Appointment of 
Clinical Fellow (Higher ST3 - ST5) 
in Cardiothoracic Radiology

Available to commence from 02 August 2023 for 6 months.

Post Reference No. 180-CFH-4470

Medical Staffing Department  
Box: 154  
Cambridge University Hospitals NHS Foundation Trust  
Cambridge Biomedical Campus  
Hills Road, Cambridge  
CB2 0QQ

Medical Staffing: 01223 596311  
cuh.medical.staffing@nhs.net  
www.cuh.nhs.uk
Duties of this post

This post is to provide further specialist training for a Radiologist wishing to pursue a sub-specialty interest in cardiothoracic radiology.

The working week will comprise 1 session of general CT reporting, 7-8 sessions of cardiothoracic specialty reporting and 1-2 sessions of study/research (total 10).

Cardiothoracic Imaging

This Fellowship will provide extensive experience in cardiothoracic imaging through exposure to all cross-sectional imaging modalities. Within thoracic imaging this will include exposure to reporting and MDTs in lung cancer, hyperinflation LVR procedures, asthma, immunology, TB, ILD, and national pneumothorax MDT. Within cardiac imaging, the post will include reporting cardiac CT and cardiac MRI and a weekly cardiac imaging MDT. The Fellow will be expected to actively participate in the reporting of studies, as well as in consultations with clinical staff and various multidisciplinary team meetings and clinical conferences.

They are also encouraged to participate in research projects focused on oncological imaging including cutting-edge hyperpolarised imaging and the emerging field of radiogenomics.

Contact:

Dr Judith Babar - j.babar@nhs.net
Dr Sumit Karia - sumit.karia2@nhs.net

Teaching and Training

This will be a senior appointment and there will be an emphasis on self-development under the supervision of the Radiologist of the area that you sub-specialise in. Appraisal will consist of informal, on-going monitoring with more formal assessment in the form of entry and exit interviews.

There will be an in-course mentoring arrangement to ensure completion of the candidate’s and the department’s objectives. In recognition of the varied interests of candidates at this level, opportunities will be flexible, whilst ensuring that an overall high standard of skills and knowledge is achieved. There will be access to computer facilities, including email and internet access.

The person appointed will be expected to take part in teaching offered to Junior Registrars in Radiology, and to present at Clinico-Radiological meetings, and where appropriate at Grand Rounds.

Research

We strive to be an internationally competitive department undertaking innovative research in medical imaging. We have a team of dedicated academic Radiologists working with imaging scientists with an active doctoral and post-doctoral research programme. We have extensive facilities across Addenbrooke’s Hospital, including one 3T MRI, five 1.5T MRI machines, PET CT and four CT machines on which we undertake research.

There is a large Ultrasound Department and a Nuclear Medicine facility. We are part of the Wolfson Brain Imaging Centre (WBIC) which undertakes both neuro and body imaging on the 7T, two 3T MR machines and a PET MR machine.

The Department undertakes research in cardiovascular imaging, neuroimaging and oncological imaging as well as supporting a strong musculoskeletal programme. Imaging is undertaken on the NHS imaging machines as well as on the University machines and covers MRI, PET and CT
as well as breast imaging techniques. Novel imaging is undertaken in MRI with new sequences being developed and translated. There is a strong preclinical and clinical hyperpolariser programmes and optoacoustic imaging.

The current academic staff in the University Department of Radiology comprises the Professor of Radiology (Professor Fiona Gilbert, Head of Department), Professor of Clinical MRI (vacant post), Professor of Translational imaging (Professor Ferdia Gallagher), three University Lecturers (Dr Tristan Barrett and Dr Tomasz Matys and Dr Luigi Aloj).

There is an innovative teaching programme for both undergraduates and postgraduate students. Radiology is an integral part of the clinical training curriculum and, due to the increasing use of medical images in clinical management, greater emphasis is now placed on Radiology as a discipline and the use of imaging to support teaching in other disciplines. There is very strong Postgraduate Training in Clinical Radiology and Nuclear Medicine.

**Study & Training**

There may be the opportunity to join and contribute to existing research in the sub-specialty area. There are numerous opportunities to learn and develop research skills within an active research department. There will be several opportunities during this post to present research work both at local and national or international meetings.
The Department of Radiology

The Directorate of Radiology is one of seventeen Clinical Directorates within the Trust. There are a total of 60 Consultant Radiologists and 34 Specialty Registrars. The Clinical Director is Dr Helen Addley and the Divisional Director is Dr Hugo Ford. The Directorate maintains very good relationships with all other Clinical Directorates with 20+ regular Clinico-Radiological meetings on a weekly basis. There is close collaboration between the NHS and University Departments of Radiology. The Nuclear Medicine Department lies within the Radiology Directorate.

The Radiology Directorate performs over 380,000 examinations per annum.

The Radiology department is situated on three floors. General rooms, CT suite, and MRI suite are sited on level 2, fluoroscopy and ultrasound on level 3 and separate neuro-angiography and body angiography suites on level 4. There is a second angiography suite located on level 2, next to the Emergency Department.

The Nuclear Medicine department is situated on levels 2 and 3 of the out-patient department and its facilities include 4 Gamma cameras.

The CT suite comprises of 5 multi detector machines, two 16, two 64 slice and a 128 slice respectively. The MR department has four 1.5 Tesla units, one 3.0 Tesla MR unit and a 1.5 Tesla mobile unit.

The Ultrasound department has 8 dedicated ultrasound rooms each equipped with a high specification machine complete with colour flow and power Doppler.

The Neuro-Angiography and one of the two body angiography suites are undergoing replacement with new equipment.

In the Wolfson Brain Imaging Centre there is a Cyclotron, a PET unit and two 3T and a 7T MR units, primarily for research work.

There is an NHS PET/CT facility on-site and a PET-MRI unit, and a Trust wide PACS system is used, and the Radiology Day Unit increases the facility for day case interventional procedures.

MRI

Dr David Bowden and Professor Ferdia Gallagher are Co-lead Consultants of the MRIS Unit, which provides a full range of diagnostic MR Services for the local population and specialist MRI examinations for the Anglian Region supported by 5 Clinical MRI systems.

The MRIS Unit was established in 1987 and is a purpose built facility adjacent to the main ward blocks, which was set up with (and continues to receive) support from AHCSAF and its replacement charity the ACT. A variable field system was originally installed and over the subsequent years replaced and upgraded regularly.

The Unit itself houses two 1.5T whole body systems of recent specification and a recently replaced 3T system, as well as operating the 1.5T system in the Main Radiology Department and a 1.5T system within the Rosie Maternity Hospital. All five systems have extensive capabilities for both routine and specialized body and neurological MR examinations. In addition research access is available on all systems allowing for prototype sequence and application development and application through a comprehensive research agreement with the vendor (GE Medical Systems). Spectroscopy capability is available at both 1.5T and 3T. The systems are extensively networked within the department and a wide range of review stations are in use alongside the full PACS implementation.
A wide range of research development activity takes place in MRI covering both basic sequence development and evaluation of new clinical applications. Research support includes specialized physics support with pulse programming capability and advanced image analysis for specific projects. A comprehensive range of networked computing and image processing tools are available.

Currently there are dedicated sessions on the MRI systems covering Musculo-skeletal, Hepatobiliary, GI, Paediatrics, Angiography and pelvic MRI. These cover the expanding indications for body MRI including routine Oncology staging for pelvic and other tumours, as well as advanced imaging of hepatobiliary, renal and adrenal lesions.

**CT**

Addenbrooke’s pioneered much early work in CT following the installation of cranial CT in 1978 and body CT in 1981. Professor A Dixon (now retired) was responsible for the development and expansion of body CT since then and the department now benefits from some of the best multi-detector equipment available in the UK and Europe.

The current Lead Consultant for CT is Dr Ines Harper. Approximately 20 Consultants undertake regular reporting on one or more of the 4 CT systems which provide for both neuro and body CT examinations. They encompass the range of available helical CT technologies with 16, 64 and 128-slice capability in adjacent suites. A wide range of examinations is performed, including diagnostic, staging and interventional procedures and supported by advanced workstation analysis and reporting tools. There has been a keen research interest in thoracic and abdominal imaging with several seminal papers on clinical CT emerging from the Unit.

**Nuclear Medicine**

A comprehensive range of diagnostic Nuclear Medicine studies is performed within the Nuclear Medicine Department, amounting to over 6,000 patient investigations per year. Radionuclide therapy is also undertaken within the department. The department has three gamma cameras, SPECT-CT, a low level whole body counter and various non-imaging probe counting equipment.

There are two whole time equivalent Consultants and Dr Luigi Aloj is the Clinical Lead Consultant. The PET CT Research Unit is managed by the Nuclear Medicine team. The Unit has state-of-the-art equipment and facilities for specialised PET studies. Several national and international projects are currently in progress. Most of the clinical PET-CT studies are performed by a private company procured by Department of Health but this is likely to change during 2015. Dr HK Cheow is the Lead Consultant for this Service.

**Plain Film Services**

In contrast to many large departments, and as attractive as many of the specialist areas of Radiology have become, the attitude to plain film reporting at Addenbrooke’s is predicated by the fact that 60% of radiological investigations in the UK are plain films, and these are frequently challenging and of immense importance to the patient and the referring Clinician. To add value to Clinicians interpreting their own plain films, the report should be both accurate and timely. Plain film reporting is not delegated to the least experienced trainees but is undertaken by Consultants and Senior StRs. Many are reported within minutes of being obtained and it is rare for a radiograph to remain unreported for more than 24 hours.

The Emergency Department trauma radiographs are reported by relatively inexperienced juniors, enabling them to acquire reporting skills, but all reports are subsequently checked and radiographs re-read by a Consultant. There is essentially no plain film backlog. It is important that this ethos is understood and shared by prospective applicants for a position in this department.
Oncology

Addenbrooke’s is a Major Oncology Centre providing services for the local population, East Anglia, and beyond. Radiologists play a central role in the management of these patients and there are numerous Clinico-Radiology and MDT meetings for general and site-specific Oncology. These provide valuable feedback and integrated decision making on staging and monitoring Oncology treatment. The department is well stocked with CT, US and MRI equipment and Addenbrooke’s is an active research and teaching environment with plenty of opportunities to develop any interests or become involved in existing projects.

In addition to these core services, there is an active Oncology Clinical Trials Unit and we are currently developing an Early Phase Clinical Trials Unit. The Department of Radiology has close links with the cancer research institute, funded by CRUK, on the Addenbrooke’s site, with several collaborative projects ongoing with the aim of developing true translational research on a single site from molecular biology, through small animal studies and in to humans.

Staffing: NHS and Academic

The present Radiology medical staff establishment comprises:

<table>
<thead>
<tr>
<th>Subspecialty</th>
<th>Consultants</th>
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<tr>
<td><strong>1 Breast</strong></td>
<td>James Tanner (CL) Penny Moyle Professor Fiona Gilbert (head of academic department) Fleur Kilburn-Toppin Helen Taylor Nuala Healy Matthew Wallis Ruchi Sinnatamby Falak Masood Elisabetta Giannotti Iris Allajbeu (Academic cross-sectional)</td>
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<tr>
<td><strong>2 Cardiothoracic</strong></td>
<td>Judith Babar (CL) Allanah Barker Angela Tasker Deepa Gopalan Nicholas Screaton Sumit Karia Maria Wetscherek Marusa Kotnik Tim Sadler (Thorax &amp; Cross Sectional)</td>
</tr>
<tr>
<td><strong>3 Gastrointestinal</strong></td>
<td>Edmund Godfrey (CL) Ashley Shaw David Bowden Helen Stunell Nicholas Carroll Samir Khwaja Sara Upponi Katy Hickman</td>
</tr>
<tr>
<td><strong>4 Genitourinary/ Gynae</strong></td>
<td>Tristan Barrett (CL - GU) Sue Freeman (CL – Gynae) Helen Addley Iztok Caglic Janette Smith Ishwariya Rajendran</td>
</tr>
<tr>
<td><strong>5 Interventional Radiology</strong></td>
<td>Andrew Winterbottom (CL)</td>
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| MSK | Emma Gerety (CL)  
|     | Andrew Grainger  
|     | Philipp Riede  
|     | Scott McDonald  
|     | Philip Bearcroft |
| Neck General | Lawrence Berman  
|   | Pat Set |
| Neuroradiology | Dan Scoffings (CL)  
|     | Justin Cross  
|     | Jonathan Jones (NIR)  
|     | Nicholas Higgins (NIR)  
|     | Poe Phyu  
|     | Tomasz Matys  
|     | Tilak Das  
|     | Josh Scott  
|     | Jen Jian Ping  
|     | Fulvio Zaccagna  
|     | Thais Minett (NIR)  
|     | Yogish Joshi (NIR)  
|     | Mohammed El- Behily (dental) |
| Nuclear Medicine | Luigi Aloj (CL – Nuclear Medicine)  
|     | HK Cheow (CL- PET CT)  
|     | Ines Harper  
|     | Iosif Mendichovszky  
|     | Professor Ferdia Gallagher (PET CT) |
| Paediatrics | Jacqueline Hughes (CL)  
|     | Anna Gomez  
|     | Ben Fleming |

There are currently 35 Radiology Specialty Trainees on the Cambridge Training Programme with additional Academic Trainees.

**Programme Director:** Dr P Reide  
**Deputy Programme Director:** Dr. N Healy  
**Regional Advisor:** Dr A Tasker (Papworth Hospital)  
**University Director:** Professor F Gilbert
### Educational Opportunities

#### EDUCATIONAL OPPORTUNITIES AVAILABLE IN THE DEPARTMENT:

- **In clinical reporting** -
  Reporting sessions in CT, MRI and plain films are supervised by one or more Consultants.

- **In MDT** -
  Many of our MDT's cover a range of specialties, and attendance and opportunity to lead the MDT is provided as part of sub-specialty training.

- **In procedural session** -
  Image guided biopsies and other procedures occur daily and the Fellow will have the opportunity to perform these procedures.

- **In Handover session** -
  Informal feedback and discussion of interesting cases is encouraged.

#### LOCAL / REGIONAL TEACHING:

- **Departmental** -
  Weekly Departmental Forum.

- **Access to Trust based teaching** -
  Grand Rounds and a range of lectures occur at regular intervals.

#### QUALITY IMPROVEMENT / AUDIT:

- **Details of opportunity to complete projects** -
  Consultants are willing to supervise Audit and quality improvement projects.

- **Attendance at M&M** -
  Monthly Risk/Governance meetings.
  Regular Radiology Discrepancy meetings.

- **Attendance at audit meetings** -
  Audit meetings are held every 2-3 months.

#### DEPARTMENTAL/LOCAL INDUCTION:

This will happen on the first few days of the job and is led by a Senior Trainee.

#### OTHER:

- **Research** -
  See separate section.

- **Teaching** -
  There are opportunities for Medical Student and Registrar teaching in the department.

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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](http://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

<table>
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<tr>
<th>Entry Criteria</th>
<th>Essential</th>
<th>Desirable</th>
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| **Qualifications** | MBBS or equivalent  
Full FRCR  
Full Registration and a Licence to Practice with the General Medical Council at point application | Postgraduate qualification such as MRCP, FRCS/MRCS, PhD etc  
Presentations/Publications |
| **Experience** | Completed a minimum of three years of training as a Specialty Registrar in Radiology in the UK or equivalent and hold the FRCR.  
Logbook indicating validated experience of appropriate range and number of clinical procedures | Completion of Specialty Registrar training in the UK or equivalent with CCT in Radiology |
| **Skills / Ability / Knowledge** | A fundamental knowledge of anatomy and pathology as related to medical practice  
Basic Training in General Radiology  
Ability to fulfil all duties of post  
Good pattern recognition  
Good manual dexterity with good eye-hand coordination  
Good organisation  
Ability to organise own learning and time  
Basic computer skills including Microsoft word and Outlook | |
| **Qualities / Attributes** | Ability to work as part of a team  
Ability to keep good medical records and communicate with other hospital departments and primary care  
Ability to understand and communicate with patients and colleagues | Ability to undertake research projects and audit  
Show interest in investigative, audit and research work outside immediate clinical responsibility |
## Entry Criteria

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<th>Language Requirements</th>
<th>Essential</th>
<th>Desirable</th>
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<td></td>
<td>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)</td>
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<tr>
<td></td>
<td>If the Primary Medical Qualification including clinical contact was not carried out using English, applicants must either:</td>
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<td></td>
<td>• 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 or</td>
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<tr>
<td></td>
<td>• 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</td>
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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 actives 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](http://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 Childrens Hospitals will be added to the campus, the first phase is due to be open by 2023. The Childrens 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.

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
Adrian Chamberlain
Dr Annette Doherty
Professor Ian Jacobs
Ali Layne-Smith
Professor Patrick H Maxwell
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 58,086 men, women and children were treated as inpatients, 130,729 people attended accident and emergency, and there were 868,889 visits to outpatient clinics (2021/2022 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 11,000 staff of which approx. 2,000 are medical and dental staff
- 5,573 births per year
Around 1,000 beds
195,455 admissions including inpatients, day cases and births (2020/2021 figures)

During 2021/22 we saw a substantial increase in overall activity compared to 2020/21. This was primarily due to the lower activity in 2020/21 which saw the largest fall across outpatients (-178,000) during the first and second waves of COVID. Compared to pre-COVID levels (2019/20) there was an increase for A&E attendances, outpatients, births and day cases. Over the same period, in-patient care reduced by up to 14%.

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
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.

We work with many partners in other NHS organisations, universities, research councils, research charities and industry to provide infrastructure and networks to build research capacity and support clinical research.

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; Bank; 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

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<th>Values</th>
<th>Behaviours</th>
<th>Love to see</th>
<th>Expect to see</th>
<th>Don’t want to see</th>
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<tbody>
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<td><strong>Safe</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Safety</td>
<td></td>
<td>Shares lessons learned to help others to improve safety.</td>
<td>Always follows agreed safety and wellbeing procedures. Learns from mistakes and asks for help if they need it.</td>
<td>Shows a lack of focus on safety and wellbeing in their day-to-day work.</td>
</tr>
<tr>
<td>Raising concerns</td>
<td>Encourages others to raise concerns about safety or attitude.</td>
<td>Speaks up every time standards on safety, care or dignity are not met.</td>
<td>Welcomes feedback.</td>
<td>Keeps concerns to themselves, and rejects feedback about their own behaviour.</td>
</tr>
<tr>
<td>Communication</td>
<td>Seeks ways to enhance understanding of information being communicated to meet people's needs.</td>
<td>Keeps people informed and gives clear explanations in ways people can understand.</td>
<td></td>
<td>Doesn’t give people the information they need. Uses jargon inappropriately.</td>
</tr>
<tr>
<td>Teamwork</td>
<td>Encourage others to contribute and demonstrates better ways of working within and across teams.</td>
<td>Works as part of a team. Co-operates and communicates with colleagues. Values other people’s views.</td>
<td></td>
<td>Excludes others and works in isolation.</td>
</tr>
<tr>
<td>Reassuringly professional</td>
<td>Is constantly aware that what they say and do affects how safe other people feel.</td>
<td>Is calm, patient and puts people at ease. Takes pride in their own appearance and the environment.</td>
<td>Passes on their negativity/strains. Is critical of others or colleagues in front of others. Displays unprofessional appearance.</td>
<td></td>
</tr>
<tr>
<td><strong>Kind</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Welcoming</td>
<td></td>
<td>Goes out of their way to make people feel welcome.</td>
<td>Is polite, friendly, makes eye contact, smiles where appropriate and introduces themselves. “Hello my name is…”</td>
<td>Ignores or avoids people. Is rude or abrupt, appears unapproachable/moody.</td>
</tr>
<tr>
<td>Respectful</td>
<td>Applies a broader understanding of the diverse needs of patients/colleagues. Supports others to be themselves.</td>
<td>Treats everyone as an equal and valued individual. Acts to protect people’s dignity.</td>
<td>Ignores people’s feelings or pain. Makes people feel bullied, belittled or judged.</td>
<td></td>
</tr>
<tr>
<td>Listen</td>
<td>Makes time to listen to people even when busy.</td>
<td>Listens to people in an attentive and responsive manner.</td>
<td>Disinterested, dismissive or talks over people.</td>
<td></td>
</tr>
<tr>
<td>Appreciate</td>
<td>Goes out of their way to make people feel valued for their efforts and achievements.</td>
<td>Encourages people’s efforts. Notices when people live up to our values, says thank you.</td>
<td>Doesn’t notice or appreciate people’s efforts.</td>
<td></td>
</tr>
<tr>
<td><strong>Excellent</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aiming high</td>
<td>Their positive attitude inspires others to achieve the highest levels of quality.</td>
<td>Always aims to achieve the best results.</td>
<td>Accepts mediocrity or means without looking for solutions.</td>
<td></td>
</tr>
<tr>
<td>Improving</td>
<td>Helps others to find creative solutions to problems and shares good practice.</td>
<td>Suggests ideas for better ways of doing things and looks for opportunities to learn.</td>
<td>Resists change: ‘we’ve always done it this way’.</td>
<td></td>
</tr>
<tr>
<td>Responsible</td>
<td>Shows enthusiasm and energy to achieve excellent results.</td>
<td>Takes responsibility and has a positive attitude.</td>
<td>Avoids responsibility. Blames or criticises others.</td>
<td></td>
</tr>
<tr>
<td>Timely</td>
<td>Always respects the value of other people’s time.</td>
<td>Is on time, efficient, organised and tidy. Apologises and explains if people are kept waiting.</td>
<td>Misses deadlines or keeps people waiting, without explanation/apology.</td>
<td></td>
</tr>
<tr>
<td>Makes connections</td>
<td>Helps others to understand how services connect.</td>
<td>Thinks beyond their own job and learn to make things easier for people.</td>
<td>Focuses on their own department needs to the detriment of the people they serve.</td>
<td></td>
</tr>
</tbody>
</table>

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Together - **Safe** | **Kind** | **Excellent**

Addenbrooke’s Hospital | Rosie Hospital
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 at ST3-ST5 equivalent is £51,017.00 per annum (April 2022 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.