European School of Soft Tissue Sarcoma Surgery Host institutes form

Contact Name: Myles Smith, Dirk Strauss, Andrew Hayes

Name of Hospital/Institute/Cancer Centre: The Royal Marsden NHS Foundation Trust

The Royal Marsden is recognised world-wide for the quality of its cancer services. The Trust's strategic aim is to achieve excellence in cancer treatment and diagnosis, through partnership and collaboration. The Royal Marsden in association with the 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 its work on drug development. The hospital achieved the international quality standard ISO 9001 for radiotherapy in 1996 and for chemotherapy in 2003. It was recognised as one of six centres of excellence in the Government's NHS Plan and has achieved four national Charter Marks for all its services, the most recent awarded in 2005. The Royal Marsden has consistently been awarded three stars and more recently double Excellent rating in the last two years in the NHS performance indicators, rating it among the nation's best in terms of clinical quality and patient care. The Royal Marsden and The Institute of Cancer Research form the United Kingdom's only designated Biomedical Research Centre for Cancer – awarded in December 2006 by The National Institute for Health Research (NIHR).

As a leading Cancer Centre the Trust has close working relationships with many Cancer Units and other Cancer Centres. Predominantly the Trust's workload is from within the London Cancer Alliance but the Trust is unique in having a high out-of-area national referral rate for rare cancers, recurrent disease and treatment-related problems.

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Website: http://www.royalmarsden.nhs.uk/pages/home.aspx

Name of responsible person/tutor for the fellowship: Mr. Myles Smith, Mr. Dirk Strauss

Fellowship opportunities:
☐ Clinical ☐ Research ☐ Both

What is the position held by the surgical fellow during his/her traineeship? Clinical fellow

Are fellows observers or active in their positions?

Active

If active, please specifiy:

The successful applicant will be in charge of the day to day administrative and clinical running of the unit, working with a Core Surgical Trainee (equivalent to Senior House Officer, on rotation for Lower Surgical Training) and a Junior Registrar (Higher Surgical Trainee) both from the London Deanery training program, as well as a shared Senior House Officer covering patients at the Sutton branch. Commitments and clinical activities include: daily ward rounds and management of inpatients, attendance to theatre with opportunities to assist as well as perform procedures as appropriate,

Outpatient clinics, Multidisciplinary meetings, as well as administrative responsibilities such as maintaining the surgical database, presenting at morbidity and mortality meetings.

In addition, the Unit leads and is involved with a vast research programme with ample opportunities for the Clinical Fellow to complete own projects and publications.

Our team consists of 3 consultant staff surgeons, with a Senior House Officer (Lower Surgical Training) and a Specialist Registrar (Higher Surgical Training), and the Clinical Fellow.

How many fellows can you cover in your department and what is the optimal duration of the fellowship? 1-2 fellows, for up to 1 year, with some flexibility. Elective placements are also possible.

What kind of fellow would you prefer? years of surgical education, research interest, etc:

A clinical fellow with an interest in surgical oncology, specifically sarcoma and or melanoma. This post is intended for surgical trainees who wish to dedicate further time to training in specialist surgical oncology. For this reason this post is likely to be most suitable for those who are at the latter stages of or have completed their Specialist Training Programme.

Supervision	o <u>n</u>
>	Can the trainee participate in operations with his/her tutor?
	☐ No ☐ Sometimes ☑ Frequently
>	Can the trainee participate in outpatient clinics with his/her tutor?
	☐ No ☐ Sometimes ☒ Frequently
>	Can the trainee participate in the hospital continuing medical education programme?
	☐ No ☐ Sometimes ☑ Frequently
Education	
>	Do you have weekly continuing education?
	x No Sometimes Frequently
>	Topic of the programme?
Multidiscij	<u>olinarity</u>
>	Does the trainee have the opportunity to participate in interdisciplinary meetings with discussions concerning treatment of the patients?
	No ☐ Sometimes ☐ Frequently 🗵

Research facilities

our Skin Cancer MDT.

We discuss approximately 50 cases per week referred to the Sarcoma unit, in both a clinical and pathology multidisciplinary tumour board meeting. We discuss approximately 50 cases per month in

>	Are there research	activities in the ho	spital?	
	No 🗌	Some	Many 🗵	
>	If yes, does the train	nee have the oppo	ortunity to participate in these acti	vities?
	Yes 🛛 No 🗌			
increasing of Sections, A grouped intresearch, c screening, r from externa 2003-2007	emphasis on trans cademic Departme to 9 distinct theme cancer genetics, canolecular pathological sources and the	slational research. Ints, and Clinical I Is: paediatric onco Incer therapeutics I/y, radiotherapy and I/y grant success rate	the Trust are extensive and con Research is carried out in a Jnits, and the research in the joulogy, breast cancer, cancer dia the haematological cancers, health doncology. The majority of research for The Institute is outstanding, from peer-reviewed grants to re-	number of research int institution can be agnosis and imaging thcare research and earch funding comes the average between
The Breakthroug Trust, Prost Campaign, commercial The Royal N As a from the Hig direct recog Research A	Institute is particular Breast Cancer, Late Cancer Charita Bob Champion Capartners collaborate Marsden include: Vea UK higher education Fungnition of The Instassessment Exercise	Leukaemia Resear ble Trust, Associa ncer Trust and to ing in drug develor ralis, Astex, Novation institution, The ding Council for Exitute's scientific exercise (RAE). The Institute ble (RAE).	s major sponsoring partners – Corch, the Kay Kendall Leukaemia tion of International Cancer Research of many other medical research of pment at The Institute and supported in the Institute and supported in the Institute and supported in the Institute receives substantial pengland (HEFCE) each year. This excellence, which is measured ute once again produced outstan biomedical research institutions were supported in the Institutions were supported in the Institution	Fund, The Wellcome earch, Breast Cancer charities. In addition, orting clinical trials at and AstraZeneca. ublic funding directly money is awarded in by the quinquennial ding research ratings
Bibliograph	<u>ıy</u>			
>	Is there a library in Yes ☒ No ☐	your hospital/instit	ute/cancer center accessible to th	e trainee?
Accommod	<u>lation</u>			
>			able for the trainee? MH, however we can assist in loc	cating accomodation.
≻W	/hat is the distance	from the Institute/0	Center: n/a	
≻Is	there public transp Yes 🏻	ortation from the a No □	ccommodation venue to the Instit	ute/Center:
	the District		he South Kensington Tube Statio lilly lines, as well as having easy a stands.	
≻Is	there Internet facili	ties in the accomm	nodation venue? n/a	
Financial s	<u>upport</u>			
>	Does your Hospital	/Institute/Cancer C Yes 🗵	center offer financial support to the	e trainee?
	A full salary is paid funded.	to clinical fellows,	whereas elective placements will	have to be self-

If yes, what is the amount of the financial support provided and what is this for i.e. accommodation, meals? n/a

Salary at equivalent NHS scale according to year of training. There is a formal application process for our fellowship.

Information regarding the Institution/ Department

Department/Unit: Sarcoma and melanoma

Head of Department/Unit: Professor Ian Judson and Mr. Andrew Hayes

Speciality of the department: please define operations per week – neuro-endocrine cancer surgery (pancreas, thymus,...) Sarcoma and melanoma.

Number of Senior Consultants: 3 (with 4th scheduled to join Q4 2020)

Number of Consultants: as above

Number of residents: Our team consists of 3 consultant staff surgeons, with a Senior House Officer (Lower Surgical Training) and a Specialist Registrar (Higher Surgical Training), and the Clinical Fellow.

Number of beds:

The Royal Marsden NHS Foundation Trust comprises two units (169 beds at Chelsea and 184 beds at Sutton including paediatrics). Over 30,000 patients attend the Royal Marsden each year. The Trust employs 2300 staff, including 244 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 receiving referrals both nationally and internationally.

Number of operation rooms (specifically for Sarcoma): 2-3

Number of operations per day: 5-7, 3 lists/week

How many operations per year: The unit has a high surgical volume, with significant surgical involvement of the fellow and ample operative exposure for all trainees. For example, our fellow from July 2014-15 scrubbed for 201 sarcoma cases (47 RPS, 14 visceral

sarcoma, 20 laparotomy; 140 limb/girdle resections), 91 skin cancer cases (9 Isolated limb perfusions; 28 inguinal/ilioinguinal node dissections, 14 axillary node dissections; 7 laparscopic/open resections visceral metastases) and 131 other soft tissue or non STS/Skin cancer cases (Total 423).

Percentage of surgical oncology in the department per year: 80%, with some specialty specific benign cases (e.g. myxomas, fibromatosis)

Others please specifiy:

Approximately eight hundred new cases of STS are referred to the RMH every year and are treated by a multidisciplinary team. All new cases are reviewed at a weekly multidisciplinary meeting where management is discussed. This provides the Fellow with an unparalleled experience.

Surgical management included soft tissue tumours of the limbs and limb girdle, intra-abdominal and trunk. About 5% of these patients will require reconstruction of skin and soft tissue which is often performed with input from the Plastic Surgery team.

Similarly there is a multidisciplinary team managing patients with malignant melanoma. There will be ample opportunities to learn techniques of lymph node dissection, isolated limb perfusion and laser vaporisation of in-transit metastatic melanoma.

- RPLS 55-60 primary/year, STRASS II site
- MIS/Robotic approaches to sarcoma and benign retroperitoneal disease
- Regional melanoma treatments laser ablation, Isolated limb perfusion, injectables
- Melanoma Ilioinguinal/axillary node dissections
- DSCRT and cytoreduction

- Complex GIST
- Desmoid-type fibromatosis
- Pelvic and perineal tumours

Additional comments

The successful applicant will be in charge of the day to day administrative and clinical running of the unit, working with a Core Surgical Trainee (equivalent to Senior House Officer, on rotation for Lower Surgical Training) and a Junior Registrar (Higher Surgical Trainee) both from the London Deanery training program, as well as a shared Senior House Officer covering patients at the Sutton branch.

At any one time there are likely to be about fifteen inpatients in hospital between both sites. The Clinical Fellow is principally responsible for the daily management of all in-patients.

The unit has 3 all day theatre list a week at both sites of the hospital (Fulham Road and Sutton) as well as a minors list on alternating Mondays at the Sutton branch. The clinical fellow will be expected to attend lists at both sites, and internal arrangement are made between the senior clinical fellow and junior registrar to ensure appropriate and fair exposure to surgical procedures. Ad hoc lists occur frequently.

A typical all day list will involve surgery on about 5-7 cases with about 50% of cases being sarcoma, 30% melanoma and 20% benign cases. Major surgery with a requirement for CCU is undertaken on the Fulham Road site and intermediate and minor surgery is undertaken at the Sutton site. The senior clinical fellow has principle surgical responsibility for the Fulham Road surgery.

Theatre sessions:

- Mr Smith operates all day Tuesday at Fulham road.
- Mr Strauss operates alternately on Tuesday and Wednesday at Fulham Road.
- Mr Hayes operates on all day Wednesday alternating between Fulham Road and Sutton and half day Monday at Sutton.

Outpatient clinic commitments:

Mr Śmith and Mr Strauss (alternating weeks) have Monday morning surgical clinics at Fulham Road. Mr Hayes has a surgical clinic at Sutton every other Monday (alternating with his half-day theatre list). The senior fellow and junior registrar share these commitments between both sites as appropriate. All consultants also have a major Thursday afternoon outpatient joint clinic with other oncological specialties available. Friday morning the whole team attends the new referral clinic for suspected or confirmed sarcoma and melanoma patients. On average, 20 new patients are seen on a Friday morning.

Multidisciplinary Meetings:

Two Multidisciplinary team meetings for sarcoma are held weekly on Friday and fortnightly on Thursday lunchtimes. The melanoma meeting alternates with the Thursday sarcoma meeting.

The Fellow will have the opportunity of attending any of the other weekly meetings held at The Royal Marsden Hospital. These include a Friday morning breast audit meeting as well as a weekly hospital radiology meeting. Other units hold meetings where patient management is discussed and for a Fellow committed to surgical oncology, all of these will provide excellent training opportunities.

The fellow will administer the department journal club and sarcoma melanoma team teaching.

There are other busy surgical units at the hospital including a breast unit (five consultant surgeons), a Head/Neck Unit (five consultant surgeons), an upper gastro-intestinal (five consultant surgeons), colorectal unit (three consultant surgeons), Plastic Surgery (five consultant surgeons) and a urology unit (six consultant surgeons). The Fellow can interact freely with colleagues on the other surgical units gaining valuable clinical experience.

On Call

The post holder will participate on the general surgery registrar on call rota for the Trust. This covers both sites of the Royal Marsden and the Royal Brompton Hospital. The Royal Marsden has close ties with the adjacent Royal Brompton Hospital (specialist heart and lung hospital).

Education/Qualifications	How measured (application form, interview, test, etc)
Essential	Eligible for Registration with the GMC
	MRCS/FRCS or equivalent
Desirable	BSc/other related degrees/qualifications
Experience	
Essential	Completed three years of higher Surgical Training
Desirable	Experience in other related disciplines
Skills/Abilities/Knowledge	
Essential	Competent to work without direct supervision where appropriate
	Clear logical thinking, showing an analytical approach
	Appropriate level of clinical knowledge
	Shows awareness of own limitations
	Ability to prioritise clinical need
	Good manual dexterity and hand/eye co-ordination
Desirable	Demonstrates breadth of experience and awareness in and outside the speciality
Other Requirements	
Essential	Ability to organise oneself and own work
	Interpersonal skills



I, the undersigned, wish to express my interest in welcoming a young ESSO member for a fellowship in
surgical oncology in the Sarcoma and Melanoma Unit at the Royal Marsden NHS Foundation Trust for a
period of maximum weeks/months.
Date:
Name:
Signature: