

## **Clinical Research Fellowships with the RCoA Centre for Research and Improvement (CR&I)**

The RCoA CR&I in partnership with NHS and independent sector hospitals, seeks to appoint clinical research fellows to work on high profile programmes in health services research related to anaesthesia and perioperative medicine.

The successful candidate will gain exposure to national research and quality improvement programmes, opportunities for academic publication and conference presentations and develop leadership and management skills.

The posts will commence in **August 2024**.

All posts are linked with a clinical commitment at one of our partner hospitals.

### **Research Opportunities**

#### **Post 1: Perioperative Quality Improvement Programme (PQIP)**

The Perioperative Quality Improvement Programme (PQIP) is a national research and quality improvement programme, prospectively measuring complications and patient reported outcomes after major surgery, and formally evaluating the effects of different types of quality improvement methodology. It is being led by the RCoA, CR&I and UCL Surgical Outcomes Research centre, and supported by the Health Foundation.

We are seeking one fellow to work on either of the two posts available:

**i. Research**

The successful candidate will undertake quantitative or qualitative research within PQIP. Quantitative research would include analysis of our cohort of >45,000 patients, to answer research questions about risk, process and outcome after major surgery. Qualitative research would investigate barriers and enablers to compliance with quality initiatives and/or development of novel interventions to improve patient outcomes.

**ii. Quality Improvement**

The successful candidate will work on large scale QI, focusing in particular on developing and supporting improvement collaboratives and supporting teams in using their data for improvement.

All projects will be supervised by Professor Moonesinghe (CI); qualitative research will be cosupervised by Dr Cecilia Vindrola, (CR&I and UCL social scientist) and quantitative research cosupervised by either Dr James Bedford (UCL clinician scientist) or Dr Snehal Pinto Pereira (UCL statistician). The successful candidate(s) will be expected to attend PQIP Project Team meetings (every two months) and will be invited to meetings of the CR&I executive management board (four times per year).

**Queries:** Professor Ramani Moonesinghe: [ramani.moonesinghe@nhs.net](mailto:ramani.moonesinghe@nhs.net)

## Post 2: Patient Safety Research Fellow

This is an exciting opportunity for an enthusiastic and creative individual to be at the cutting edge of a new research collaboration. The CRI is partnering with the new NIHR Central London Patient Safety Research Collaboration (CL-PSRC) to support patient safety research in Surgical, Perioperative, Acute and Critical care (SPACE). The CL-PSRC was established in April 2023 and will run for 5 years in the first instance.

It focuses on patient safety challenges in surgical, perioperative, acute and critical care, taking a pathway-based approach which will also therefore encompass primary and community care. Patient and public involvement is at the heart of its research activities, and it has a strong commitment both to the 'levelling up' agenda in terms of research outputs and ensuring that our staff and our research reflect the diversity of our population, and the patients that the NHS serves. The PSRC is organized into themes of activity, each with its own leads and research projects. It is also home to a career development academy, supporting PhD students, postdoctoral and mid-career researchers, from both clinical and non-clinical backgrounds.

### Objectives:

1. The successful candidate will have a choice of qualitative, quantitative or mixed methods research projects supporting existing work and contributing to new ideas. Current projects include:
  1. Evaluation of NHSE's new approach to preoperative pathways.
  2. Analysis of impact of previous National Audit Projects on patient safety.
  3. Using digital sociology methods to analyse free text patient safety.
  4. Data improving the implementation and impact of clinical risk scores such as NEWS and surgical risk prediction tools, such as SORT.
  5. Developing interventions to improve surgical outcomes for patients from deprived communities.

**Queries:** Project Supervisor – Professor Ramani Moonesinghe: [ramani.moonesinghe@nhs.net](mailto:ramani.moonesinghe@nhs.net)

## Post 3: Quality Improvement Working Group (QI)

We are seeking to recruit one fellow to work as a member of the RCoA Quality Improvement Working Group (QIWG), on key objectives of the College's QI strategy. The Fellow will be supervised by the Chair and Deputy Chair of the QIWG (Dr Carolyn Johnston and Dr Lesley Jordan), and will have ready access to the network of supportive and engaged QI regional lead anaesthetists, as well as support from staff in the RCoA Clinical Quality and Research directorate and CR&I.

### Objectives:

1. Developing methods to share innovation and best practice around the UK- scoping options for a best practice library/hub and national and/or regional project sharing days.
2. Linking the QI regional leads to facilitate the development of local networks, working across education and quality functions.
3. Collating and curating regional training opportunities, developing the QI webinar plans, to improving access to QI training.
4. The fellow is encouraged to bring their own ideas to our work and will have scope to pursue their own research or other development opportunities to complement the objectives above.
5. Candidates will be expected to attend Quality Improvement Working Group meetings (which they may attend online), as well as any additional meetings related to their project work.

**Queries:** Project Supervisor – Dr Carolyn Johnston [Carolyn.Johnston@stgeorges.nhs.uk](mailto:Carolyn.Johnston@stgeorges.nhs.uk)

#### **Post 4: National Emergency Laparotomy Audit (NELA)**

We are seeking to appoint one to two fellows to work with the National Emergency Laparotomy Audit (NELA).

The aim of NELA is to enable the improvement of the quality of care for patients undergoing emergency laparotomy through the provision of high-quality comparative data from all providers of emergency laparotomy. The RCOA CR&I is delivering NELA on behalf of the RCoA.

NELA is a collaboration between anaesthetic, surgical and other key stakeholders. The successful candidate's responsibilities will include:

1. Qualitative and / or quantitative data analysis.
2. Report and manuscript writing to support the agreed outcomes of NELA.
3. Supporting quality improvement work and presentations at local/regional/national meetings.

Candidates will be expected to attend NELA Project Team meetings as well as additional meetings as required. Travel expenses for these meetings will be reimbursed.

The successful candidate will be supervised by the NELA project team.

**Queries:** [info@nela.org.uk](mailto:info@nela.org.uk)

#### **Post 5: Patient & Public Involvement (PPI) Fellow**

We are seeking to recruit a Fellow to work as a key member of the College PPI team. The Fellow will be supervised by the Patient Information Lead, Dr Samantha Black, and will have ready access to the network of supportive and engaged clinical fellows throughout the Centre of Research & Improvement (CR&I), as well as support from staff in the RCoA Clinical Quality and Research directorate and the Patient and Public Involvement team.

##### **Objectives:**

1. Lead and develop a research project to understand the effectiveness of hypnotherapy tools to reduce preoperative anxiety in patients and in prehabilitation, including working closely with the British Society of Clinical and Academic Hypnosis and international organisations and researchers.
2. Explore how best to measure the effectiveness of the RCoA's patient information resources by developing a validated method of measuring impact and gathering feedback from patients.
3. Support the delivery and development of other patient information projects and PPI projects as they arise according to the PPI workstream strategy.

The fellow is encouraged to bring their own ideas to our work and will have scope to pursue their own research or other development opportunities to complement the objectives above.

Candidates will be expected to attend Patient Information Group (which they may attend online and runs twice a year), as well as any additional meetings related to their project work.

For this role we are looking for someone who is passionate about improving patients' experience of anaesthesia and perioperative care through the provision of high-quality patient information and who has a keen interest in patient engagement methodologies. The successful candidate will be expected

to work with the PatientsVoices@RCOA group and other patient communities to bring the voice of patients into specific projects.

**Queries:** Patient Information Lead - Dr Samantha Black [samantha.black1@nhs.net](mailto:samantha.black1@nhs.net)

### **Post 6: Emergency Front of Neck Airway (eFONA)**

Emergency Front of Neck Airway (eFONA) The National eFONA Registry is a joint collaboration between the CR&I, the Difficult Airway Society and the University of Nottingham. It aims to capture and analyse all cases where an emergency front of neck airway is attempted or performed across the UK.

The Registry is presently in the final stages of preparation and the successful candidate would have a key role in the launch, promotion of the registry, ensuring the associated materials are all up to date and functional.

We anticipate that the successful individual will have the opportunity to conduct early analysis of the first cases, participate in the Expert Review Group and present results from the registry. In addition, other countries have discussed the possibility of using the database to record their own eFONA events and we would see the fellow being involved in that also.

Depending on progress and data entry with the main registry, there may be opportunity to explore additional projects looking at training and preparedness in eFONA amongst anaesthetists in the UK and abroad.

**Queries:** Prof Iain Moppett [Iain.Moppett@nottingham.ac.uk](mailto:Iain.Moppett@nottingham.ac.uk) Project Supervisors: Alistair McNarry, Sandeep Sudan.

### **Post 7: Perioperative Medicine Clinical Trials Network (POMCTN)**

The objective of the UK Perioperative Medicine Clinical Trials Network (CTN) is to create an environment which allows everyone with an interest in perioperative care to make a meaningful but realistic contribution to clinical trials and observational studies. The CTN supports research projects involving the recruitment of patients where the aim is to improve outcomes following surgical treatment. This does not include research into surgical techniques except where these overlap with perioperative medicine.

Our flagship 'Research Leaders' scheme (previously named Chief Investigator Scheme) mentors and supports clinicians who would like to develop into future research leaders by providing hands on experience of designing, conducting, and managing clinical trials. Similarly, we would like to support anaesthetists in training who would like to gain more experience and training in clinical trials. The CTN supports a portfolio of adopted perioperative trials and has also been successful in obtaining NIHR funding for three perioperative trials. We are seeking to appoint at least two fellows in this funding round.

We are seeking two fellows to work on either of the studies available:

- [CAMELOT](#) - Continuous rectus sheath Analgesia in Emergency Laparotomy
- [SINFONIA](#) - Sugammadex for prevention of post-operative pulmonary complications

#### **Objectives:**

1. To develop understanding of research ecosystem and delivery within the NHS.
2. To learn from experienced Chief Investigators of CTN-led trials on trial management and working with sites to optimise patient recruitment. Typical activities may include observing trial management group meetings, site initiation visits, and data management meetings. Information on potential CTN-led trials can be found: [POMCTN Trials - Clinical Trials Network](#)
3. To support local research team in study co-ordination, patient recruitment and data collection as appropriate.

4. To link up with Principal Investigators and NIHR Associate Principal Investigators registered on CTN trials and set up a network for peer support and research training for PIs and trainees.
5. The fellow is encouraged to bring their own ideas to our work and will have scope to pursue their own research or other development opportunities to complement the objectives above.

**Queries:** Project Supervisor - Dr Ronelle Mouton [camelot-trial@bristol.ac.uk](mailto:camelot-trial@bristol.ac.uk)  
Project Supervisor - Dr Jon Silversides [sinfonia@warwick.ac.uk](mailto:sinfonia@warwick.ac.uk)

## Clinical Placements

This post is salary supported by a clinical commitment at one of the following hospitals/ departments:

### 1. HCA Critical Care Units

HCA Critical Care department comprises of 5 Critical Care Units, situated in central London, including The London Bridge, Princes Grace, Harley Street Clinic and the Wellington hospital. These hospitals specialise in post-surgical and medical critical care and have some of the world's top surgeons performing ground-breaking surgery. Another big part of the HCA's workload is oncology care, with more than 50+ inpatient beds across hospitals.

The ITU Resident Doctor plays a crucial role within the private Healthcare Sector. Consultants work as Independent Practitioners, and therefore the hospital requires the 24-hour presence of a Resident Doctor to provide continuous quality patient care to support these Consultants.

The Resident Doctor will be based within the ICU, but they also provide wider outreach support to the hospital as part of the emergency medical team with the expectation of advanced airway management. The ICU Resident Doctor is expected to work independently within their skillset to review and treat inpatients and formulate plans whilst remaining in communication and seeking guidance from the Consultant in charge or the ITU consultant on-call.

### Contract details

The clinical commitment in this role is a 3-year contract of 0.6-1 (FTE) 24hrs-40/ week. With sponsorship for PhD/MD/ MSc/ MBA Once agreed by the SMTs. Clinical shifts are 12 or 24-hour and can be flexible to fit around outside commitments. HCA offers a Flex-pool contract which is well remunerated for flexibility required, working at multiple sites. This may require more flexibility in work pattern as opposed to a permanent /fixed agreement.

### The successful applicant must have:

- GMC registration and be in good upstanding with GMC.
- Completed foundation training and at least 3-4 further years of anaesthetics/ stage 1 ICM or ACCS.
- At least 1 years' experience of anaesthesia and ICU ALS and one of four Major Trauma Centres in London. The trust also provides general acute secondary care together with tertiary specialties including cardiothoracic, neurosciences and specialist obstetric and paediatric services. It is one of the few sites in the UK to provide such a diversity of anaesthetic experience on one site.

**Queries:** Dr Ramin Ajami: [ramin.ajami@hcahealthcare.co.uk](mailto:ramin.ajami@hcahealthcare.co.uk) Dr  
Lisa Wilson: [Lisa.Wilson@hcahealthcare.co.uk](mailto:Lisa.Wilson@hcahealthcare.co.uk)

## 2. King Edward VII Critical Care Unit

The KEVII is a private healthcare facility in central London and its 4-bedded critical care unit provides Level 2 support to patients on-site and is a base for transfer of more critically unwell patients to external Level 3 facilities. The clinical commitment in this role will be 7 x 24h shifts per month. Candidates will require at least 6 months' critical care experience and the Final FRCA examination.

**Queries:** Dr John Goldstone, Consultant in Critical Care: [john@goldstone.org.uk](mailto:john@goldstone.org.uk)

## 3. London Clinic Critical Care Unit

The London Clinic has a busy 11-bedded unit, which admits Level 2/3 patients from a wide range of specialties, including haematology, oncology, surgery and medicine, providing all modalities of organ support and fully supported by consultants in Intensive Care Medicine. The clinical commitment in this role will be 6 x 24h shifts per month. Candidates will require at least 6 months' critical care experience and the Final FRCA examination.

**Queries:** Dr John Goldstone, Consultant in Critical Care: [john@goldstone.org.uk](mailto:john@goldstone.org.uk)

## 5. Nottingham University Hospitals NHS Trust – anaesthetic department or critical care unit

Nottingham University Hospitals NHS Trust is the principal provider of acute general, specialist and tertiary hospital care to the population of Nottingham, receiving 98 per cent of all elective and urgent referrals from primary care trusts in Nottinghamshire. We currently have 2,100 hospital beds. NUH is the East Midlands Major Trauma Centre.

Critical care and anaesthesia are part of the Specialist Support directorate, which incorporates critical care, anaesthesia, theatres, pain and sterile services across NUH. Across the two campuses, there are 49 operating theatres. All surgical specialties are covered between the two campuses. There are approximately 100 consultant anaesthetists and 50 trainees.

There are three distinct adult critical care areas managed by specialist support across the Trust on two campuses. On the Queen's campus, the critical care area is divided into a 29-bedded Intensive Care (level 3 beds) and the current 20-bedded level 2 high dependency area. Around 1500 patients per year are admitted to the QMC ICU and approximately 1600 to the Level 2 area.

The Clinical Departments of Anaesthesia and Critical Care maintain close links with the University Department headed by Professor Jonathan Hardman. The Clinical and University departments collaborate to provide teaching for undergraduates in addition to all grades of anaesthetic trainees.

### i. ICU-based fellow (senior)

The successful applicant will need to be from an anaesthesia (airway) or Stage 2 ICM background. They would need to have completed Stage 1 Anaesthesia or ICM training and we would need them to do one weekday shift and the full afterhours on call, which works out to 1:8 nights and weekends.

### ii. Anaesthesia-based fellow (senior)

The successful applicant will be taking part in the senior out-of-hours on call rota covering the QMC (major trauma) site. They will need to be ST5+. The rota is 1:8 (nights and weekends)

**Queries:** Dr Myles Dowling (anaesthesia): [myles.dowling@nuh.nhs.uk](mailto:myles.dowling@nuh.nhs.uk)  
Dr Gurmukh Sandhu (ICU): [gurmukh.sandhu@nuh.nhs.uk](mailto:gurmukh.sandhu@nuh.nhs.uk)

## 6. St George's Hospital anaesthetic department

St George's Hospital NHS Trust is one of the largest healthcare providers in the UK and one of four Major Trauma Centres in London. The trust also provides general acute secondary care together with tertiary specialties including cardiothoracic, neurosciences and specialist obstetric and paediatric services. It is one of the few sites in the UK to provide such a diversity of anaesthetic experience on one site.

The anaesthetic department at St George's Hospital is a large department which has received Anaesthetic Clinical Services Accreditation (ACSA) in recognition of the excellent services it provides. There are weekly anaesthetic educational meetings, regular clinical governance, morbidity, and mortality meetings as well as a teaching programme for trainee anaesthetists, including FRCA exam preparation. As well as a full range of clinical specialties, the department has a high-risk anaesthetic clinic, prehabilitation service and PACU.

This post holder can occupy a slot on either the senior or junior emergency theatres rota, or the obstetrics rota, with a 1 in 8 on-call commitment.

The senior rota is intended for senior trainee anaesthetists, or those with CCT who want to enhance their CV by developing further clinical experience. Possession of the final FRCA examination or equivalent is required. It is the aim of these posts to help prepare the anaesthetist for taking on the responsibility of becoming a consultant, within a safe environment in which advice and support are readily available.

The junior rota is designed for an anaesthetist with 2 years' experience and preferably the primary FRCA or equivalent, with an interest in developing further experience and skills obtainable at a busy London teaching hospital.

The obstetric rota is covering delivery suite duties in a busy tertiary referral centre, with a maternal and foetal medicine service, seeing 5000 deliveries annually.

**Queries:** Dr Carolyn Johnston: [Carolyn.Johnston@stgeorges.nhs.uk](mailto:Carolyn.Johnston@stgeorges.nhs.uk)

## 7. Royal United Hospital, Bath

Royal United Hospital, Bath is a busy DGH in the south west of England. The department of anaesthesia and intensive care is a well-regarded department nationally and a popular rotation in the Severn school of anaesthesia. It undertakes all major surgery with the exception of transplant, cardiac, thoracic, vascular, major hepatobiliary and neurosurgery. It has a particularly busy emergency general surgery workload and has a keen interest in emergency laparotomy, having made significant improvements in this field. The department also has a very active research programme, led by Professor Tim Cook, particularly in the area of airway research. There is also excellent QI support in the department, led by Dr Lesley Jordan with formal nationally recognised training available.

The successful applicant will be released from a minimum of 40% of normal daytime clinical activities to participate in the national research project. The remainder of the time will provide clinical anaesthesia for elective surgery with the possibility to tailor sessions to the fellow's particular specialist interest. The successful candidate will also participate in half share of the 1:8 registrar third on-call rotas, covering junior trainees working in emergency theatres, labour ward and intensive care out of hours or the second on obstetric rota depending on seniority. The successful candidate must therefore have obstetric anaesthetic competencies. Regular time will also be allocated for development of local QI and research projects.

**Queries:** Dr Lesley Jordan: [lesleyjordan1@nhs.net](mailto:lesleyjordan1@nhs.net)

## 8. James Cook University Hospital anaesthetic department

### **Project commitment**

There is a 50% commitment to project time.

### **Clinical commitment**

There is a 50% clinical service commitment inclusive of a 1 in 4, weekend daytime Friarage Hospital anaesthetic on call requirement. Further out of hours on-call in support of the James Cook University anaesthesia rota tiers may be required to a maximum overall on-call frequency of 1:8. ITU is covered as a separate rota. All rotas are EWTD compliant. There is a service commitment to daytime elective and emergency anaesthesia delivery at both James Cook University Hospital and Friarage Hospital. There will be opportunity to tailor lists to individual interests to enable fellows to build expertise in a particular area. All clinical activity will be matched to the fellow's level of training and will include appropriate consultant clinical and educational supervision.

James Cook University Hospital (JCUH) is a 1000 bed tertiary teaching hospital and major trauma centre based in Middlesbrough (and only 10 miles from the North Yorkshire Moors!). The anaesthetic department consists of 75 consultants (including 8 military) and 2 SAS grade doctors. In addition, there are 46 trainees in anaesthesia who rotate within the Northern School of Anaesthesia, part of Health Education England North East. We also employ Trust Grade Doctors and Doctors on the MTL programme. JCUH delivers anaesthetic training to Stage 3 in all essential units except paediatrics and offers a large range of Stage 3 Special interest areas. The anaesthetic department has an active research department, which supports a number of academic projects. Dr Dave Murray, NELA chair, is also based at JCUH.

**Queries:** Dr Dave Murray: [dave.murray1@nhs.net](mailto:dave.murray1@nhs.net)

Dr Rebekah Thompson, Clinical Director, Perioperative Services [rebekah.thompson@nhs.net](mailto:rebekah.thompson@nhs.net) contact via anaesthetic department 01642 854600.

## 9. South West Ambulatory Orthopaedic Centre (SWAOC) at Exeter Nightingale Hospital

The NHS Nightingale Hospital Exeter was initially part of the national response to the COVID-19 pandemic, caring for nearly 250 patients with COVID-19 from across Devon, Somerset, and Dorset. It has now been transformed into a state-of-the-art facility and is home to the following services:

- South West Ambulatory Orthopaedic Centre
- Centre of Excellence for Eyes
- Devon Diagnostic Centre
- Exeter rheumatology department

The South West Ambulatory Orthopaedic Centre provides an innovative ambulatory pathway for patients undergoing hip and knee replacement surgery. The service has also expanded now to deliver soft tissue knee surgery, foot and ankle surgery, and spinal surgery is due to commence in late 2023. The centre consists of two operating theatres with supporting accommodation, ambulatory facilities, and some overnight accommodation. The multidisciplinary team have developed cutting edge pathways which deliver orthopaedic surgery with such precision that 60% of patients are able to go home on the same day as their joint replacement surgery (the remainder requiring only a single night in hospital).

### **Clinical Commitment**

The post holder will have an on-call commitment to the Nightingale, which is for up to 50% of the rota pattern. On-call shifts will be split 50:50 between service commitment and research. This will give the post holder 9 research days across 8 weeks.

There will be additional opportunities to spend time attached to consultant anaesthetists within our operating theatres to learn specific techniques to deliver successful ambulatory arthroplasty anaesthesia. Education supervision will be provided by the Royal Devon University Hospital, Exeter.

**Queries:** Consultant Anaesthetist- Dr Mary Stocker [mary.stocker@nhs.net](mailto:mary.stocker@nhs.net)  
Business Manager- Polly Budden [polly.budden@nhs.net](mailto:polly.budden@nhs.net)

## 10. University Hospitals Plymouth

Plymouth Hospitals NHS Trust is one of the largest providers of acute care in the country. We are the tertiary referral centre and Major Trauma Centre for Devon, Cornwall and part of Somerset serving a population of almost 2 million. All services are provided on a single site at Derriford Hospital. These include neurosurgery, maxillofacial surgery, upper and lower GI surgery, plastic surgery, renal transplantation, hepatobiliary surgery and cardiothoracic surgery.

We are a teaching hospital in partnership with the University of Plymouth, incorporating a thriving Medical & Dental School. We employ 6400 staff, have more than 900 beds, and over 48,000 people pass through the main entrance of our hospital in a week. Plymouth, Britain's Ocean City, occupies a stunning location. It is a perfect city for ambitious people looking to build a career, and enjoy a rich and rewarding life. Follow the link below to find out more:

<http://www.visitplymouth.co.uk/>

### **Anaesthetic Department**

The Anaesthetic Department is proud of its reputation as clinically excellent, forward thinking and friendly. We demonstrated this by being the first large unit in the UK to achieve Royal College Accreditation (ACSA) in June 2015 and subspecialty recognition for Neuroanaesthesia and Critical Care in 2016.

We routinely cover over 25 operating theatres, a busy maternity suite, endoscopy, interventional radiology and other "outside areas". We have a comprehensive pre-operative assessment service including > 800 Cardiopulmonary Exercise Tests annually.

We are proud to have colleagues in significant National and Regional Roles and producing excellent Research and Teaching. The Anaesthesia Directorate comprises more than 100 consultants or associate specialists, and approximately 40 trainees. Although large, the Department has a reputation for being supportive and friendly. We deliver > 20 000 PA of direct clinical care per annum in both the operating theatres and the wider hospital environment, and support 5 middle grade on call rotas.

### **Clinical Commitment**

The clinical commitment is 12 shifts a month (8 days, 4 nights)

The post holder will participate in on-call rotas across general & obstetric anaesthesia and critical care – and an additional clinical day per week, exact arrangements depending on experience and preference.

Whilst the CR&I provides the fellow's research project, on site academic mentorship, supervision and academic support is strong. University Hospitals Plymouth hosts a thriving Perioperative Medicine research agenda, currently supports four NIHR academic trainees across Critical Care, Translational, perioperative medicine and military anaesthesia themes. We are also the current host for the SWARM fellow ([www.ukswarm.com](http://www.ukswarm.com)) – linking anaesthesia research and audit across the 6 NHS acute hospitals in the Peninsula School. There are clear opportunities to build from an CR&I fellowship into a longstanding clinical academic career in Devon or Cornwall, balancing an excellent lifestyle with a great working environment.

**Queries:** Please direct further enquiries regarding the host department to Gary Minto, Consultant in Anaesthetics & Perioperative Medicine & Associate Medical Director of R&D for the Trust [gary.minto@nhs.net](mailto:gary.minto@nhs.net) or Dr Rob Jackson, Director of Critical Care [robertjackson1@nhs.net](mailto:robertjackson1@nhs.net)

## 11. Heartlands, Good Hope and Solihull Hospitals (HGS), University Hospitals Birmingham NHS Foundation Trust

The Anaesthesia and Critical Care Directorates have 70 Consultants working across 3 sites. Birmingham

Heartlands Hospital is the largest of the HGS Hospital group. It is located three miles from Birmingham City centre and seven miles from Birmingham University Medical School. It is a designated Teaching Hospital of the University of Birmingham.

HGS comprises approximately 1600 beds across the three sites providing a range of acute care specialities with a total of 33 critical care beds. We also cater to a wide variety of sub-specialties including major vascular and endo-vascular surgery, ENT, Colo-rectal, Upper GI, Urology and Bariatrics, HIV and Infectious Diseases, Respiratory medicine (including Cystic Fibrosis) and paediatric emergencies.

The Critical Care units admitted approximately 2100 patients in 2018 comprising approximately 40% level 3 and 60% level 2. The critical care unit is recognised for advanced training in ICM and boasts an active Critical Care Research Department with two Professorial posts, an NIHR Senior Lecturer and a team of research nurses. In the 2017 & 2018 GMC trainee surveys, HGS Critical Care was rated first in the West Midlands and in the top 10 in the country for training. In the last few years, our trainees and fellows have presented 23 projects at national and international meetings and written 27 book chapters.

Anaesthetic trainees will be exposed to a broad case mix of medical and surgical specialities which will provide excellent experience and opportunities for personal development. Trainees are well supported by an expanding group of dynamic and enthusiastic consultants. In addition, the hospital benefits from a well-established 24/7 Critical Care Outreach Team and Advanced Critical Care Practitioners who are also part of the shop floor Critical Care team.

The successful applicant will be taking part in the senior out-of-hours on call rota and should be capable of covering emergency theatre, obstetrics and general ICU on call. An ideal candidate will be ST5+ but we will also consider applicants ST3+. The rota is 1:8.

**For enquiries:** Dr Joyce Yeung [j.yeung.4@warwick.ac.uk](mailto:j.yeung.4@warwick.ac.uk)

## 12. Cardiff and Vale University Health Board

Cardiff and Vale University Health Board is one of the largest NHS organisations in the UK. We have a responsibility for the promotion of health and well-being of around 475,000 people living in Cardiff and the Vale of Glamorgan and serve a wider population of 2.5 million people across South and Mid Wales. This includes several tertiary services including being a major trauma centre, cardiothoracic surgery, PICU, paediatric surgery, neurosurgery, cardiology, medical genetics, bone marrow transplantation, renal transplant and toxicology. On-site services are situated in the Children's Hospital for Wales, University Hospitals of Cardiff and University Hospital Llandough. We are also a teaching Health Board with close links to Cardiff University which boasts a high-profile teaching, research and development role within the UK and abroad, and enjoy strengthened links with the University of South Wales and Cardiff Metropolitan University.

We are situated in beautiful South Wales – with all the advantages of a capital city combined with stunning countryside and affordable accommodation.

**Clinical Commitment:** The post holder will have a 1:7 on-call commitment (2B rota) which will be primarily for enhanced recovery and emergency call cover in Llandough, although this could cover other trainee rotas as appropriate. This will give the post holder approximately 19 pure research days across 7 weeks, and 5 days when research can be undertaken along with clinical duties.

The rota is designed for an anaesthetist with a minimum of 1 year's NHS experience, 2 years' anaesthetic experience and the primary FRCA or equivalent.

**Queries:** Consultant Anaesthetist and clinical director Dr Naomi Goodwin [naomi.goodwin@wales.nhs.uk](mailto:naomi.goodwin@wales.nhs.uk)

## Salaries and Expenses

**Salaries** will be covered by the employing partner hospital in accordance with standard NHS / independent sector pay scales and the candidate's level of clinical experience.

All **travel expenses** for work undertaken for the RCoA and CR&I will be refunded by the RCoA in accordance with its expenses policy.

**Relocation expenses** must be met by the candidate.

**PhD Fees:** Fellows who wish to undertake a higher degree will be supported. PhD funding is not automatic and will need to be funded from other sources.

## Person Specification

See entries for individual hospitals for details of clinical experience required.

All posts will require an individual who has excellent communication skills, is highly organised, academically curious, self-starting, and able to work independently as well as within a complex multidisciplinary team. No prior research experience is expected but evidence that they are able to see a project through to completion, and of interests outside their usual daily work is essential.

## Supervision, Leave, Appraisal, Revalidation and Performance Management

### Clinical Supervision

This will be the responsibility of the hospital, in accordance with usual training requirements (a named educational supervisor, and direct or indirect supervision as appropriate for all clinical duties).

### Academic supervision

The academic supervisor listed with each post will be responsible for the non-clinical work undertaken by the candidate.

### Leave

Annual, sick, parental, compassionate and carers leave should be in keeping with the hospital's usual policies.

Approval for study leave is at the discretion of the employing hospital.

### Appraisal, revalidation and performance management

The appointed candidate will require annual appraisal: if they hold a UK training number, this would be via the ARCP process; if not, the hospital should be responsible for supporting them in having an annual appraisal. Performance management of clinical duties will be conducted in keeping with usual hospital/GMC and training policies.

The policy for performance management of duties undertaken for the RCoA / CR&I will be detailed in an MOU that will be signed at the beginning of the post.

## How to apply

If you are interested in these posts, please send the following to [CRI@coa.ac.uk](mailto:CRI@coa.ac.uk):

**CV with contact details for two referees and confirmation of eligibility to work in the UK**

1. **Covering letter which must indicate:**
  - **Which geographical location(s), in order of preference, you would like to be considered for**

## Important Dates

**Closing date for applications: Friday 12<sup>th</sup> January at 5pm**

**Shortlisting and interviews: W/C 22<sup>nd</sup> January 2024**