

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 <u>JCST</u>.

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 <u>ISCP</u> website in the curricula of the most relevant parent Specialties (as mentioned above) and the QIs are listed on the <u>JCST website</u>.

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.

Unit Lead Trainer:

Name			
Stuart Winter			

Local Educational Provider (LEP)

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

	Hospital/Trust A	Hospital/Trust B	Hospital/Trust C
Name of Trust	Oxford University Hospitals NHS		
	Trust		
Address of Trust	Churchill Hospital, Old road,		
	Headington, Oxford		

Peripheral units (if to be visited by trainee):

	Hospital/Trust N	Hospital/Trust O	Hospital/Trust P
Name of Trust			
Address of Trust			

LEP Consultants / Trainers

Primary Educational Supervisor (may be a trainer):

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 subspecialty 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
ENT	<mark>3</mark>
Plastics	3
OMFS	<mark>3</mark>

Other Trainer(s) involved with fellowship:

Parent Specialty	Number of other trainers from this Specialty
Oncology	2

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

Specialty	Trust A (numbers)	Trust B (numbers)	Trust C (numbers)	
SALT	4			
Dietician	2			
CNS	2			
Pathology	2			
Radiology	2			
Neurosurgery	2			

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: <u>https://www.jcst.org/training-interface-groups/quality-processes/</u>

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)

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

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Th/COC	Th	Th	SPD	000		
Afternoon	Th	Th	Th	COC/MDT	RA		
Evening							

Training Delivery

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

The Blenheim Head and Neck Unit is a purpose built head and neck ward in the Cancer Centre, opened in 2013. It has a dedicated 19 bedded ward and outpatient facility for head and neck cancer patients. The Unit sees about 300 new patients per year, and the Churchill Hospital has 2 head and neck theatres operating 5 full days per week. Tumours of the larynx The unit is able to offer experience in TOL/partial and TL Tumours of the oro/hypopharynx The unit is able to offer experience in TOL/TORS for OPC. The unit is currently submitting pts to PATHOIS and COMPARE Tumours of the oral cavity including access procedures The unit offers a wide range of experience in oral cavity tumours Tumours of the skin of head and neck Via the plastic surgeons the unit offers experience with complex skin cancers and sentinel node biopsy Reconstruction in head and neck oncology The unit provides a high volume reconstructive experience, ALT, radial, Supraclavicular, Fibula flaps Thyroid disease N/a

Salivary gland disease

The unit treats 20-30 malignant salivary tumour s/yera

Tumours of the nose and paransal sinuses

There is a separate Skull base MDT that they can partake in Management of facial nerve