

Northern & Yorkshire Training Interface Group fellowship post in Cleft Lip & Palate Surgery



Introduction

The fellowship programme is run through the Joint Committee on Surgical Training (JCST).

Fellowship posts are open to all higher surgical and where appropriate, non-surgical trainees, that meet the person specifications. Details of eligibility are found through the [JCST](#).

Any unit applying to host Training Interface Group fellows must have trainer representation from all parent specialties.

Applicant units are required to be able to deliver the TIG curriculum and adhere to the quality indicators (QIs). The curriculum can be found on the [ISCP website](#) in the curricula of the most relevant parent Specialties (as mentioned above) and the QIs are listed on the [JCST website](#).

The data included in the form below is an extract of the data submitted by the unit in their application to become a TIG unit.

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Unit Lead Trainers:

Name	
Peter Hodgkinson (Newcastle)	Alistair Smyth (Leeds)

Local Educational Provider (LEP)

Main hospitals/trusts involved with teaching (base units):

	Hospital/Trust A	Hospital/Trust B	Hospital/Trust C
Name of Trust	Leeds General Infirmary	Royal Victoria Infirmary	
Address of Trust	Great George Street Leeds LS1 3EX	Queen Victoria Road Newcastle upon Tyne NE1 4LP	
Contact + Telephone	0113 3925115	0191 282 0195	
Approved for training in: <i>List specialties for which unit has approval to train</i>	Cleft Oral and Maxillofacial Surgery Plastic Surgery Otorhinolaryngology	Cleft Head and Neck Hand Surgery Breast	

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Peripheral units (if to be visited by trainee):

	Hospital/Trust N	Hospital/Trust O	Hospital/Trust P	Hospital/Trust Q
Name of Trust	Bradford Foundation Trust	York Hospitals	Mid-Yorkshire Hospitals NHS Trust	Castle Hill Hospital
Address of Trust	Bradford Royal Infirmary Duckworth Lane Bradford West Yorkshire, BD9 6RJ	Wigginton Road York YO31 8HE	Pinderfields Hospital Aberford Road Wakefield WF1 4DG	Castle Road Cottingham Hull HU16 5JQ
Contact + Telephone	01274 542200	01904 631313	01924 541000	01482 875875
Approved for training in: <i>List Specialties for which unit has approval to train</i>			Oral and Maxillofacial Surgery Plastic Surgery Otolaryngology	

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	Hospital/Trust R	Hospital/Trust S	Hospital/Trust T
Name of Trust	City Hospitals Sunderland	University Hospital of North Durham County Durham and Darlington NHS Foundation Trust	James Cook University Hospital South Tees Hospitals NHS Foundation Trust
Address of Trust	Kayll Road Sunderland SR4 7TP	Darlington Memorial Hospital Hollyhurst Road Darlington County Durham DL3 6HX	The James Cook University Hospital Marton Road Middlesbrough TS4 3BW
Contact + Telephone	0191 565 6256	0132 538 0100	0191 282 0195
Approved for training in: <i>List Specialties for which unit has approval to train</i>			Cleft

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	Hospital/Trust U	Hospital/Trust V	
Name of Trust	Bishop Auckland Hospital County Durham and Darlington NHS Foundation Trust	Cumberland Infirmary North Cumbria University Hospitals NHS Trust	
Address of Trust	Cockton Hill Road Bishop Auckland County Durham DL14 6AD	Newtown Road Carlisle Cumbria CA2 7HY	
Contact + Telephone	01388 455000	01228 523444	
Approved for training in: <i>List Specialties for which unit has approval to train</i>			

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LEP Consultants / Trainers

Primary Educational Supervisor (may be a trainer): Peter Hodgkinson (Newcastle), Alistair Smyth (Leeds)

Main Trainer(s) involved with fellowship:

A main trainer must undertake more than five programmed activities (PA) in their job plan and they must also be a surgeon primarily in the relevant sub-specialty area and recognised by the GMC as a trainer. At least one trainer from each specialty must have five years full time experience in the NHS.

List of parent Specialties of main trainers:

Parent Specialty	Number of main trainers from this Specialty
OMFS	2 (1 Leeds, 1 Newcastle)
Plastic Surgery	2 (2 Newcastle)
ENT	2 (1 Leeds, 1 Newcastle)

Other Trainer(s) involved with fellowship:

Parent Specialty	Number of other trainers from this Specialty
OMFS	2 (Leeds)
SLT	2 (1 Leeds, 1 Newcastle)
Orthodontics	2 (1 Leeds, 1 Newcastle)
Paediatric Dentistry	2 (1 Leeds, 1 Newcastle)
Clinical Nurse Specialist	2 (1 Leeds, 1 Newcastle)

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Clinical Psychology	2 (1 Leeds, 1 Newcastle)

Any other Specialties who are members of the multidisciplinary team not already mentioned as appropriate to the TIG:

Specialty	Leeds (numbers)	Newcastle (numbers)	Trust C (numbers)
Paediatrician	1		
Clinical Genetics	1	1	
Paediatric Anaesthesia	1	1	

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Indicative Timetable

The fellow should be based at the main hospitals/Trusts for most of their educational activity but one session (professional activity) may occur outside these units each week. A trainee may work for 48 hours per week and if there is no on-call, all this time may be used for training.

Below is an indicative timetable that indicates the type of proposed activity and includes supporting professional development (SPD). SPD should be one half day each week. Please note that the timetable must be compatible with the Quality Indicators specific to the relevant TIG. All Quality Indicators may be found online at: <https://www.jcst.org/training-interface-groups/quality-processes/>

Types of activity

Combined outpatient clinic (COC)

Other outpatient clinics (OOC)

Operating theatre (Th)

Multi-disciplinary team meeting (MDT)

Supporting Professional Development (SPD)

Teaching ward round (WR)

Research activities (RA)

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Please indicate the activity and the trust, for example, MDT (A) or Th (B). Please indicate the activity and the trust, for example, MDT (A) or Th (B).

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning	COC (A/O/P/Q) 3:4; SPD (A)1:4 Paed Th(B): Weeks 2,4,5	WR/Th(A): All weeks WR(B): All weeks VF MDT (B): Week 1 COC (B): Weeks 2,4,5	WR/Th(A)1:2/Speech VF clinic(A)1:4 WR(B): All weeks Paed Th(B): All weeks	WR/Th(A)/COC(N)/SPD WR(B): All weeks Adult Th (B): All weeks Paed Th (B): All weeks	WR/OOC(A) WR (B) SPD (B)
Afternoon	COC (A/O/P/Q) 3:4; SPD (A) 1:4 Paed Th(B): Weeks 2,4,5 Adult COC(B): Week 3	Th/WR(A): All weeks COC (R): Week 1 COC (T): Weeks 2,4 COC (V): Week 3 COC (U): Week 5	Paed Th(B): Weeks 1,3,5 COC (B): Weeks 2,4 SPD(A)	Th(A)/COC(N)/MDT(A)) MDT(B): Weeks 1, 3 COC (S): Week 5	RA (A&B)
Evening					

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Training Delivery

Please an overview of the Unit's TIG Fellowship Training Delivery plan:

The Northern and Yorkshire Cleft Lip and Palate Service serves a wide geographical area using a hub and spoke model. Newcastle and Leeds functioning as a twin site centre with these principal sites acting as the hubs that are approximately 100 miles apart. Each site cares for between 65-85 new babies with a cleft every year. Additionally, there are 30-100 non-cleft VPI referrals each year on each site. The two lead surgeons do not work across the two units. The Yorkshire team provides spoke clinics in York, Wakefield, Hull, Bradford. The Northern spoke clinics are in Middlesbrough, Sunderland, Carlisle, Durham and Bishop Auckland.

The Northern and Yorkshire Service has successfully trained several cleft surgeons by providing high quality cleft training. It is proposed that this centre trains one (or possibly two fellows) at a time on a rotational basis with most of the time spent on each site in turn. This successful system has had each trainee for 3 months in one site and then 3 months on the other site, followed by 6 monthly rotations between the two sites. These attachments are fully flexible and movement from one site to the other, to maximise individual training opportunities, is encouraged. Ongoing discussion between the fellow and the lead trainers allows for this flexible arrangement. Travel between the two centres is very straightforward with good rail and road links. Visiting and attachments with other centres in the UK and abroad is encouraged to broaden the experience of the fellowship. Appropriate overseas humanitarian cleft work is also encouraged. The Newcastle Cleft team has a strong link with *Operation Restore Hope*, a charity providing cleft surgery in Manila.

There are joint training assessments on a 3-6 monthly basis.

In Newcastle there is a fortnightly Cleft MDT meeting that the TIG fellow attends along with all other members of the cleft team. Within this meeting surgical plans are discussed, complications and problems raised and critical incidents debriefed. All patients are reviewed at 5 years for audit purposes. Newcastle has an excellent audit follow-up at over 95%. The TIG trainee contributes to audit and presents our outcomes at national meetings. It is expected that each trainee will present annually at the CFSGBI meeting

There are two surgeons on the Newcastle site. Peter Hodgkinson was appointed in 1996 and has managed more than 1200 new babies with cleft. He has trained five cleft TIG fellows. The other surgeon was appointed in 2016. The clinics are undertaken jointly and there is a shared waiting list.

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There is one cleft surgeon on the Leeds site. Alistair Smyth was appointed in 2002 and has trained five cleft TIG fellows. Surgical experience is provided in all advanced surgical modules including all aspects of primary and secondary cleft surgery including alveolar bone grafting and cleft orthognathic surgery. The trainee is supervised and trained on a one-to one basis in theatre and other cleft surgical activities until competence is achieved allowing a degree of independent treatment provision with subsequent training discussion and feedback. Topics within the cleft surgical curriculum are covered again on a one-to-one basis with the trainee preparing in advance for these seminars. The trainee is also encouraged to participate in teaching other trainees on aspects of cleft management at undergraduate and postgraduate level. Training also includes a significant amount of time in all other cleft specialties including speech and language therapy clinics, palatal investigation clinics, orthodontic clinics, paediatric dental clinics, clinical psychology and home visits with clinical nurse specialists. The trainee will also receive formal teaching in the audiological and ENT management of otitis media and management of the paediatric airway.

The trainee attends the monthly Cleft MDT meeting in Leeds during their attachment and participates in all discussions and service planning. Regular experience is gained in upper airway endoscopy. The trainee also attends the combined Northern and Yorkshire Cleft Centre meetings which alternate between Leeds and Newcastle. Attendance and participation at the NorCleft MDT audit meetings is compulsory, and presentation at regional and national meetings including the Craniofacial Society is strongly encouraged.

Primary management of cleft lip and nose

Leeds

Weekly children's cleft clinics seeing new babies with cleft lip and nose in supplemented with weekly out-reach clinics across the Yorkshire region, paediatric operating lists, and ward rounds. 2.5 cleft paediatric operating sessions per week.

Newcastle

New referrals are seen by a specialist nurse within 24 hours. TIG fellows are trained in early assessment. Babies are seen in one of 2-4 paediatric clinics each week then listed for surgery. There are 3-4 cleft paediatric operating sessions each week. Trainees undergo simulator training then learn and practice operative techniques under the direct guidance of one of the two cleft surgeons.

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Secondary repair of cleft lip and nose

Leeds

Weekly clinics, paediatric and adult operating lists, ward rounds.

Newcastle

There is a twice monthly dedicated adult cleft clinic, an adult dental rehabilitative clinic and an orthognathic clinic. There are 1-2 adult cleft lists each week. Trainees attend clinics and then learn and practice operative techniques under the direct guidance of one of the two cleft surgeons.

Primary repair of cleft palate

Leeds

Weekly clinics, paediatric operating lists, ward rounds. Large clinical workload for cleft lip and palate. Routine use of cleft operating microscope for all cleft palate repairs, re-repairs and pharyngoplasties (with teaching side-arm and video monitor recording). 2.5 cleft paediatric operating sessions per week.

Newcastle

New referrals are seen by a specialist nurse within 24 hours. TIG fellows are trained in this early assessment and go on visits. Babies are seen in one of 2-3 paediatric clinics each week then listed for surgery. There are 3-4 cleft paediatric operating sessions each week. Trainees undergo simulator training then learn and practice operative techniques under the direct guidance of one of the two cleft surgeons. We run a cleft palate surgery training workshop annually that TIG fellows attend.

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Secondary speech surgery

Leeds

Weekly clinics, paediatric operating lists, ward rounds. Large clinical workload for cleft lip and palate. Routine use of cleft operating microscope for all cleft palate repairs, re-repairs and pharyngoplasties (with teaching side-arm and video monitor recording). Combined clinics with speech therapists and regular speech investigation clinic including experience in speech videofluoroscopy and fibre-optic nasendoscopy. Experience in fistula repair, palate re-repair, pharyngoplasty, buccinator flap palate lengthening, other advanced techniques.

Newcastle

There is a monthly non-cleft VPI clinic and separate monthly videofluoroscopy clinic with follow-on multidisciplinary assessment meeting. TIG fellows attend these clinics/meetings to discuss management plans and then learn operative techniques under the direct guidance of one of the two cleft surgeons.

Management of the alveolar defect in cleft patients

Leeds

Weekly clinics, paediatric operating lists, ward rounds. Large clinical workload for cleft lip and palate. Regular combined clinics with consultant orthodontists.

Newcastle

Cleft patients are assessed jointly with the consultant orthodontist in the cleft clinics and then reviewed in the cleft MDT meeting. Orthodontic preparation for ABG is under the direct supervision of the lead orthodontist who contributes to TIG fellow training. TIG fellows attend these clinics/cleft MDT and then learn operative techniques under the direct guidance of one of the two cleft surgeons.

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Orthognathic Surgery / Working with the Cleft MDT

Leeds

Weekly clinics, adult operating lists, ward rounds. Regular combined clinics with consultant orthodontists. Exposure and/or experience with cleft and non-cleft orthognathic surgery including distraction osteogenesis. The trainee also has the opportunity to attend theatre and clinics with OMFS colleagues undertaking osseo-distraction of the facial skeleton and craniofacial surgery.

Newcastle

There is an established protocol for orthognathic assessment that the TIG fellow contributes to and learns from. There is a quarterly orthognathic clinic with the lead orthognathic surgeon. Orthognathic surgery is performed at James Cook University Hospital, Middlesbrough and the Cleft TIG trainee contributes to this and participates.

Otology, hearing and ENT surgery

Leeds

Close working relationship with all ENT surgeons and audiology clinics. The trainee gains direct experience in otoscopy and investigation and management of hearing and middle ear function.

Newcastle

There is a specialist cleft ENT clinic attended by a specialist S< as well as ENT and the TIG trainee. Children's operating takes place on the RVI site and the cleft TIG trainee attends and contributes. There is a close and active link with the Paediatric Airways team and joint management between ENT, Paediatric Respiratory Medicine and the cleft team.