

WEST MIDLANDS CANCER ALLIANCE

MDT Lead Job Description



West Midlands Cancer Alliance

Document Title	MDT Lead Job Description	
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Document Purpose	To provide a standardised MDT Lead Role Description for Providers across the West Midlands to adopt.	
Authors	John Elliott, Programme Manager, WMCA Contributed to by: MDT Optimisation Working Group	
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Approval Signatures	MDT Working Group Chair  John Elliott Date: 05.09.2025	WMCA Clinical Director  Dr Lydia Fresco Date: 05.09.2025

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Introduction

Every Cancer (including specialist palliative care) should be managed through a site-specific multidisciplinary team (MDT).

The objectives of this team approach are to:

1. Ensure designated specialists work effectively together in teams so that all decisions regarding diagnosis, treatment and care of individual patients, and all decisions regarding the team's operational policies are multidisciplinary decisions.
2. Ensure that care is given according to recognised guidelines (including guidelines for onward referrals). Appropriate information should be collected to inform clinical decision making and to support clinical governance/audit.
3. Ensure mechanisms are in place to support entry of eligible patients into clinical trials, with fully informed consent of the patient concerned.

Appointment

The appointment of the MDT lead is by the formal process of application and interview by individual trusts. The post will be for a period to be determined by individual trusts. The MDT Lead role can be undertaken by all clinical workforce groups.

Responsibilities

Cancer Lead will have the following responsibilities:

Clinical Leadership & Governance

1. Lead the clinical activity of the MDT, ensuring adherence to guidelines and high-quality integrated care.
2. Ensure that the objectives of MDT working, as outlined in relevant cancer service documents, are met.
3. Revise clinical management guidelines regularly to align with national best practices.
4. Work with the Trust Cancer team to achieve national cancer performance standards.
5. Attend an annual appraisal with a Trust Lead Cancer Clinician and agree on programmed activities (PA allocation) in recognition of the role.
6. Attend breach and harm review meetings as required.

MDT Meeting Management

7. Ensure MDT pre-meeting preparation is completed, including screening and triage of patients with the MDT coordinator.
8. Structure MDT meetings with a formal agenda.
9. Take overall responsibility for ensuring that the MDT meeting meets Quality standard indicators and participate in peer review processes.
10. Clarify core MDT meeting membership and ensure a register of attendance is maintained.
11. Chair MDT Meetings or nominate a chair and deputy chair.
12. Ensure the appropriate infrastructure for MDT meetings is in place (e.g. dedicated room of adequate size for in person meetings, microphones in place suitable for a mixed in person / online meeting).
13. Ensure that all new cancer patients are listed and discussed at the MDT meeting or listed and not discussed if they can be managed according to agreed Standards of Care.
14. Ensure all referred / discussed patients are appropriately staged with recorded staging.
15. Ensure that electronic mechanisms are in place to record clinically validated outcomes within 24 hours of the MDT meeting and all appropriate data is collected.
16. Ensure that MDT meeting outcomes are approved and communicated to referring clinicians and primary care within agreed timeframes.

Service Improvement & Quality Assurance

17. Lead on or nominate a lead for MDT Service Improvement.
18. Organise MDT operational business meetings (in accordance with MDT meeting best practice guidance requirements - minimum twice yearly) to review MDT workload, performance, patient experience, trial recruitment, and harm reviews.
19. Ensure the MDT uses an agreed mortality and morbidity review process for discussing adverse outcomes.
20. Ensure that an annual audit of treatment decisions compared to MDT meeting / SMDT meeting recommendations takes place and outcomes are shared.

21. Audit selected MDT activities and disseminate results as per best practice guidance.
22. Ensure that relevant MDT members with direct clinical contact complete advanced communication skills training and encourage attendance at appropriate CPD.
23. Ensure core MDT members undergo yearly training on cancer waiting times and cancer standards.

Training & Professional Development

24. Attend cancer-specific regional networking meetings (e.g. WMCA Expert Advisory Group / WMCA MDT Chairs meeting) or arrange for another nominated MDT member to attend in your place.
25. Undertake leadership training either internally through the Trust or an approved external provider.
26. Update the MDT Operational Policy yearly and produce an annual report and work programme.

**I agree to take the position of MDT Lead as [specialty]
nominated by the Multidisciplinary Team and will work to fulfil the role
according to the outlined responsibilities.**

Name: **Date:**

Signature:

I, as Cancer Clinical Director, accept this proposal and look forward to working with the team under this leadership to ensure quality care for patients.

Name: **Date:**

Signature: