



WORLD-CLASS POST CSCST FELLOWSHIPS IN IRELAND



# Aspire

FELLOWSHIPS

## APPLICATION AND OVERVIEW

2024 Aspire Post CSCST Fellowships

is now accepting applications for Aspire Post CSCST Fellowships to commence in July 2024.

Queries should be sent to:

Completed applications should be sent to:

**APPLICATIONS CLOSE:**

## Aspire Post CSCST Fellowships

The Aspire Post CSCST Fellowship Programme offers exceptional CSCST graduates the opportunity to work with a leading consultant on a 12 month tailored Fellowship Programme, which ensures fellows receive high-quality specialist and advanced clinical skills training to meet future healthcare needs. Post CSCST Fellowships offer an alternative to trainees now that Ireland's specialist clinical expertise and services have matured and developed. Those successful in securing a fellowship receive an SpR salary for the duration of the fellowship.

Since 2021, the NDTP has committed to funding 40 annual Post CSCST Fellowships across the acute, primary care and mental health specialities. These are internationally competitive posts which drive innovation and medical leadership, harnessing talented CSCST graduates in Ireland.

Successful fellows must hold a CSCST from an Irish Postgraduate Training Body and be within three years of completion of Higher Specialist Training in July 2024 or have entered the specialist division of the MCI register within two years.

The process of identifying fellowships and subsequent recruitment is managed through the relevant Postgraduate Training Bodies with input from the National Clinical Advisory Group Leads (NCAGL's) and National Clinical Programme (NCP's) as appropriate.



## 2024 Key Dates and Application Process

Interested consultants should complete the form on the following pages and return it to the relevant Postgraduate Training Body (as outlined on page 2) by July 31st. Please pay close attention to the evaluation criteria at the end of the document when creating your proposal.

Between August and September, the Postgraduate Training Bodies will establish a panel for the review and selection of fellowships with input from relevant faculty and NCAGL / NCPs.

### 2024 Programme Timeline

**May 17th - July 31st:** Call for proposals

**July 31st:** Final date for proposals

**July 31st - Sept 21st:** The Postgraduate Training Body establishes a panel for the review and selection of fellowships with input from relevant faculty and NCAGL / NCPs

**Sept 25th:** Fellowships will be confirmed

**Oct 2nd:** Fellowship positions will be advertised

**Dec 18th:** Final date for prospective fellows to apply for positions



## **Aspire Post CSCST Fellowship 2024-2025 Application Form**

**Title:**

(Please state the title of the proposed fellowship)

**Duration of the Fellowship:**

(It is expected that most fellowships will be of a 12-month duration, however fellowship proposals up to 24 months will be considered. (Please see further details on the duration of fellowships in the conditions section of this document.)

**Primary Location of the Fellowship (Employer):**

**Secondary Location(s) of the Fellowship (if applicable):**

**Primary Clinical Lead/Assigned Supervisor's Details:**

|               |
|---------------|
| Name:         |
| Organisation: |
| Phone:        |
| Email:        |

## **Please provide an overview of the fellowship, what the applicant will be doing in the post, including research and audit:**

Max 500 words (25 marks)

The Department of Plastic & Reconstructive Surgery based at Cork University Hospital and South Infirmary Victoria University Hospital (SIVUH) provides specialist Plastic Surgery services to the Munster Region. As the only Level 4 hospital in Ireland serving a population of 1.5 million, the unit provides a comprehensive reconstructive service to all surgical specialties. The unit specialises in oncological reconstruction for breast and head & neck cancer, in addition to providing a reconstructive service for complex sarcoma, melanoma and colorectal cancer defects. Currently the department is staffed by 7 Consultant Plastic Surgeons, 5 Specialist Registrars, 1 Registrar and 6 Senior House Officers. There are more than 5,000 surgical procedures performed, in the department, a year, including close to 60 complex oncological reconstructions per year which is expected to rise significantly with two additional Consultant appointments.

The aim of this fellowship will be the opportunity to specialize in complex post oncological reconstruction, with a particular focus on head and neck reconstruction. This will be achieved through participation in the patient journey from diagnosis to rehabilitation. The fellow will participate in the pre and post-operative clinics and MDTs supporting the surgical journey. There will be a particular focus though on the hands on surgical experience.

The Fellow will be required to participate in 1-2 head and neck reconstruction list per week, in addition to general elective lists with an emphasis on cancer resection and reconstruction (including skin cancer, soft tissue sarcoma, colorectal reconstruction) in addition to secondary adjustment/reconstruction surgeries such as facial reanimation surgery.

The Fellow will gain surgical experience in raising pedicled and free flaps for various oncological defects, perform microsurgical anastomoses, and resect complex tumours. The Fellow will also be trained in contemporary surgical techniques such as the venous coupler device and virtual surgical planning in head and neck reconstruction. The Fellow will work under close supervision of the Consultant with the aim of transitioning to complete independent operating by the end of the fellowship.

Through participation in head and neck, melanoma and sarcoma multidisciplinary meetings, the Fellow will gain experience in the clinical decision-making surrounding cancer management. The Fellow will attend and lead dedicated weekly reconstruction outpatient clinics reviewing both new and return patients and contribute to the post-operative management of inpatients. Leadership skills will be nurtured through the day-to day running of the Plastic Surgery Unit along with the team of doctors in training, in consultation with the Consultants. The Fellow will be involved in teaching at both a local and national level and will be expected to actively engage in unit audit and research opportunities. Through the units' close links with University College Cork, the Fellow will have the opportunity to perform cadaveric dissections in the ASSERT Centre. Full access to the Plastic Surgery Microsurgery Skills Lab in CUH will provide the opportunity for additional simulation training in microsurgical anastomosis.

## **Outline the value of the proposed fellowship to the health services:**

Max 1000 words (45 marks)

Suggested headings:

1. Identified unmet patient need
2. Specialty and service priorities / particular workforce requirement
3. Niche area, particular skillset acquisition
4. Unavailability of such training in Ireland currently
5. The potential benefits to the Irish health service and patients
6. Consideration given to recently approved consultant posts

### **1. Identified unmet patient need**

The Head and Neck (H&N) cancer service in SIVUH is the 2nd largest in the country, dealing with 25% of all such cases in the country as per NCCP figures. The use of autologous free tissue transfer is the main tool utilised to preserve and restore function in patients with head and neck cancer. The two-team approach to H&N free-flap reconstruction is one that has been adopted by our center as well as many high-volume centers around the world to reduce operative times. It is well recognised that longer operative times are predictive of postoperative flap failure and other complications. In order to reduce operative times further, a two microsurgeon approach is frequently used internationally. As there is currently only one Plastic Surgeon dedicated to this service, a two microsurgeon approach is not achievable. The Fellowship programme would facilitate parallel operating by providing a highly skilled Consultant level trainee, thus improving patient outcome.



## 2. Speciality and Service Priorities

The Unit currently delivers a Plastic Surgery service for a population of approximately 1.5 million. This corresponds to one Consultant per 250,000. The British Association Plastic, Reconstructive and Aesthetic Surgeon (BAPRAS) guidelines recommend a ratio of 1:80,000, giving a requirement of approximately 19 Consultants to service the current catchment area, which is currently being provided for by 6 permanent Consultant Plastic Surgeons and one Locum. The immediate urgent requirements are for the appointment of a Consultant with a special interest in Breast Reconstruction and a Consultant with a special interest in Lower Limb trauma reconstruction, which are due to commence mid 2023.

The proposed designation of CUH as a Major Trauma Centre (MTC) will place further demands on the existing Plastic Surgery service and create a greater need for, in particular, the appointment of four further Consultants with expertise in H&N Reconstruction, Hand/Upper Limb Reconstruction, Lower Limb Trauma Reconstruction and Burn Trauma Reconstruction. Although the latter three appointments are trauma based appointments, the same skill set can be applied to oncological reconstruction which will form part of the commitments of all future appointments. Creation of a Fellowship post in Cork not only nurtures the interest of future potential colleagues in the subspecialty, but exposes the trainee to the overall workings of the unit and the people that form the unit, which would hopefully entice the trainee to take up future Consultant posts in Cork.

For future Consultant appointments to confer the maximum benefit for service delivery, the appointment of supporting NCHD staff is imperative. Of particular importance is the continued provision of a comprehensive cancer service. The presence of a Fellow bolsters the current Consultant led service, providing high quality continuity of care in the management of cancer patients both in the inpatient and outpatient setting. Based on the volume of surgery and varied casemix of complex oncological cases warranting reconstruction, it is envisaged that the Cork Plastic Surgery Unit attracts the best of the best, developing and nurturing the skillset expected of a future Consultant Plastic Surgeon.

## 3. Skillset Acquisition

It is common knowledge that the COVID-19 pandemic has resulted in delays in cancer diagnoses, which has led to the need for larger, more complex resections. This in turn has led to an increased demand in the involvement of Plastic Surgeons in the reconstructions.

The defects are many and varied, requiring knowledge and skill in various techniques that would be expected of a newly appointed Consultant, with free tissue transfer being commonplace in many centres worldwide. The numerous advantages of this technique include stable wound coverage, improved aesthetic and functional outcomes, minimal donor site morbidity, and the ability to utilize vascularized tissue from remote parts of the body that are outside the zone of injury (trauma, malignancy, infection, irradiation, etc). With increased patient expectation, cancer care has evolved from just surviving to quality of survivorship. As a consequence, complex reconstruction and especially free tissue reconstruction has become much more salient.

Since the introduction of free tissue transfer in the 1960s, the success rate has improved substantially, currently being 95-99% among experienced surgeons. The objectives of this fellowship are to learn techniques in efficient flap raise to reduce total operative times, performing microvascular anastomoses, and the post-operative management of these complex patients to ensure the best possible outcome is achieved.

## 4. Unavailability of training in Ireland Currently

There is currently no Oncological Reconstruction Fellowship on offer in Ireland. Most international Plastic Surgery Fellowships in Reconstruction are subspecialised- either solely H&N Reconstruction, Breast Reconstruction or Lower Limb Trauma Reconstruction with an emphasis on Microsurgery techniques. A similar Fellowship is offered in Melbourne, Australia by the Peter MacCallum Cancer Centre.

## 5. The potential benefits to the Irish health service and patients

**Outpatient Setting:** The Oncological Fellow would run weekly H&N Reconstruction outpatient clinics currently provided by one Consultant Plastic Surgeon, which runs simultaneously with a general Plastic Surgery Clinic. These patients demand a significant amount of time to assess, discuss surgical options and to provide informed consent for what will be life changing surgery- both functionally and aesthetically. The H&N patients would benefit from more time spent with the Fellow, discussing details the Consultant cannot afford to, whilst the Consultant continues to address the needs of the general Plastic Surgery patients.

**Theatre Setting:** A highly skill trainee would allow for parallel operating, reducing current 8-10 hour operative times. Shorter operative times have been associated with better post-operative outcomes. Decreasing operative time and allowing for division of labour in these complex surgeries via a two-team approach may reduce burnout in microvascular surgeons. Reducing operative time also reduces the resource demands on nursing staff, which promotes staff retention.

**In-Patient Setting:** With Consultant covering two sites, the Fellow provides high level continuity of care for these complex patients, following these patients from their diagnosis to rehabilitation.

## 6. Consideration given to recently approved consultant posts

The current H&N Reconstruction Surgeon post approved in 2020 and filled in 2021 did not come with NCHD support. With two further Plastic Surgery Consultant appointments which will place further demands on the existing NCHD workforce (Consultant to Registrar ratio of 8:6), the need for a Fellow cannot be understated.

**Please provide details of how the fellowship will protect/  
prioritise the unique learning requirements of the fellow:**

Max 400 words (15 marks)

**Outline how this post CSCST fellowship would provide a quality  
experience, protected training time and less of a focus on  
service delivery commitment:**

Max 400 words (15 marks)



**Supervisor's Declaration:**

- **I confirm that I have read and understood the terms and conditions of the Aspire fellowship**
- **I confirm I have engaged with Medical HR and Finance in the proposed primary clinical site regarding this fellowship proposal**

**Signature of the Clinical Lead/Assigned Supervisor:**

(Electronic signature is acceptable)

A handwritten signature in black ink, consisting of a stylized 'P' with a horizontal line extending to the left and a small flourish to the right.

## Evaluating Fellowship Proposals

The process of identifying fellowships and subsequent recruitment will be managed by the Postgraduate Training Body with input from NDTP and the National Clinical Advisory Group Leads (NCAGL's) and National Clinical Programmes (NCP's) as appropriate.

Postgraduate training bodies will evaluate proposals based on the following criteria:

1. Quality of the fellowship proposed
2. An identified unmet patient need\*
3. Specialty and service priorities/particular workforce requirement\*
4. Niche area, particular skillset acquisition
5. Unavailability of such training in Ireland currently
6. The potential benefits to the Irish Health Service and patients
7. Consideration should be given to recently approved consultant posts
8. Protection/prioritisation of the unique learning requirements
9. Protected training time and less focus on service delivery commitment.
10. Geographic distribution as relevant to the model of care or workforce planning

Please note: An overview of the core curriculum to be offered and evidence that there will be opportunities for audit and research must be included in the application.

\*The Postgraduate Training Body will liaise with the National Clinical Advisory Group Leads (NCAGL's) National Clinical Programmes (NCP's) for the specialty (where available) to inform these principle



## **Conditions of the Aspire Post CSCST Fellowship**

Approval is provided in respect of fellowships commencing in July 2024.

- All approved post CSCST fellowships must provide a structured certifiable educational experience to candidates within 3 years post CSCST from an Irish Postgraduate Training body or candidates who entered the Specialist Division of the Register (IMC) within the last 2 years.

### **Duration of fellowship:**

- The duration of the Post CSCST Fellowship should be outlined within the application (funding provided is for a 12-month period from July 2024 however it is noted that funding partnerships with host institutions may be developed to allow for 24-month Fellowships – this can only be progressed with the prior agreement of HSE NDTP).
- A previously funded Aspire fellowship could be considered for renewal if aligned with service requirements and workforce demands subject to review and endorsement by the review panel.

### **Training requirements:**

- The post CSCST fellowship post must be evaluated and approved by the appropriate training body and have a supervisor assigned, with authority and accountability for the fellowship post.
- The Post CSCST Fellowship should align with workforce opportunities.
- The Post CSCST Fellowship must not impinge on the training of pre-CSCST trainees
- Where appropriate, the fellowships should fulfil training body requirements for Medical Council specialist registration (e.g. Intensive Care Medicine) and HSE employment requirements for consultant posts.
- Aspire fellows are entitled to apply through the relevant training body for the HSE Specialist Training funding scheme and through their employer for the HSE Clinical Course / Exam Refund Scheme and TSS. Both of these Programmes are funded by NDTP and accessed through the NER.

# Aspire<sup>\*</sup>

FELLOWSHIPS



NATIONAL  
DOCTORS  
TRAINING  
& PLANNING