORKING TOGETHER
WITH LOCAL HEALTH
AND SOCIAL
CARE PROVIDERS



DELIVERING
LONG-TERM
SUSTAINABILITY



Information pack for the post of
CONSULTANT CLINICAL ONCOLOGIST
UROLOGY/BREAST
Cancer Clinical Business Unit
Division of Medicine

February 2024



GOOD TO
OUTSTANDING



Welcome from Chief Executive Hannah Coffey

Hello and welcome to our Trust! I am delighted that you are considering our organisation as a place to work.

This is a really exciting time for our patients and staff as we work with our local health system partners across Cambridgeshire, Peterborough and South Lincolnshire to deliver some key development projects that will shape the care we provide for future generations within the 900,000-strong catchment we serve. As well as building a new hospital at Hinchingsbrooke and redeveloping our sites at Peterborough and Stamford to better meet the needs of patients, we are investing in a Trust-wide electronic patient record system and harnessing digital technology within our diagnostic services to enhance the quality and speed of diagnosis and treatment.

It's a great time to be joining TeamNWAngliaFT where we truly value the health and wellbeing of our staff and encourage our leadership team to empower their teams to be the best they can be, to help them develop in their careers and, at the same time, ensure our patients can experience good quality care by people who are dedicated to serving their health needs.

If you are looking to develop your career in an environment that's primed for organisational change, where you can actively contribute to the quality improvements we are making for our patients and staff, then look no further for your next role.

A handwritten signature in black ink that reads "Hannah Coffey". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Hannah Coffey
Chief Executive Officer

Section 1 - Job Description

JOB TITLE	Consultant Clinical Oncologist – Urology/ Breast
GRADE	Consultant
HOURS OF WORK	10PA
DEPARTMENT	Oncology Department
BASE	Peterborough City Hospital with cross site working at Hinchingsbrooke Hospital
RESPONSIBLE TO	Divisional Director
ACCOUNTABLE TO	Chief Medical Officer

Background and Context

North West Anglia NHS Foundation Trust was formed in April 2017. We run three acute sites Peterborough City, Hinchingsbrooke and Stamford and Rutland Hospitals. In addition, we deliver outpatient and radiology services at Doddington Hospital, the Princess of Wales Hospital, Ely, and North Cambridgeshire Hospital, Wisbech.

We deliver acute care services to a growing catchment of approximately 850,000 residents living in Cambridgeshire, Lincolnshire and the neighbouring counties of Norfolk and Bedfordshire.

Our cancer unit opened in 2010 in the then new Peterborough City Hospital with a day unit, dedicated haematology and oncology ward and cancer OPD. Our Radiotherapy Unit opened in May 2011 with two Linear accelerators, and we opened a third in early 2017 and expanded our RT catchment area to offer more local patients' radiotherapy. As a trust we also actively participate in research with a dedicated research department who work closely with the cancer team with some of these projects.

At our Hinchingsbrooke Hospital site, we have the Woodlands Centre where there is a Chemotherapy Day unit with 17 chairs and Haematology and Oncology clinics are run from this unit. Other cancer treatments and chemotherapy are also run from our Stamford hospital site.

Job Summary

The Oncology department at North West Anglia Foundation Trust is looking for a highly motivated and dynamic consultant to join our team in providing high quality patient care, predominantly in Urology, and support for Breast is desirable, however, we would consider a candidates specialist interest.

The role includes working at our two main sites at Peterborough City Hospital and Hinchingsbrooke Hospital, with the additional consideration of a day at Cambridge University Hospital, and again any specialism would be considered.

The new post holder would treat urological cancers, and breast cancers (SACT and Radiotherapy) in collaboration with existing Clinical and Medical Oncology consultant colleagues. There could be flexibility in oncological sites to accommodate the successful candidate's interests.

The allocation of time would be approximately urological cancers 0.7, Breast 0.3 although there may be some flexibility required dependent on departmental workload. These tumour sites will continue to be covered by existing Clinical Oncologists and Medical oncologists supported by relevant Clinical Nurse Specialists allowing mutual support and equitable allocation of duties.

Team working is strongly encouraged, and it would be expected that there is representation at the weekly relevant multidisciplinary team (MDT) meetings and scheduling a weekly clinic on an alternate day/time to the existing clinics to enable patient choice and the workload to be shared.

The out-patient clinics are co-located with the Day Unit, Radiotherapy Unit and in-patient ward allowing convenient planning and review of chemotherapy and radiotherapy patients.

The appointment will be full time employed by North West Anglia NHS Foundation Trust (NWAFT). Any consultant 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 on a personal basis in consultation with consultant and managerial colleagues.

Applicants will be expected to be members of the Royal College of Physicians or have equivalent experience and training and must be fully registered and licensed to practise with the General Medical Council.

The appointee must be on the GMC's Specialist Register prior to taking up the appointment. Specialist Registrars who have successfully completed all parts of their training must be listed in the specialist register within six months of the appointment committee.

Main Duties and Responsibilities

Principal elements of the post will be:

1. To work with NWAFT colleagues to strengthen existing Urological and Breast cancers.
2. To develop the Trust's strategy in partnership with the chair of the Trust's multidisciplinary team (MDT) meetings leads' and to be an active participant in the Urology, & Breast cancers MDTs.
3. Provision of systemic anti-cancer treatment for patients with urological & breast cancers.
4. Provision of Radiotherapy to patients with urological and breast cancers.
5. To develop and participate in collaborative initiatives, studies and trials regionally, nationally and internationally, having a high regard for clinical effectiveness and to the practice of evidence-based medicine.
6. To collaborate with colleagues at the Regional Cancer Centre (Cambridge University Hospitals Foundation Trusts (CUH), Cancer Units and other agencies to ensure optimum quality of care for cancer patients including referring patients to the phase I trials unit at CUH.
7. Provision of a comprehensive Oncology service, in collaboration with other Oncologists, including inpatient care and referrals and outpatient referrals and treatment. This post will enable additional consultant ward rounds to enable a consultant ward rounds to occur at PCH daily.
8. Active participation in clinical audit, continuing professional development and research as appropriate. There is access to a study leave budget for appropriate CPD activities. The post holder will be expected to contribute to the Trust and CBU Clinical Governance processes including the dedicated monthly half days.
9. Out-of-hours participation in consultant on-call rota comprising telephone advice for Peterborough City Hospital on a 1:9 basis (or 1:10 once all new posts filled). It is expected that the on-call consultant will do a remote ward round review daily at the weekends. This has been facilitated by the introduction of electronic inpatient notes. Oncology patients are admitted at this time under the care of the consultant physician on-call and treated according to protocol. The on-call arrangements may change over time with the implementation of the 7-day working initiative. There will be consideration for taking time off in lieu.
10. Professional supervision and training of junior medical staff. Education of junior staff in the department is encouraged and there are opportunities to act as clinical and educational supervisors. This may include a medical oncology spR who are currently on rotation from CUH and under clinical supervision whilst in post.
11. Responsibilities for carrying out teaching, examination and accreditation duties as required and for contributing to undergraduate, postgraduate and continuing professional development activity, locally and nationally.

12. To collaborate with colleagues to promote the collective aims of the directorate.
13. To be aware of managerial and budgetary considerations, work within these constraints and assume responsibilities where appropriate. To recognise his/her responsibility towards achieving the Trust's cancer targets and patient rights. To ensure that all patients get treated equally, fairly and as quickly and effectively as possible, escalating concerns should this not be the case.
14. NWAFT has an active research programme and is nationally recognised for its cancer trials. This post would be expected to continue promoting Clinical Trial development and recruitment. It would be expected that this post would take a lead in clinical trials related to urology and breast but may also assume local PI responsibilities for clinical trials in urology, and breast if the post-holder wishes.

The following arrangements will be made:

- i. The post holder will have access to in-patient beds within the Cancer Unit at Peterborough City Hospital (PCH).
- ii. The post holder will work in partnership with the other oncologists and share junior staff. A medical oncology SpR is currently allocated to NWAFT with clinical supervision under one of the current Medical Oncology Consultants.
- iii. Clerical and administrative support for the post holder will be provided by the team of Oncology secretaries. Office accommodation (with a computer and IT facilities) will be provided within the Cancer Centre.

Starting date

A mutually agreeable date will be arranged on acceptance of the post, but it is hoped that the post holder will start as soon as possible.

Job plan

A formal job plan will be agreed between the appointee and the Clinical lead for cancer/Divisional Director for the Cancer CBU. This will be signed by the Medical Director and will be effective from the commencement date of the appointment.

The Job Plan may be reviewed after three months. The Job Plan will be a prospective agreement that sets out a consultant's duties, responsibilities and objectives for the coming year. It should cover all aspects of a consultant's professional practice including clinical work, teaching, research, education and managerial responsibilities. It should provide a clear schedule of commitments, both internal and external. In addition, it should include personal objectives, including details of their link to wider service objectives, and details of the support required by the consultant to fulfil the job plan and the objectives. There has recently been a

change in workload patterns in the department so the provisional timetable set out below may be subject to some change depending on departmental work patterns.

Provisional assessment of Programmed Activities in Job Plan

For a full-time contract:

Direct Clinical Care (<i>Includes clinical activity, clinically</i>)	8.5 PA's on average per week
Supporting Professional Activities (<i>includes CPD, audit, teaching and Research</i>)	1.5 PA's on average per week
Total	10 PAs

Clinical Governance meetings are currently held bimonthly. Attendance and participation in these sessions is expected by the post holder.

Programmed Activities

It is expected that there will be the need from time to time to amend the job plan. It is expected that the successful candidate will be prepared to negotiate such changes for the benefit of clinical service delivery and the CBU as a whole. As we continue to improve cancer care by working collaboratively across the Trust, some form of joint working (e.g., joint MDT/ cross site clinic working) may be required in the future.

Other Duties

The successful candidate will be required to undertake managerial duties associated with the care of their patients and the running of the Medical Division.

The trust supports the requirements for CPD as laid down by the Royal College of Radiologists 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.

A mentorship is available, and all new consultants are encouraged to make use of this service.

An adequately equipped shared office will be provided, including telephone and IT facilities. The post holder will share secretaries and administration staff with the other consultants. The administration team has been increased in conjunction with the new consultants from the expansion business case.

The numbers of new patients predicted to be seen would be likely to be approximately 200.

Teaching and Audit

NWAFT has a long-standing commitment to undergraduate medical education, taking students regularly from Leicester and Cambridge Universities, and sometimes from other areas. The post holder will be expected to take part in this teaching. The department also has an active postgraduate programme particularly aimed at the Senior House Officers and the MRCP.

NWAFT is one of eight acute hospital trusts within the Norfolk, Suffolk and Cambridgeshire area designated as a Postgraduate Medical Education Centre. An active programme of postgraduate education is provided on site.

Research

The trials unit at NWAFT has a very strong record for clinical trial recruitment in the region and is a leading recruiter for several national/ international studies. There are also several commercial studies ongoing. Trials are mostly phase III and phase IV with limited potential for pharmacokinetic assessments. There is, however, a strong link with the local phase I unit at CUH for referral of patients. The unit is part of the Clinical Research Network Eastern and there are eight trials team nurses (part or full funded by the research networks), a trials radiographer and two trials administrator and an assistant in post. Some posts are funded by our internal Research Fund. Research is strongly encouraged, NWAFT has a fully functioning R&D committee, which meets monthly and reviews all clinical trials. It also conducts in-house audits of clinical trials. The unit has recruited strongly to many recent trials and the breast and lung teams are particularly active.

General Conditions of Employment

The appointee will enjoy terms based on the nationally agreed Terms and Conditions of Service for Consultants (England) 2003.

The successful candidate will be required to live within 20 miles of the Trust or 30 minutes travelling time when on-call.

The appointee will be expected to cover for colleagues' absence from duty on the basis of mutually agreed arrangements with the Department and with the Employing Trust. This is arranged by mutual agreement of consultant colleagues and approval of the Clinical Lead, in accordance with standard Trust and NHS regulations. It is essential that eight weeks' notice is given to allow for proper planning and prevent cancellations of patients' appointments / surgery. This includes all forms of leave. Leave is granted in line with Trust Policy and Specialty protocol.

The Trust requires the successful candidate to have and maintain full registration with the General Medical Council and to fulfil the duties and responsibilities of a doctor as set down by the General Medical Council.

All appointments are subject to satisfactory Occupational Health Clearance being obtained and a satisfactory DBS check.

The appointment is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation Act 1974 (Exemptions) Order 1975. Applicants are not entitled therefore to withhold information about convictions which for other purposes are 'spent' under the provision of the Act, and in the event of employing any failure to disclose such convictions could result in dismissal or disciplinary action by Trust. Any information given will be completely confidential and will be considered in relation to an application for positions to which the Order applies.

Subject to the provisions of the Terms and Conditions of Services, the appointee is expected to observe the Trust's agreed policies and procedures, drawn up in consultation with the profession on clinical matters, and to follow the standing orders and financial instructions of the Trust.

In particular, where the appointee manages employees of the Trust, he/she will be expected to follow the local and national employment and personnel policies and procedures. The appointee will be expected to make sure that there are adequate arrangements for hospital staff involved in the care of patients, to be able to contact them when necessary, and to observe the current local arrangements for advising details of leave.

Compensation and Benefits

Consultants are remunerated according to nationally agreed NHS pay scales and terms and conditions. This post also has the additional benefit of a £7000, signing on bonus. With fifty percent given at the start of employment and the remainder after 6 months in post, with an expectation of a 12-month commitment to the role thereafter.

Newly appointed consultants may be eligible for reimbursement with the whole or part of the cost of their removal expenses, provided that the removal is necessary to comply with North West Anglia NHS Foundation Trust's requirements concerning the place of residence.

Section 2 - The Department and Division

Divisional Structure

Following the formation of North West Anglia Foundation Trust in April 2017, our operational functions across our hospitals merged to form five clinical divisions:

- Division of Medicine
- Division of Urgent and Emergency Care
- Division of Surgery
- Division of Family and Integrated Support Services
- Division of Maternity, Gynaecology and Breast Services

The clinical divisions are key to our service delivery, and they are led by a triumvirate comprising a Divisional Director, Divisional Nursing Director, and Divisional Operations Director.

The Department of Oncology

The Oncology medical staff at PCH currently comprises eight consultants; seven are employed by NWAFT and one is employed by CUHFT (Addenbrooke's Hospital) via a service level agreement. There are three Medical Oncologists and five Clinical Oncologists, and all common tumour sites (including breast, prostate, lung, upper and lower GI tract, gynaecology) are treated at PCH. Other tumour sites such as head and neck cancers and CNS tumours are referred to Addenbrooke's Hospital, but these pathways may well be reviewed in due course. Rarer tumours (including Paediatrics and Sarcoma) are referred to tertiary centres according to the formalised clinical pathways within the East of England Strategic Cancer Network.

Systemic anti-cancer therapies are administered to patients in our spacious day unit. There are outreach chemotherapy units also.

The Trust has procured three Varian Truebeam Dual Energy Linear Accelerators with advanced imaging and rapid arc IMRT capability, and an Xstrahl Superficial treatment machine and a Cannon Wide bore CT Simulator.

The IT systems to be used alongside the fixed equipment include a: Treatment Planning System (Varian Eclipse), Virtual Simulation System (Prosoma) and an Oncology Management System (Varian Aria). We have 4D CT capability, SABR capability and gating facilities.

The radiotherapy service has recruited high quality radiographers and physicists, capable of developing and working to agreed protocols, and with the ability to take forward the technical radiotherapy and patient centred service.

The team is led by professional Heads of Service who work closely with the Medical, Management and other healthcare professionals to deliver a world class radiotherapy service.

Clinical Business Unit

The management structure of the Trust is the division of departments into Clinical Divisions (CD) with corporate support. The operational structure of each CD consists of a Divisional Director, a Divisional Operational Director and Divisional Nursing Director who assume operational and budgetary responsibility for all CD staff. They are also responsible for meeting national waiting and financial targets and ensuring most efficient use of resources within the CD. Each CD reports to the corporate body, Directors and Board via the Chief Operating and Executive Officers, in keeping with NWAFT's status as a Foundation Trust.

The Cancer CBU lies within the Medical Division and cancer CD comprises Medical and Clinical Oncology, Clinical Haematology, Day Centre and Palliative Care.

There are monthly Management and Governance meetings.

The unit is integrated with patients of all four disciplines being treated alongside one another in the in-patient area and day unit.

The Cancer Unit is a dedicated facility and is opposite the Robert Horrell Macmillan Day Centre (where the cancer wellbeing service is situated). There is a 20 bedded in-patient facility with a dedicated side-room for Teenage/Young Adult Cancer, an out-patient area comprising seven clinic rooms and four radiotherapy assessment rooms. The day unit has 26 chairs and three beds for administration of chemotherapy and supportive treatments, (scalp cooling is available).

A number of outreach services have been established at Stamford Hospital and Spalding Hospital, the aim of which are to provide chemotherapy and routine haematology procedures, such as blood transfusions, closer to home. There are increasing cross site links and sharing of resources with the Hinchingsbrooke Woodlands Unit to offer efficient care to our patients.

The establishment of the Peterborough Community Cancer Team has improved local nursing care offering some phlebotomy, assessments and treatments in the patient's own home.

Medical Staff

There are currently five consultant clinical oncologists (1 of whom has sessions at Addenbrookes Hospital), and three Consultant Medical Oncologists, four Palliative Care consultants, (who also have sessions at the Sue Ryder Hospice) and seven Haematologists.

There is a visiting specialist registrar (SpR) in Medical Oncology and a SpR in Haematology based at PCH. An application has been made for a specialist training post in Clinical Oncology. There is one FY1 and three F2/ST posts allocated to the Cancer Unit together with a physicians' associate and a further Trust doctor and physicians' associate allocated to the day unit.

Nursing staff

The ward and day unit nursing establishment is led by the Matron for Haematology and Oncology, and the Lead Nurse for Cancer manages the CNS and AOS team, with Palliative Care team under the management of the Lead palliative and end of life nurse. Chemotherapy is administered by both in-patient and day unit nurses. At present there are Clinical Nurse Specialists (CNS) in: Colorectal cancer, Upper GI malignancies, Urological cancer, Lung Cancer, Gynaecological cancer, CUP and Haematology. The posts of the Skin cancer CNSs sit within the Head and Neck CBU. Hospital Specialist Palliative Care CNSs and Community Macmillan nurses are members of the Cancer unit. Plans are underway to expand the CNS establishment. The Acute Oncology Nursing team has been set up provide AOS cover to patients during the working week but there is additional 24h cover provided by the oncology/haematology ward.

There is also provision for nurse led chemotherapy toxicity clinics and some nurse-led clinical clinics.

Radiographers

We have an enthusiastic team of radiographers. We encourage radiographer lead review of patients on treatment and a consultant radiographer who takes up some of the palliative RT workload.

Multidisciplinary Teams

There are strong multidisciplinary teams in all cancer specialties with dedicated administrative support. The multidisciplinary meeting room has a video link with other hospitals in the East of England Cancer Alliance, so video-conferenced meetings are arranged in some specialties. In some MDTs, such as hepatobiliary and lung, visiting surgeons attend the Peterborough MDT in person to ensure an integrated service. There are joint MDTs with Hinchingbrooke hospital for some specialties and increasing links are planned.

Informal Enquiries

If you wish to discuss the post informally or arrange a visit, please contact: Dr Abigail Hollingdale Clinical Lead, tel 01733 673185 or Samantha O’Herlihy Operations Manager on 01733 67790/ 07562 434652

Section 3 - Working at the Trust

Our Values

Our Trust Values highlight the core principles and ideals of our Trust and underpin everything that we do. They establish the kind of people we want to be, the service we hope to provide and how we interact with our stakeholders and community.

The Values were created and selected by members of the public, patients and our staff, and highlight the principles we believe are the most important. They steer the decisions we make and guide the behaviour of our Trust family so we can accomplish our Vision.

We regularly measure ourselves against these Values, at every organisational level, so we can identify how we are living them and where we need to make improvements. The Trust board will monitor and review how the Trust performs against the values regularly, to ensure we provide the best possible patient care.



Teaching programme

There is a strong commitment to education from a departmental and organisational level, and the appointee will be expected to undertake teaching.

There is an active Medical Education Centre with seminar rooms and a lecture theatre, and an on-going programme for senior and junior medical staff organised by the Clinical Tutor and the Medical Education Department.

Continuing Professional Development (CPD)

There is dedicated support for CPD within the Trust, under the direction of the Medical Director, Clinical Tutor, and Specialty Tutors.

All non-training grade medical staff are required to undertake CPD to fulfil the requirements of revalidation.

Senior medical staff have an entitlement to study leave of 30 days in a three-year period and the current study leave budget allowance is £700 per annum per person.

Clinical Library

The Trust has clinical libraries. The Library Services Manager and assistants can support medical staff in conducting literature searches via MEDLINE and accessing books and journals.

Research and Development (R&D)

The Trust actively contributes to research in the NHS and has an extensive research portfolio covering 28 of the 30 National Institute for Health Research (NIHR) clinical specialties. The Trust is currently recruiting to over 160 NIHR Portfolio research studies and is set to recruit over 2,000 participants during 2017-18.

A key metric in assessing R&D performance is a Trust's Value for Money (VFM) score. At present NWAngliaFT has the best VFM score of any acute trust within CRN Eastern and is third in overall study recruitment.

Principal Investigators are supported by an R&D Department encompassing both clinical and non-clinical staff. With over 60 members of the team the department provides end-to-end research support throughout the study life cycle, from protocol development through to delivery and study closedown. The growth of R&D remains a key objective for the Trust as it actively promotes the growth of its sponsored research portfolio.

Clinical Quality Assurance

The appointee will take an active part in clinical audit and clinical governance.

The appointee will ensure that they are up to date with mandatory and statutory training requirements as required by the Trust and or external organisation.

There is a wide-ranging clinical audit programme across many specialties within the Trust supported by specialist staff.

The appointee will ensure data collection and processing undertaken is consistently accurate and timely and complies with the Trust Data Quality Policy and Information Governance procedures.

The Trust is developing several acute care pathways, and is working towards a system of integrated care, and the appointee will be expected to contribute to and support these.

Other

To comply with the roles and responsibilities as defined in the Trust's Health & Safety Policy.

To be responsible for safeguarding and promoting the welfare of children and adults by undertaking the appropriate level of training in accordance with the safeguarding policy training strategy and being aware of and working within the Trust's safeguarding policies.

Ensure all data collection and processing undertaken is consistently accurate and timely and complies with the Trust Data Quality Policy and local procedures.

Undertake any other similar duties in line with the key purpose of the job.

Act in accordance with Trust policies and GMC guidance regarding 'Confidentiality: good practice in handling patient information' so that patient confidentiality is maintained both in terms of patient's electronic and paper records, and when holding conversations about and with patients in appropriate environments.

Infection prevention is of paramount importance to the safety and wellbeing of all our patients. The Infection Prevention and Control Team use national and local guidance and policy to formulate Infection Prevention Policy and Procedure documents. It is the responsibility of all Trust employees to comply with the Infection Prevention and Control Policy and Procedure documents. Compliance with the relevant documents will be assessed during appraisal.

The person appointed will be indemnified by the Trust for all duties undertaken as part of his/her contracts of employment. He/she is encouraged to take out adequate defence cover as appropriate to cover him/her for any work which does not fall within the scope of the Trust's indemnity scheme.

As a member of staff, you will automatically be classed as a staff member of the North West Anglia NHS Foundation Trust - this means that you will be able to vote for a staff governor to represent you at the Trust's staff council and on the Trust's Council of Governors, or indeed stand to be a Staff Governor.

