



ROYAL DEVON AND EXETER

NHS FOUNDATION TRUST

Interstitial Lung Disease Clinical Fellow

JOB DESCRIPTION

1. INTRODUCTION

This fixed term post (6 months) will provide experience in interstitial lung disease (ILD). This post is suited to either trainees with minimal experience or more senior trainees wishing to consolidate or develop their knowledge of common and complex interstitial lung disease, whilst continuing to gain experience in respiratory medicine.

The successful candidate will be encouraged to take an active role in research, audit and quality improvement. There is no commitment to general medical take unless specifically requested or required by the candidate.

There may be opportunity to combine this clinical fellowship with one of our other fellowships (asthma/airways disease, pleural/interventional) if a candidate wished to develop a broader range of specialist experience.

Background

Increasingly respiratory medicine involves greater sub-specialty skills that need time allocated in training to achieve competency. Interstitial lung disease is a sub-specialty discipline which has seen significant developments in the past 5-10 years, with the increasing use of immunomodulatory agents and the availability of anti-fibrotic therapies. There is an increasing need to nuance diagnoses and tailor therapy to patients needs and wishes, which can be complex. With increased sub-specialisation we recognise the importance of dedicated training in complex diseases. There is therefore the need for trainees to receive more in-depth training in these conditions, to allow more individualised treatments for ILD patients in the future.

Interstitial lung disease is becoming increasingly common, and there is a need for all respiratory trainees to develop a solid understanding of the common diseases whilst also gaining experience and awareness of the rarer types.

Training in interstitial lung disease requires the development of skills across a range of domains: clinical assessment; interpretation of basic and advanced lung function testing; imaging; multidisciplinary working with radiologists, pathologists, rheumatologists, clinical nurse specialists, physiotherapists; clinical trials; prescription of immunomodulatory therapies and high cost anti-fibrotic agents; access to allied specialties (rheumatology, cardiology, psychiatry, physiotherapy, palliative care).

There will be significant opportunity to partake in research for interested candidates.

To credential specialty registrars, access to the full spectrum of services is required, which can only generally be provided in larger regional centres, such as the Royal Devon & Exeter Foundation NHS Trust. We currently have several hundred patients under our service and we are the NHSE Designated ILD Specialised Centre for the South West Peninsula, serving a population of ~2.5M in Cornwall, Devon, Somerset and parts of Dorset.

The basis of this fellowship is to ensure that a trainee at pre-registrar level, registrar level or Post-CCT fellowship level can learn and achieve competencies in interstitial lung disease.

2. THE INTERSTITIAL LUNG DISEASE SERVICE

The Team:

Professor Michael Gibbons:	Consultant Respiratory Physician (Lead for ILD) Honorary Associate Clinical Professor, University of Exeter
Dr Sandy Spiers:	Senior Consultant Radiologist
Dr Rachel Meyer:	Consultant Radiologist
Dr Liz O'Donovan:	Consultant Radiologist
Dr Manish Powari:	Consultant Pathologist
Drs Abusalameh, Cates, Earl, Haigh, Mascarenhas	Consultant Rheumatologists
Dr Julia Prague:	Consultant Endocrinologist/Senior Lecturer
Dr Andrew Ludman:	Consultant Cardiologist
SN Sarah Lines:	Senior ILD clinical nurse specialist
SN Jessica Mandizha:	ILD clinical nurse specialist and ILD Nurse Researcher
Dr Anne Marie Russell:	Nurse Consultant in ILD/Senior Lecturer
Angela Thurgood:	ILD Co-ordinator
Bridie Meiklereid:	Respiratory Pharmacist
Kat Thomson:	Respiratory Physiotherapist
Ana Jorge da Ponte:	Senior Clinical Physiologist
Dr Chris Scotton:	Respiratory Research Lead/Senior Lecturer, University of Exeter
Dr Anna Duckworth:	ILD Researcher
Professor Craig Williams:	Director, Children's Health & Exercise Research Centre, University of Exeter
Dr Owen Tomlinson:	Sport & Health Science, University of Exeter
Dr Jo Studham:	Manager, Exeter NIHR Clinical Research Facility
Dr Bea Knight:	Senior Research Nurse, Exeter NIHR Clinical Research Facility
SN Jane Hall	Senior Research Nurse/Team Lead, R&D Department/CRN
SN Ana-Maria Adam:	Research Nurse, R&D Department/CRN
Stephanie Prince	Research Practitioner, R&D Department/CRN

Post description

This post will be set in the rapidly expanding respiratory department of a large teaching hospital. The fellow will be an integral part of the team, with sub-specialty training in interstitial lung disease. There is high volume of local and regional outpatient referrals and RD&E has been commissioned as the NHSE Specialised Centre for ILD within the South West Peninsula.

Clinical

The fellow would be expected to attend ILD clinics, be a key contributor to the multidisciplinary meetings, support the BAL service (training) and contribute to the development of the South West ILD network, which would allow the completion of quality improvement work.

In total there will be 1 general ILD clinic per week and 1 regional ILD clinic per week, both with direct consultant supervision. Contribution to inpatient specialty referrals for ILD (supervised depending on level of competency, and for training purposes).

There will be the opportunity to develop guidelines and pathways for the ILD services, allowing the post holder to provide evidence of leadership and change-management skills.

Time would be allocated to include the attendance of relevant lists in the bronchoscopy / radiology department, attendance at rheumatology-respiratory MDTs and training in lung function tests.

There is no commitment to the general medical take unless specifically requested or required by the candidate (as part of their training needs). If required, we would anticipate that this would be evenings or weekends. There is no commitment to supporting the respiratory wards (aside from supporting the ILD service) unless specifically requested or required by the candidate (as part of their training needs).

Research

The Respiratory Department is one of the Academic Departments in the Royal Devon & Exeter Foundation NHS Trust (Professor Michael Gibbons & Dr Matt Masoli are the Co-Clinical Leads), and the first (and only) designated ERIC Unit (Embedding Research in Clinical Care) within the Trust. We have a well-supported respiratory research department and have undertaken a large number of ILD clinical trials over the years, including Phase I-IV commercial trials, observational trials and studies, and we have a very active portfolio of Investigator Initiated Studies (basic science, translational studies, trials, patient focussed) led by Professor Gibbons, Dr Scotton and Dr Russell. We work closely with the NIHR CRN, the Exeter NIHR CRF, the Exeter CTU and the University of Exeter, and the Exeter Patients in Collaboration for Pulmonary Fibrosis Research (EPIC-PF).

The successful candidate would be encouraged to become involved in our exciting research programmes, writing papers and presenting at national and international conferences. For interested candidates, we would support the candidate to develop their own areas of research interest.

It would be expected that the fellow would participate in patient recruitment to clinical trials and undertake quality improvement projects suitable for National/International presentation.

Teaching

There is the option to be involved in the teaching of University of Exeter Medical students should the candidate wish for example: small group teaching, bedside teaching, assessments and involvement in examining (all optional). The fellow would be able to propose a special study unit for medical students in ILD, should they wish. To complement the teaching, enrolling for a post-graduate diploma in medical education would be an option for interested candidates.

Time table

	Monday	Tuesday	Wednesday	Thursday	Friday
0800hrs					
0900hrs	General ILD Clinic	ILD MDT	Anti-fibrotic and Immunomodulatory Clinic/Nurse support	Teaching support (optional), ILD personal development	Research/Audit/QiP
1000hrs					
1100hrs					
1200hrs					
1300hrs	Lunchtime teaching	Grand round			
	ILD personal development		Regional ILD Clinic (Alternate weeks)		
1400hrs	Consultant Teaching	Regional ILD Clinic (Alternate weeks)	Bronchoscopy (optional, BALs, alternate weeks)	Clinical Admin	Research/Audit/QiP
1500hrs					
1600hrs					Problem feedback
1700hrs					
	Research component/recruitment to relevant studies				

3. THE RESPIRATORY DEPARTMENT

The department provides a full respiratory medicine service for Exeter and surrounding parts of Devon and beyond. It serves a local population of approximately 450,000. It is a busy unit with a wide range of common and uncommon conditions seen. The department has special interests in interstitial lung disease, cystic fibrosis, airways diseases, sleep-related breathing disorders, non-CF bronchiectasis, non-invasive ventilation and lung cancer. We are the NHSE Specialised Commissioned Regional Centre for ILD, Cystic Fibrosis, and Asthma. We also provide regional clinics for patients with alpha1 anti-trypsin deficiency.

There are close links with other departments within the hospital including: Radiotherapy/Oncology, Paediatrics, Intensive Therapy, Cardiology (including EKOS), Rheumatology, Histopathology & Microbiology. A multi-disciplinary approach to the care of patients with respiratory disease is facilitated by a team comprising clinical nurse specialists, specialist respiratory physiotherapists, 2 advanced care practitioners, sisters and nurses on 2 specialist respiratory wards, a large COPD early supported discharge and admission avoidance service (comprising 4 nurses and a dedicated physiotherapist), respiratory physiologists, dieticians, social workers and a respiratory pharmacist.

In-patients: respiratory patients are nursed on 2 dedicated respiratory wards. A fully equipped 5 bed respiratory high dependency unit is attached to the template. This provides facilities for non-invasive ventilation and acts as an intermediate care facility for patients discharged from ITU (with respiratory disease).

Out-patients: the department holds respiratory clinics in Exeter each week. A fast track lung cancer clinic is held at least once per week. There are specialist clinics in interstitial lung disease, cystic fibrosis, non-CF bronchiectasis, asthma and complex ventilation.

Respiratory Nurse Specialists: the department is supported by 15 respiratory nurse specialists, including 2 ILD nurse specialists (one of whom has a combined clinical-research post), lung cancer nurse specialists, cystic fibrosis nurse specialists, a TB nurse specialist, a bronchiectasis nurse specialist and asthma nurse specialists. A clinical psychologist with an interest in respiratory disease and a dietician are also attached to the department.

Lung Cancer Services: the Royal Devon & Exeter Hospital is a designated cancer centre. Dr Tom Burden is our Cancer Lead. Patients suspected of having lung cancer are seen in a weekly "fast track" lung cancer clinic. All patients are discussed at a weekly multidisciplinary team meeting and a weekly histopathology meeting. The MDT is attended by respiratory physicians, 4 thoracic radiologists, a thoracic surgeon, 2 oncologists, together with associated junior staff, lung cancer nurse specialists and the audit/MDT facilitator. We actively recruit patients to clinical trials.

Audit & CPD: we have dedicated sessions for departmental audit meetings, morbidity and mortality meetings and multi-professional education sessions.

Research: the department has a very active research programme. We have a long history of clinical trials (commercial and non-commercial) in asthma and COPD, a very busy portfolio in CF and ILD trials (Phase I-IV) and have continued growth in pleural disease and other areas. There are close academic links with the University of Exeter NIHR Clinical Research Facility, the University of Exeter, the University of Exeter Medical School and the Exeter Clinical Trials Unit. Most of our department has roles at Regional, National and International Level, and our department has the Respiratory Lead and the Clinical Director of the NIHR Clinical Research Network: South West Peninsula.

Teaching: The Respiratory Department has a substantial commitment to delivering the undergraduate programme for the University of Exeter Medical School, and several members of staff have Postgraduate Educational roles.

Medical & Nursing Staff: The department has 9 consultants who work collaboratively to provide a 7 day respiratory service. They are supported by the ward matrons, and respiratory nursing service.

There are currently 3 Respiratory Sprs and 1 Pleural Fellow. We have 3 F1s, 1 F2s, 1 GPSTs and 2 CMTs and Trust doctors in the Respiratory team.

The consultant team is comprised of Dr Chris Sheldon (0.5WTE), Dr Nick Withers, Dr Bip Patel, Professor Michael Gibbons, Dr Tom Burden, Dr Matt Masoli, Dr Phil Mitchelmore, Dr Anthony Hall and Dr Lee Dobson (Clinical Lead).

Please address enquiries to Professor Michael Gibbons (ILD Lead) michael.gibbons2@nhs.net 07788 536347 or Dr Lee Dobson (Clinical Lead) lee.dobson@nhs.net 07837 773920.

4. **THE POST**

TITLE: Interstitial Lung Disease Clinical Fellow

GRADING/EQUIVALENT: ST3 level (or equivalent) or above

DURATION OF POST: Feb 2023-Aug 2023 start (6 months duration)

SALARY SCALE: Pro-rata for training grade

BANDING: N/A

ON-CALL COMMITMENT: N/A (unless requested)

ANNUAL LEAVE: Pro-rata for the duration of the post

STUDY LEAVE: 30 days total (not pro-rata)

CONDITIONS OF APPOINTMENT: The post is subject to the Terms and Conditions of Service of Hospital Medical and Dental Staff as amended from time to time.

All appointment to Trust posts are subject to:-

- 1) Appropriate Registration with the General Medical Council
- 2) Satisfactory Medical Examination including documentary validated evidence of Hep B, Hep C and HIV
- 3) Satisfactory clearance with the Criminal Records Bureau
- 4) Two satisfactory references, one of which must be your present or most recent employer.

FURTHER INFORMATION

Can be obtained from:

ILD Lead
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