Proposal for a Sentinel Node Biopsy and Melanoma Surgery Fellowship at the Royal Surrey County Hospital

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Institution

The RSCH is a medium sized DGH with 520 beds which houses St Luke's Cancer Centre, the Regional Cancer Centre for the Surrey Sussex and NW Hants Cancer network.

We have 10 main operating theatres and 3 day case theatres and host the regional PDT (photodynamic therapy) service for skin cancer. The OMF department treats over 2000 new NMSC patients per year and 40 new cutaneous melanoma patients per year, 20 of whom have sentinel node biopsy (SNB). Our Breast and Melanoma Surgical Colleagues carry out large numbers of SNB's per year and will be actively involved in the training of the Fellow, who will spend dedicated time in their lists.

We currently have 7 OMFS Consultants, 4 of whom are core members of the Specialist Skin cancer MDT (SSMDT). We have 3 Specialty Trainees and 5 Specialty doctors/dentists, along with 7 Dental Core trainees.

Our ST's gain exposure to a large number of skin cancer cases per year, and regularly achieve figures in their logbooks while at our unit of more than 10x the indicative numbers of skin excisions, and 4 x the indicative numbers of skin defect reconstructive options.

We have a well established skin cancer specialist MDT, with members who have national reputations in skin cancer research and involvement in authorship of national guidelines.

The SSMDT covers a population of 2 million.

Our oncology colleagues are actively involved in melanoma research, and our SSMDT the second highest recruiters to melanoma trials of new therapies in the UK.

The OMF department deals with both melanoma and NMSC, and has established a well regarded and thriving SNB service for the region, with excellent audited and published outcomes.

Skin cancer is increasing exponentially in incidence, and OMF surgeons are becoming increasingly the leaders in the management of head and neck skin cancer. Our specialty has a long tradition of expanding into areas of work in which we have anatomical expertise but have not been classically part of the more traditional work of OMFS. Higher Surgical Trainees from our unit have all been well trained in the management of skin cancer and have continued to do this work as Consultants further afield and train further registrars, thus increasing the expansion of our role in this work.

The management of melanoma remains less commonly seen as our domain, and this Fellowship gives the opportunity to train in detailed aspects of more complex skin cancer management to further increase our footprint in this area.

Fellowship Details

Fellowship in Sentinel Node Biopsy and Melanoma Surgery. A 6 month post for post CCT OMF Specialty trainees.

The Fellow will spend time in skin cancer clinics, operating lists and with oncology and dermatology colleagues.

There will be no individual service day time delivery.

Involvement in the 1 in 6 on-call rota will be available and funded.

We currently have identified 6.5 PA's to fund the daytime activity and the post is supported by the trust management team. There is we understand, the possibility of funding to be transferred if the holder is within a grace period at the end of ST training.

Completion criteria.

I have enclosed the recent draft for the ISCP curriculum for conditions of the skin-(CN, May 2017, still to be approved)

The current draft operative section includes levels of competency at the end of the fellowship in bold-procedures such as SNB and the management of regional skin cancer metastatic disease.

See Curriculum details later.

Other completion criteria will include

- Publication of a paper in a peer reviewed journal
- Publication of an audit
- Presentation at a national meeting

Cross specialty collaboration will be with Oncology and Dermatology.

This Fellowship is a new proposal. The department has 3 years history of accommodating a Cosmetic Fellow from the TIG scheme. The TIG fellow attends facial deformity lists at RSCH on an ad hoc basis, but is mainly based in the private sector.

The responsibilities will include the following job plan.

Mon am- Oncology theatre

Mon pm- CN skin cancer clinic- CN and the Macmillan skin cancer CNS

Tues am/pm Main theatre all day- OMFS and Breast/Melanoma teams, learning SNB techniques

Weds am DSU LA skin cancer list, pm - research/audit

Thurs am Skin cancer SSMDT followed by Oncology skin cancer clinic/ RT session alternately

Friday- visiting dermatology units/clinics across the network, including access to observation of Mohs surgery.

I in 6 on call at ST level second on- on a 3 tier rota at RSCH, the regional OMFS centre.

Recruitment

The post will be every 6 months, commencing January and July, recurring. The post holder will be post CCT, with the exit FRCS and full GMC registration.

Curriculum content and structure.

The fellowship will follow the ISCP structure for the module- conditions of the skin. A draft version for the new curriculum is included below.

Conditions of the skin module

Fellowship	Inter	ССТ	SI
Entry	inter		0

Outcome	The assessment and management of a patient presenting with <u>conditions of</u> <u>the skin</u>							
	A trainee will be required, in their portfolio, to provide evidence of their deepening understanding, capability and competence at the marked level for their stage of training. This will include evidence of their expanding knowledge, clinical skills, general professional capabilities and clinical thinking.							
The f	ollowing	themes w	vill permea	ate throughout the m	odul	e. The develop	oment of:	
Professional valu virtues, conduct discipline and p	robity	The ability with comple uncertainty	exity and	Meticulousness in recording evidence through written reflection and critical perspectives of deepening personal capacity for the purposes of patient care and patient safety	critical f sonal e tient			
Compete			Co	ompetence Level:	Competence level:			
Applied I	Knowled	lge		Clinical Skills				

		Clinical Thinking (decision making and professional judgement)
1 = Knows of	0 = No experience	0 = Hasty/ habitual
2 = Knows basic concepts	1 = Has observed or knows of	1 = Self Defensive
3 = Knows generally	2 = Can manage with assistance	2 = Maturing
4 = Knows specifically and broadly	3 = Can manage whole but may need assistance	3 = Consistently mature and reliable
	4a = Able to manage without assistance including potential complications	4 = Showing wisdom
	4b = Able to manage complex cases and their associated potential complications	

Торіс		essment	Competence Level					
	Method of learning	Means of assessment	Clinical	Knowledge	Clinical	Skills	Clinical	
Applied Knowledge								
Anatomy								
Applied anatomy of the skin	Texts	CBD, exam		4				
Applied anatomy of the lymphatic drainage of the skin of the head and neck		CBD, exam		4				
Applied anatomy of structures deep to the skin of the head and neck		CBD, exam		4				
Pathology								
Pathology of benign skin lesions		CBD, exam		4				
Pathology of pre-malignant skin lesions								
Pathology of malignant skin lesions		CBD, exam		4				

Pathology of infective diseases of the skin	CBD, exam	4	
Pathology of inflammatory disease of the skin of the head and neck	CBD, exam	4	
Pathology of skin manifestations of oral medicine conditions of the oral mucosa	CBD, exam	4	
Physiology			
The functions of the skin	CBD, exam	4	
Diagnostics			
Principles, indications and interpretation of dermoscopy	CBD, exam	4	
Principles, indications and interpretation of cytology and histology	CBD, exam	3	
Principles, indications and interpretation of radiological investigations	CBD, exam	4	
Principles, indications and interpretation of haematological investigations	CBD, exam	4	
Classification of skin conditions			
Classification of benign skin lesions	CBD, exam	4	
Classification of pre-malignant skin lesions	CBD, exam	4	
Classification of malignant skin lesions	CBD, exam	4	
Classification of infective diseases of the skin	CBD, exam	4	
Classification of inflammatory disease of the skin of the head and neck	CBD, exam	4	
Classification of skin manifestations of oral medicine conditions of the oral mucosa	CBD, exam	4	
Multi- disciplinary care			
The role of the local and specialist skin MDT in the management of the skin cancer patient			

Psychology			
Psychological effects and management of the patient with a skin condition		3	

Pain			
		1	
Pain relief in the patient with a condition of the skin		4	
Dermatology			
The role of the dermatologist in the management of conditions of the skin	CBD, exam	4	
The non- surgical management of lesions and conditions of the skin		4	
Radiology			
Principles, indications and interpretation of imaging of primary malignant skin lesions	CBD, exam	4	
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Principles, indications and interpretation of imaging of malignant skin lesions for regional metastasis		4	
Principles, indications and interpretation of imaging of distant metastatic skin malignancy	CBD, exam	3	
Oncology			
Principles and indication for radiotherapy in skin conditions	CBD, exam	3	
Role of chemotherapy and immunotherapy in skin cancer management	CBD, exam	3	
Complications and risks of conservative and operative management			
Factors contributing to and prediction of potential complications and risks	CBD Exam	4	
	CBD Exam		
Management strategies for potential complications		4	
Critical Conditions – basic science, pathology, complications			
Cellulitis, necrotising fasciitis, post-operative infections	CBD Exam	4	
Relevant Guidelines			
Knowledge of NICE, SIGN and BAD Guidelines on the management of skin cancer	CBD, exam	4	
Clinical Skills			
Assessment, diagnosis and treatment planning			

				4b
Benign skin lesions				4b
Pre-malignant skin lesions				
Malignant skin lesions (including staging)				4b
Infective diseases of the skin				4b
Inflammatory disease of the skin of the head and neck				3
Skin manifestations of conditions of the oral mucosa				4b
				4b
Consent				
Moral and medico-legal competence		Cex CBD Ex	4	4b
Operative Management				
Infiltration and nerve blocks for local anaesthesia	S	PBA		4b
Surgical diagnosis and treatment of primary skin lesions	S	PBA		4b
Reconstruction of skin defects	S	PBA		4a (4b)
Parotid/cervical lymph node biopsy	S	PBA		4a (4b)
Sentinel node biopsy	S	PBA		3 (4b)
Therapeutic lymphadenectomy for regional metastatic skin cancer	S	PBA		4a (4b)
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Skills to be obtained beyond CCT include.

Wide ranging options for reconstruction of the head and neck skin defect.

The holistic management of the skin cancer patient – particularly melanoma.

Competency in sentinel node biopsy of the head and neck- (there will be cross over with the head and neck team's development of a SNB service for oral cavity cancer as per the new NICE Guidance.)

Learning and teaching.

Learning will be immersive and supportive. The Fellow will have the opportunity to develop their skills to complement their own learning styles. There will be access to e-learning for dermatology, and the Fellow will be expected to complete the appropriate sections.

http://www.bad.org.uk/healthcare-professionals/education/dermatology-specialty-trainees/e-learningfor-dermatology

The Fellowship will include funding for the Fellow to attend Skin Cancer focused conferences such as Melanoma Focus which is held twice a year.

Our department delivers regional training to the OMFS STs for the KSS and London Deaneries which are well attended and the Fellow will be part of the faculty delivering the teaching.

The Educational Supervisor for the Fellow will be Miss Carrie Newlands, OMFS Consultant RSCH

(member of current BAD Guidelines writing groups for BCC and SCC)

Clinical supervisors will be

Mr Ben Gurney, OMFS Consultant RSCH

Dr Mazhar Ajaz, Clinical Oncologist and Reader at the University of Surrey, member of the NCRI skin cancer

Mr Farrohk Pakzad, Consultant Breast and Melanoma Surgeon RSCH

Miss Elizabeth Clayton, as above

Multiple Consultant Dermatologists from the SSSMDT.

Quality assurance and enhancement.

The Fellow will have monthly meetings with the Educational Supervisor to discuss progress and possibilities for improvement in both the delivery from the teachers, and the engagement of the Fellow.

The Fellow will have learning objectives agreed, and will be included in the review process of the departmental ST's. This will offer an opportunity for external review from those not directly involved in the delivery of the programme.

The Fellow will have the opportunity to contribute to the future development of the Fellowship by completing an on- line survey mid way and at the end of the 6 months.

Assessment.

ISCP will be used, and evidence of participation in e- learning for dermatology.

Logbooks will be kept.

Completion of the Fellowship.

Feedback will be provided by the Fellow and the supervisor.

Facilities

Office space and secretarial support will be provided. Inclusion in regional teaching will be expected. Access to ELFH will be provided, and UptoDate.

Fellow Support.

The Fellow will be employed under NHS terms and conditions and in line with trust and departmental policies.

Individual learning agreements will be developed with each Fellow and supplied.

Faculty Declaration of Interests.

We have no declarations of interest to declare.