



Appointment of Senior Clinical Fellow in ENT (Neurotology / Skull Base Surgery)

**Post Available from:
01 October 2025 for 12 months**

Post Reference No. 180-SCF-4764

Medical Staffing Department

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Cambridge Biomedical Campus
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The Department of ENT

The Department, which is based at Addenbrooke's Hospital, management of all aspects of ENT surgery including a significant emergency workload.

The Unit runs a busy Multidisciplinary Clinic incorporating ENT, Neurosurgery as well as Oncology. The team also includes Dieticians, Speech and Language therapists, Macmillan Nurses and Specialist Surgical Nurses. All aspects of Head and Neck Surgery are managed.

Otology and skull base surgery has a world-wide reputation. The skull base team include neurologists and skull base surgeons, neurosurgeons, neuroradiologists and geneticists. The department is one of two centres with both a dedicated neurofibromatosis type 2 clinic and auditory brain stem implantation programme.

As one of 19 national cochlear implant centres covering a population of 7 million, the department is able to manage paediatric and adult referrals. The East of England Cochlear Implant Centre has unrivalled facilities dedicated to the management of deafness. The centre has implanted over 2000 adults and children and has a large bone conduction and middle ear implant programme.

The unit is progressive in its approach to new ideas. Clinical Nurse Practitioners play an important role in otology, cochlear implantation and skull base surgery. Aural care facilitators offer dedicated care to outpatients.

The department of audiology offers the most complex range of services presently available.

Facilities at Addenbrooke's Hospital

The ENT department has a 32 bed adult ward. Children are admitted to a recently opened paediatric ward where there is access to PICU and ITU facilities.

ENT emergencies are admitted 7 days a week with cover provided from ENT Junior Doctors.

The ENT and Neurosurgical operating theatre is provided with the latest operating microscope and facilities for otology including otoendoscopy and laser surgery. Both endoscopes and the microscope are linked to the latest digital video facilities. The Day Surgery Unit is similarly equipped.

Outpatient facilities comprise a suite of 10 consulting rooms with two treatment / microscope rooms. A range of video-linked flexible and rigid endoscopes are available.

Specialist clinics run in Neurotology, Skull Base Surgery, Pituitary, Cochlear Implantation, Neurofibromatosis type 2, Head & Neck, Thyroid, Rhinology and Allergy.

Staffing: NHS and Academic

At Addenbrooke's only:

- **Mr JR Tysome**
Otology, Neurotology, Skull Base and Hearing Implantation
- **Mr NP Donnelly**
Otology, Neurotology, Skull Base and Hearing Implantation
- **Mr PR Axon**
Otology, Neurotology, Skull Base and Hearing Implantation
- **Mr D Borsetto**
Otology, Neurotology, Skull Base and Hearing Implantation
- **Mr R Sharma**
Rhinology, Skull Base
- **Prof M Bance**
Otology, Neurotology, Hearing Implantation
- **Mr M Smith**
Otology, Neurotology, Hearing Implantation
- **Mr B Fish**
Head & Neck and Thyroid Surgery
- **Miss E Irune**
Head & Neck and Thyroid Surgery
- **Mr L Masterson**
Head & Neck and Thyroid Surgery
- **Miss P Roche**
Head & Neck and Thyroid Surgery
- **Mr N Jonas (Specialty Lead)**
Paediatric ENT Surgery
- **Miss J Bewick**
Paediatric ENT Surgery
- **Miss I Fitzgerald O'Connor**
ENT Surgery

At West Suffolk Hospital and Addenbrooke's:

- **Mr D McKiernan**
Rhinology

Other Medical Staff:

- **Ms A Mitchell** Associate Specialist Part Time
- **Mr T Chandrappa** Associate Specialist Full Time
- **Mr S Hashmi** Associate Specialist Full Time
- **Clinical Fellow** Neurotology & Skull Base Surgery
- **Clinical Fellow** Otology & Hearing Implant Surgery
- **Clinical Fellow** Head & Neck Surgery

Trainee Medical Staff:

- Specialty Registrars (year 3 and above)
- Specialty Registrars (years 1 and 2)
- Anatomy Demonstrators
- Foundation House Officer Two
- GP Trainees

Other Management Staff:

- **Miss S Benyon**
Divisional Director

- **Dr M Kangarathnam**
Clinical Director (ENT/Head & Neck/Plastics)
- **Mrs K Stone**
Operations Manager for ENT

Duties of this post

Cambridge University Hospital NHS Foundation Trust is recognised formally by the SAC for subspecialist training in Skull Base surgery. This unit has an international reputation for skull base surgery and tertiary referrals are received from around the UK and from abroad.

There are between two and four lateral skull base procedures performed every week and between three and six anterior skull base procedures. Over the past 30 years since its inception, over 2000 major skull base cases have been operated on. This unit deals with very rare pathology and has the largest series of CP angle meningiomas and extended temporal resections for squamous carcinoma in the UK. We also have a large anterior and central skull base programme including dedicated pituitary team including endocrinology.

An extremely active research programme has been developed alongside the surgical unit and a number of higher degrees as well as over 300 scientific papers have been published.

The Skull Base, Otology and Implantation Department has continued to evolve clinically and academically, embracing multidisciplinary team work. There is a determined commitment to clinical excellence in surgery and research to maintain its position as one of the world's leading units.

This appointment is a 1 year post dedicated to training surgeons who are approaching the end of their higher surgical training. It is expected that the successful applicant will gain competency in all of neuro-otology, lateral and anterior skull base surgery including the management of complications. This not only includes vestibular Schwannoma surgery but all lateral, anterior and central skull base pathology including NF2 and auditory brainstem implants.

Demonstration of a commitment to training in otology and rhinology, good communication and team working skills are essential. Other experience in the form of audit or research is desirable.

In addition to the Skull Base Fellow there is also an Otology Fellow at Addenbrooke's Hospital. It will be the responsibility of the fellows to work together to make maximum use of the surgical opportunities available. Educational supervision will be provided by, Mr Patrick Axon, Mr Neil Donnelly, Mr James Tysome, Mr Rishi Sharma and Mr Daniele Borsetto. A detailed plan of work setting out the objectives of the post, success criteria and timetables for achievement of specific areas of sub-specialty interest will be set within one month of taking up the appointment, against which in-post and end-of-post monitoring and evaluation will take place.

Content of the Programme:

Structure

The Fellowship will require the trainee to demonstrate core skills. A series of modules will enable the development of the advanced skills required in this field. The trainee will be expected to develop complimentary research interests within the clinical and/or basic science research programmes. Operative lists will be designed to maximise surgical competencies. The trainee will attend dedicated skull base and post-surgical audit clinics to gain extensive experience of all types of cases presenting to a busy unit.

The Clinical Fellow will attend two all-day lateral skull base lists and one full-day anterior skull base list each week.

Objectives

The main objective of this fellowship is to develop the skills of a trainee to a level that will enable independent practice within a multidisciplinary team.

To develop knowledge, leadership qualities, attitudes and communication skills that will enable the trainee to develop after their consultant appointment.

Particular emphasis will be placed on leading the MDT, coordinating and managing a busy unit.

Service development and evaluation

The appointee will participate in the following:

- a) Local data collection for the National Audit (where appropriate); local assessment and review of the results for the Trust and PCT, including comparison of results with previous audit and with other centres nationally.
- b) Local networks where they exist in the specialty in order to ascertain quality improvement data and implement national strategy.
- c) Establish an appropriate network where one is not already in existence.
- d) Support the production of clinical guidelines for the specialty/sub-specialty.
- e) Local PCT/Trust meetings (where appropriate).

Timetable

	AM	PM
Monday	Neurotheatre (PRA/DB) NF2 MDT and clinic week 2	Neurotheatre (PRA/DB)
Tuesday	Neurotheatre (JRT/RS) 1,3 Research/admin 2,4,5	Skull Base clinic (JRT) 5-7pm Pituitary MDT 2,4
Wednesday	Neurotheatre (NPD) 1,3,5 Main theatres (RS) 2, 4	Neurotheatre (NPD) 1,3,5 Main theatres (RS) 2, 4
Thursday	Neurotheatre (NPD/JRT)	Neurotheatre (NPD/JRT)
Friday	Specialist Otology (PRA)1, 3, 5 Skull Base MDT and Clinic (PRA/NPD/JRT/DB)2, 4	Research/admin

All higher surgical trainees are on a daytime emergency rota 1 week in 8 (no fixed commitments).

Educational Opportunities

EDUCATIONAL OPPORTUNITIES AVAILABLE IN THE DEPARTMENT:

- ***In clinic*** – ENT general and specialist clinics run every morning and afternoon Monday to Friday.
- ***On ward*** - Daily ward round led by specialist trainee or senior clinical fellow with daily consultant board round then physical daily consultant round of new admissions and others where relevant.
- ***In theatre*** – 4 operating sessions each week.
- ***In MDT*** - Weekly head and neck, biweekly skull base, hearing implant, pituitary, monthly NF2 attended as appropriate to their firm.
- ***In procedural session*** – Multiple opportunities on the ward and in clinic to perform procedures including flexible nasendoscopy, microsuction, etc.
- ***In Handover session*** – Face to face handover 8-8.30am daily.

LOCAL / REGIONAL TEACHING:

- ***Departmental*** - Monthly journal club, monthly radiology teaching, monthly extended consultant teaching ward round.
- ***Access to Trust based teaching*** - Grand Rounds.

QUALITY IMPROVEMENT / AUDIT:

- ***Details of opportunity to complete projects*** - All are encouraged to perform an audit. These are presented at our monthly audit meetings.
- ***Attendance at M&M*** - Monthly M+M and quarterly clinical governance meetings.
- ***Attendance at audit meetings*** - Monthly audit meeting 9-12.30.

DEPARTMENTAL/LOCAL INDUCTION:

- Takes place on the Thursday and Friday of the first week and covers timetables and training opportunities.

OTHER:

- ***Research*** - The appointee will be encouraged to set up research projects in the department.
- ***Student Teaching*** - many opportunities to teach medical students attached to our department, particularly in terms of ward based case discussions.
- ***Leadership*** - close working with AHPs is required that requires leadership skills at the foundation doctor level.

Cambridge University Health Partners, the academic health sciences centre, in conjunction with the Institute of Continuing Education at The University of Cambridge are pleased to offer a one year Postgraduate Certificate in Clinical Medicine to all clinicians employed in Cambridge. Further details and registration: www.ice.cam.ac.uk/ClinMed

Study and Research

You are eligible for up to 30 days study leave per annum pro rata in agreement with your clinical lead. Study leave allowance is £300 per annum, pro rata.

Arrangements for Leave

The annual leave entitlement for a full-time Clinical Fellow is based on a standard working week of five days:

- a. On first appointment to the NHS: 27 days.
- b. After five years' completed NHS service: 32 days.

Arrangements for booking leave are departmental and will be confirmed as part of local induction.

Person Specification

Entry Criteria	Essential	Desirable
Qualifications	<p>MRCS or FRCS equivalent qualification</p> <p>Intercollegiate Exit Examination or equivalent</p> <p>Entry on GMC Specialist Register; eligible for entry on Register or within six months of receipt of Certificate of Completion of training (CCT) at time of appointment</p>	<p>ATLS Course</p> <p>DLO or other academic higher qualification</p> <p>Presentations/Publications</p>
Experience	<p>Completion of Specialty Registrar training in ENT in the UK or equivalent with CCT</p> <p>Interest in Skull Base Surgery, Otology, Rhinology</p> <p>Must have equivalent experience in ENT and hold an exit ENT examination</p> <p>Able to deal with general emergency admissions</p> <p>Logbook indicating validated experience of appropriate range and number of clinical procedures</p>	<p>Experience of specialised basic sciences e.g. Genetics or molecular biology or electrophysiology</p>
Skills / Ability / Knowledge	<p>Basic surgical skills and patient care.</p> <p>Competence in pre-operative and post-operative management of general surgical patients.</p> <p>Good organisation</p> <p>Ability to organise own learning and time</p> <p>A keen interest in the development of teaching methods and practical teaching skills applied to ENT</p>	<p>Basic computer skills including Microsoft word and Outlook</p> <p>Undergraduate or postgraduate teaching experience</p> <p>Postgraduate presentations</p>
Qualities / Attributes	<p>Ability to work as part of a team</p> <p>Ability to keep good medical records and communicate with other hospital departments and primary care</p> <p>Ability to understand and communicate with patients and colleagues</p>	<p>Ability to undertake research projects and audit</p> <p>Show interest in investigative, audit and research work outside immediate clinical responsibility</p>

Entry Criteria	Essential	Desirable
Language Requirements	<p>The applicant must have demonstrable skills in listening, reading, writing and speaking in English that enable effective communication about medical topics with patients and colleagues, as set out in the GMC's Good Medical Practice (2014)</p> <p>If the Primary Medical Qualification including clinical contact was not carried out using English, applicants must either:</p> <ul style="list-style-type: none"> • Have an academic IELTS score of at least 7.5 in each domain and overall, or demonstrate equivalence by providing evidence of English language skills. <li style="text-align: center;">or • Complete the Occupational English Test (OET) and achieve grade B in each of the four domains tested in the OET to meet the GMC's requirements. 	

General Information

Cambridge University Hospitals NHS Foundation Trust (CUH) in profile

We are one of the largest and best known acute hospital trusts in the country. The 'local' hospital for our community, delivering care through Addenbrooke's and the Rosie, CUH is also a leading regional and national centre for specialist treatment.

The hospital fulfils a number of important functions; its three main core activities are clinical care, research and teaching. It is the local hospital for people living in the Cambridge area, providing emergency, surgical, medical and maternity care but as well as delivering care, it is also:

- A leading national centre for specialist treatment for rare or complex conditions such as organ transplantation, cancer, neurosciences and paediatrics. (For further information about clinical services www.cuh.nhs.uk/services-0)
- A government-designed biomedical research centre and part of the National Institute for Health Research (NIHR)
- One of six academic health science centres in the UK
- A university teaching hospital with a worldwide reputation
- A partner in the development of the Cambridge Biomedical Campus.

Our vision is to improve people's quality of life through innovative and sustainable healthcare.

Our **CUH Together** Strategy has been developed with staff, patients and partners. Patients are central to everything we do and we want to ensure that CUH is an exciting and supportive place to work. Our vision is to improve people's quality of life through innovative and sustainable healthcare. We will deliver our vision in a way that is consistent with our values of **Together – Safe | Kind | Excellent**, and the associated behaviours that define how we care for our patients and work with our colleagues and partners.

Our strategy has four key priorities:

- Improving patient journeys
- Working with our communities
- Strengthening the organisation
- Contributing nationally and internationally

We share our site with a range of other organisations including the University Clinical School, the National Blood Authority, and laboratories funded by the Medical Research Council (MRC), the Wellcome Trust and Glaxo SmithKline, University of Cambridge Hutchison/Cancer Research UK (CRUK) Cancer Centre and The Medical Research Council's facility to house the Laboratory of Molecular Biology. The most recent addition is Royal Papworth Hospital which relocated to the Campus in April 2019. Building is currently underway on a new global R&D Centre and Corporate HQ for AstraZeneca.

In December 2018 it was announced that The Cambridge Children's Hospital will be added to the campus with enabling work beginning this year and main building work due to commence in 2026. The Children's Hospital vision is to treat the whole child, not just the illness or condition.

The children's hospital project will be delivered through an innovative joint proposal between ourselves, Cambridgeshire and Peterborough NHS Foundation Trust (CPFT), providing mental health services and the University of Cambridge, providing world-leading academic research. We are acutely aware that this hospital needs to provide support to develop and strengthen paediatrics across the whole region and we will be working with our networks to build a shared vision for this. The partnership is pioneering the full integration of physical and inpatient mental healthcare in the same setting, alongside ground breaking genomic science and mind and body mental health research to find new ways of preventing and detecting childhood diseases. The

hospital will provide a permanent and sustainable home for CPFT's inpatient children and young people's mental health services currently provided on the Ida Darwin site in Cambridge.

In addition, the Cambridge Cancer Research Hospital (CCRH) will be a new, purpose-built, specialist cancer research hospital. The new building will include additional beds that are needed to accommodate increasing numbers of patients and more single rooms that are suitable for novel therapies and reduce the risk of hospital-acquired infections. It will also deliver additional capacity for day treatment and clinical trials and an expanded emergency assessment unit for cancer patients. Specifically, it will include: wards for Oncology, Haematology, Bone Marrow Transplant and a Young Adult Cancer ward, an outpatient department and diagnostic suites, day units for Oncology and Haematology and a Breast Unit. Groundworks are beginning in 2024 with main building work due to commence in 2025.

It is an exciting time for the city and the region. For us at CUH, being based at the heart of the Cambridge Biomedical Campus means we are perfectly situated to make the most of the opportunities that are arising. We pride ourselves on the teamwork, energy and commitment of our excellent staff – they are our most important assets. Recognising this, we have taken a positive approach to supporting them in their work through schemes to help work-life balance, improvements in the working environment and initiatives to make it easier for staff to explore new career opportunities and to develop professionally and personally.

Cambridge University Hospitals - Board of Directors

Chair and Chief Executive:

Dr Mike More – Chair
Roland Sinker – Chief Executive

Non-Executive Directors:

Daniel Abrams
Dr Annette Doherty
Professor Ian Jacobs
Ali Layne-Smith
Professor Patrick H Maxwell
Dr James Morrow
Rohan Sivanandan
Professor Sharon Peacock

Executive Directors:

Nicola Ayton – Chief Operating Officer
Dr Sue Broster – Director of Innovation, Digital and Improvement
Mike Keech – Chief Finance Officer
Dr Ashley Shaw – Medical Director
Claire Stoneham – Director of Strategy and Major Projects
Lorraine Szeremeta – Chief Nurse
Ian Walker – Director of Corporate Affairs
David Wherrett – Director of Workforce

Cambridge University Hospitals NHS Foundation Trust in detail

Last year 57,626 men, women and children were treated as inpatients, 137,827 people attended accident and emergency, and there were 862,874 visits to outpatient clinics (2022/2023 figures). CUH medical staff hold clinics in 14 different regional hospitals so that patients do not have to travel to Cambridge. Nearly 100 of our Consultants hold some form of joint appointment with a dozen neighbouring hospitals.

CUH is a teaching hospital for medical undergraduates and postgraduates, nurses and students in other clinical professions and has a variety of initiatives to encourage life-long learning'. Many training schemes are in place in our National Vocational Qualification Centre, Postgraduate Medical Education Centre and Learning Centre. Training schemes include cadet schemes in nursing, office technology, science, modern apprenticeships in clinical engineering and supporting training placements for biomedical scientists.

CUH has:

- Around 12,700 staff of which approx. 2,500 are medical and dental staff
- 5,445 births per year
- 198,721 admissions including inpatients, day cases and births (2022/2023 figures)

During the 2022/23 year we saw a slight increase in total admissions of 1.67% compared to the same period in 2021/22. This was the net result of an increase in day cases and in-patient elective admissions offset against lower maternity and emergency admissions (for under 85's) in addition to a lower number of births. During 2022/23 the Trust continued to manage high levels of infectious illness including COVID and Respiratory syncytial virus (RSV), with influenza levels rising significantly during December 2022. There were high levels of occupancy across the period.

Addenbrooke's history

Addenbrooke's was one of the first provincial, voluntary hospitals in England. The Hospital opened its doors in 1766 with 20 beds and 11 patients. Dr John Addenbrooke, a fellow and former Bursar of one of the Cambridge Colleges, left just over £4500 in his will "to hire and fit up, purchase or erect a small, physical hospital in the town of Cambridge for poor people".

In 1540, two centuries before Addenbrooke's was founded, the Regius Professorship of Physic in the University of Cambridge was founded by Henry VIII. Medical training on a modest scale developed at Addenbrooke's during the late 1700s, and in 1837 (the year of Queen Victoria's accession to the throne) the hospital became a recognised school of medicine.

Addenbrooke's grew rapidly during the 19th and early 20th centuries, as medical science developed. By the 1950s, the hospital was having difficulty accommodating the expansion generated by the introduction of the National Health Service. In 1959, building began on a new 66-acre site south of Cambridge, and the first phase of the Hospital was opened by Her Majesty the Queen in May 1962. Work continued to provide the majority of Addenbrooke's as we know it today, with a fully-fledged Clinical School being established in 1976.

History

- 1766 Addenbrooke's Hospital was opened in Trumpington Street
- 1847 The first general anaesthetic using ether at Addenbrooke's was carried out two weeks after it was first used in the USA
- 1918 Addenbrooke's welcomed its first female medical student
- 1962 New site on Hills Road was officially opened by the Queen
- 1966 The first kidney transplant in the NHS was carried out at Douglas House Renal Unit
- 1968 Professor Sir Roy Calne carried out the first liver transplant in the NHS
- 1975 The first open heart surgery was carried out at Addenbrooke's
- 1981 Addenbrooke's first whole body scanner opened by Prince of Wales
- 1983 The Rosie Hospital was opened on the Addenbrooke's Campus
- 1984 Last patient left the 'old' Addenbrooke's Hospital site in Trumpington Street
- 1992 Addenbrooke's NHS Trust formed
- 1995 MRC Cambridge Centre for Brain repair opened by Duke of Edinburgh
- 2004 Addenbrooke's Hospital becomes a Foundation Hospital as is known as- Addenbrooke's Hospital Cambridge University Hospitals NHS Foundation Trust
National Centre for pancreatic surgery was opened

- 2006 Addenbrooke's Hospital was named one of five National Institute for Health Research comprehensive biomedical research centres
- 2007 New European headquarters for Cancer Research UK based on the campus were opened by the Queen
- 2009 CUH and local partners in clinical care, education and research became one of the government's new academic health science centres, forming an alliance called Cambridge University Health Partners
- 2009 CUH was named by Dr Foster as one of the country's best performing trusts for patient safety
- 2012 CUH is now the designated level 1 Major Trauma Centre for the East of England region
- 2014 Our new electronic patient record system (EPIC) was implemented at CUH making us the first hospital in the UK to go paperless
- 2019 The Royal Papworth Hospital was opened by Queen Elizabeth II
- 2023 Cambridge Movement Surgical Hub opened

Positioning for the future

Cambridgeshire is one of the fastest growing counties in the UK and it is estimated that the number of people over 45 years of age will rise by 55% over the next 20 years, and the county will see the continued expansion of research, business and high-tech industries.

Planning is already well advanced for additional capacity to meet this growing local demand. But it is not just a matter of providing extra beds and recruiting extra staff. The hospital needs to ensure high standards of patient care by supporting training and education for staff, and work closely with NHS partners and others to ensure that care is tailored to the needs and expectations of users. This is likely to involve developing some alternatives to hospital-based care. Another challenge will be to ensure that improvements in clinical facilities keep up with the rapid pace of research investment, and that processes and governance support this growing research activity, some of which involves sensitive ethical, legal and social issues.

CUH contributes to the economic strength of the greater Cambridge area as a major employer and, with our research partners, to the biotechnology sector. As a public benefit corporation, the new NHS Foundation Trust will work in partnership with other local bodies, primarily local authorities and education providers, to support sustainable economic development in the locality.

Research and development

Cambridge medical research enjoys a world-wide reputation. More organisations and more individuals continue to be attracted to the city; working alongside each other they have created one of the richest pools of clinical and scientific knowledge and expertise not only in the country but in the world. At CUH this is reflected in clinical teams working in the hospital alongside world-class scientists from a wealth of internationally renowned organisations such as the Medical Research Council (MRC) which shares the hospital campus. Doctors and scientists collaborate across disciplines and specialties and it is this co-existence of experience and expertise that fosters translational research – turning basic science into new drugs and new therapies giving patients innovative and excellent care.

With the University of Cambridge, CUH is a partner in the National Institute for Health Research (NIHR) Cambridge Biomedical Research Centre (CBRC). This partnership uses our combined strengths in biomedical science – the science that forms the basis of medicine including scientific laboratory-based knowledge and understanding – and translates them into clinical research. Established in 2007 the centre was recently awarded funding of £114.5m for 2012 to 2017. It was judged by the international selection panel as to have an outstanding breadth of world-leading investigators and represented the UK's primary academic resource in biomedical research.

Outstanding facilities for research exist in Addenbrooke's Clinical Research Facility (ACRC) which includes the Wellcome Trust Clinical Research Facility and the Clinical Investigation Ward. For example the CIW includes a research endoscopy suite and area dedicated to intravenous treatment including cancer chemotherapies.

University of Cambridge School of Medicine

The University of Cambridge School of Clinical Medicine is a major centre for biomedical research and education of world leading quality. In the most recent University Funding Council Research Selectivity Exercise Cambridge shared the highest score for any Medical School in the country. Whilst the University of Cambridge has granted medical degrees since at least 1363, the university could not offer undergraduate clinical education until the Clinical School was formally established in 1975 with purpose built accommodation at Addenbrooke's. In addition to these facilities comprising lecture theatres, seminar rooms and first class medical library, a postgraduate education centre was opened in the Clinical School building in 1980. The most recent HEFC teaching quality assessment of the undergraduate clinical education judged the learning facilities and the teaching in the clinical school to be of the highest quality.

Cambridge University Health Partners, the academic health sciences centre, in conjunction with the Institute of Continuing Education at The University of Cambridge are pleased to offer a one year Postgraduate Certificate in Clinical Medicine to all clinicians employed in Cambridge. Further details and registration: <http://www.ice.cam.ac.uk/mst-clinical-medicine>

General Information

Cambridge is a city in the East of England, home to the University of Cambridge and one of the fastest growing technology hubs in the UK. The Arts Theatre within Cambridge is thriving and there are many musical activities to enjoy. The Fitzwilliam Museum is world famous.

For those with children of school age, there is a full range of public and private education institutions covering all age groups.

Cambridge is served by the national motorway network and regular train services to London King's Cross or London Liverpool Street have a journey time of less than one hour.

Within CUH, the main concourse offers shopping facilities; an advice centre; cafés; clothes boutique; financial advisory services; hairdressing salon; Marks and Spencer Simply Food; newsagent; The Body Shop; gift shop and on site solicitors . There is a Food Court which offers "fast-food", as well as conventional options 24 hours a day. In addition the Frank Lee Leisure and Fitness club provides comprehensive facilities for swimming, racquet sports, a multi-sports hall, a floodlit outdoor multi-sports facility, gym and bar facilities.

The Cambridge University Postgraduate Medical Centre has catering facilities as well as the library, lecture theatres and seminar rooms. Within the University of Cambridge, there is an unrivalled range of educational facilities, diverse cultural, sporting and other leisure activities.



Our Trust values and behaviours

Values	Behaviours	Love to see	Expect to see	Don't want to see
Safe I never walk past, I always speak up	Safety	Shares lessons learned to help others to improve safety.	Always follows agreed safety and wellbeing procedures. Learns from mistakes and asks for help if they need it.	Shows a lack of focus on safety and wellbeing in their day-to-day work.
	Raising concerns	Encourages others to raise concerns about safety or attitude.	Speaks up every time standards on safety, care or dignity are not met. Welcomes feedback.	Keeps concerns to themselves, and rejects feedback about their own behaviour.
	Communication	Seeks ways to enhance understanding of information being communicated to meet people's needs.	Keeps people informed and gives clear explanations in ways people can understand.	Doesn't give people the information they need. Uses jargon inappropriately.
	Teamwork	Encourage others to contribute and demonstrates better ways of working within and across teams.	Works as part of a team. Co-operates and communicates with colleagues. Values other people's views.	Excludes others and works in isolation.
	Reassuringly professional	Is constantly aware that what they say and do affects how safe other people feel.	Is calm, patient and puts people at ease. Takes pride in their own appearance and our environment.	Passes on their negativity/stress. Is critical of other teams or colleagues in front of others. Displays unprofessional appearance.
Kind I always take care of the people around me	Welcoming	Goes out of their way to make people feel welcome.	Is polite, friendly, makes eye contact, smiles where appropriate and introduces themselves. 'Hello my name is...'	Ignores or avoids people. Is rude or abrupt, appears unapproachable/moody.
	Respectful	Applies a broader understanding of the diverse needs of patients/colleagues. Supports others to be themselves.	Treats everyone as an equal and valued individual. Acts to protect people's dignity.	Ignores people's feelings or pain. Makes people feel bullied, belittled or judged.
	Helpful	Thinks about the needs of others. Goes the 'extra mile' for other people.	Is attentive and compassionate, helps people who need help, or finds someone who can. Never walks by.	Makes people feel like a burden: 'It's not my patient / job / problem'.
	Listen	Makes time to listen to people even when busy.	Listens to people in an attentive and responsive manner.	Disinterested, dismissive or talks over people.
	Appreciate	Goes out of their way to make people feel valued for their efforts and achievements.	Encourages people's efforts. Notices when people live up to our values, says thank you.	Doesn't notice or appreciate people's efforts.
Excellent I'm always looking for a better way	Aiming high	Their positive attitude inspires others to achieve the highest levels of quality.	Always aims to achieve the best results.	Accepts mediocrity or moans without looking for solutions.
	Improving	Helps others to find creative solutions to problems and shares good practice.	Suggests ideas for better ways of doing things and looks for opportunities to learn.	Resists change: 'we've always done it this way'.
	Responsible	Shows enthusiasm and energy to achieve excellent results.	Takes responsibility and has a positive attitude.	Avoids responsibility. Blames or criticises others.
	Timely	Always respects the value of other people's time.	Is on time, efficient, organised and tidy. Apologises and explains if people are kept waiting.	Misses deadlines or keeps people waiting, without explanation/apology.
	Makes connections	Helps others to understand how services connect.	Thinks beyond their own job and team to make things easier for people.	Focuses on their own department needs to the detriment of the people they serve.

Together-Safe | Kind | Excellent

General Conditions of Appointment

1. This appointment shall be governed by the **Terms and Conditions of Service for Clinical Fellows at Cambridge University Hospitals 2018**, as amended from time to time, and adhere to Trusts policies and procedures as appropriate.
2. All matters relating to patient's health and personal affairs and matters of a commercial interest to the Trust are strictly confidential and under no circumstances is such information to be divulged to any unauthorised person. Breach of Trust policy may result in disciplinary action in accordance with the Trust's disciplinary procedure. A summary of the Trust's Confidentiality Policy, Data Protection and IM & T Security Policy are provided in the Staff Handbook.
3. Cambridge University Hospitals NHS Foundation Trust is committed to a policy of Equal Opportunities in Employment. A summary is detailed in the staff handbook. Any act of discrimination or harassment against staff, patients, service users or other members of the public will be subject to disciplinary proceedings which could include dismissal.
4. As an employee of a Trust, you are expected to develop the IT skills necessary to support the tasks included in your post. You will therefore be required to undertake any necessary training to support this. As a user of Trust computer facilities you must comply with the Trust's IM & T Security Policy at all times.
5. You are normally covered by the NHS Hospital and Community Health Services indemnity against claims of medical negligence. However, in certain circumstances (especially in services for which you receive a separate fee) you may not be covered by the indemnity. The Health Departments therefore advise that you maintain membership of your medical defence organisation.
6. The Trust will ensure compliance with the Health and Safety at Work Act 1974.
7. The post is based on a whole time appointment calculated on an average of 40 hours work per week; the salary for this appointment is £63,527 per annum (April 2023 figures). This is a fixed nodal pay point and does not increase incrementally.
8. In addition weekend and on-call allowances will be paid where appropriate for agreed hours of duty within the working pattern.
9. This post is superannuable and you will be subject to the NHS Superannuation Scheme unless you chose to opt out.
10. The successful candidate will be expected to complete a medical questionnaire and attend the Cambridge Centre for Occupational Health at Addenbrooke's for clearance of the form.
11. The Trust requires the successful candidate to have and maintain registration and a license to practice with the General Medical Council and to fulfill the duties and responsibilities of a doctor as set out by the GMC.
12. With the Terms of DHSS Circular (HC)(88) – Protection of Children – applicants are required when applying for this post to disclose any record of convictions, bind-over orders or cautions. The Trust is committed to carefully screening all applicants who will work with children and you will be expected to undertake a 'disclosure' 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 the Trust. Any information given will be completely confidential and will be considered in relation to an application for positions to which the Order applies.

13. The appointment is conditional upon the following being received prior to the commencement of employment; full occupational health clearance, satisfactory references, evidence of GMC/GDC registration, immigration status and all medical qualification.
14. This post is not recognised for training.
15. Removal expenses will be available to successful applicants within the limits of the Trust policy.

