

Job Description

For

Consultant in Gynaecological Oncology

GENERAL INFORMATION

The Royal United Hospitals Bath NHS Foundation Trust provides acute treatment and care for a catchment population of around 500,000 people in Bath, and the surrounding towns and villages in North East Somerset and Western Wiltshire.

The Royal United Hospital

The Trust provides 732 beds and a comprehensive range of acute services including medicine and surgery, services for women and children, accident and emergency services, and diagnostic and clinical support services.

The Trust employs around 5,100 staff, some of whom also provide outpatient, diagnostic and same day case surgery services at local community hospitals in Bath & North East Somerset, Somerset and Wiltshire. This fulfils part of the Trust's aim to provide high quality care to people in their local communities.

The hospital provides healthcare to the population served by Clinical Commissioning Groups (CCGs); Bath and North East Somerset CCG, Wiltshire CCG, and Somerset CCG (Mendip Federations).

Management Structure

The Trust has a divisional structure. There are three clinical divisions, Medicine, Surgery and Family and specialist services, supported by two additional divisions, Corporate Services and Estates & Facilities. Each Clinical Division is led by a senior management team, consisting of a medical Head of Division, Divisional Manager and a Head of Nursing. Each also has a Head of Governance in the senior divisional team. Anaesthesia, ICM and pain services sit within the division of surgery.

The senior management team meets with other divisional colleagues to discuss both operational and strategic issues for the specialties within the division.

Operational management decisions are made by the Management Board which consists of the executive directors and representatives from the three divisions.

The hospital is managed by a Trust board, which consists of a chairman, five non-executive directors and seven executive directors. The day-to-day management of the hospital is the responsibility of the chief executive assisted by the executive directors, and supported by the three clinical divisions.

Executive directors: Chief Executive; Chief Operating Officer; Director of Finance; Director of Nursing; Medical Director, Director of People, and Director of Estates & Facilities.

If the candidates wish to make enquiries, they are at liberty to make arrangements with Mr Jonathan Frost, Specialty Cancer Lead, 01225 824652

JOB OUTLINE

Appointment

This is a full time consultant post within the gynaecological oncology department at the Royal United Hospital's NHS Foundation Trust, Bath. This successful applicant will take the place of a retiring gynaecological oncologist and be part of a team of 3 gynaecological oncologists.

Any candidate who is unable for personal reasons to work full-time will be eligible to be considered for the post; if such a person is appointed, modification of the job content will be discussed on a personal basis with the Trust in consultation with consultant colleagues.

The Department of Obstetrics & Gynaecology

The Department is situated in the Princess Anne Wing where there is an excellent dedicated ultrasound department, 3 operating theatres, a day assessment clinic and both maternity and gynaecology wards. Gynaecological oncology surgery is performed in the main theatre complex of 8 theatres, adjacent to colorectal, urology and general surgery. Full intensive and high dependency care unit is immediately underneath the theatre block. Theatres are equipped with new state of the art laparoscopic stacks including the facility to use ICG fluorescence (for sentinel nodes). Modern intelligent electro surgical tools, staples, clips and disposables are routinely available. Theatres are also equipped with a Da Vinci Xi robot system for use by the colorectal, urology and gynaecology teams. There is an active aspiration to expand the robotic surgical service.

The Speciality has 12 inpatient gynaecology beds with access to day surgery beds but in practice, this is flexible and unrestricted according to clinical need. There is also an elective surgical ward taking patients on a protected elective pathway which takes the majority of planned admissions.

There are approximately 5,000 outpatient attendances per year with 2,000 day case and in-patient procedures. There is a tertiary level gynaecology, reproductive medicine and urogynaecology service.

The department comprises of the following consultant medical staff with their sub-speciality interests:

- Nick Johnson Gynaecological oncologist
- Jonathan Frost Gynaecological oncologist (Specialty Cancer Lead & Clinical Lead)
- Ellen Nelissen Gynaecological oncologist
- Russ Luker Laparoscopic surgery and lead for Colposcopy
- Zoe Robinson Urogynaecology
- Aysha Qureshi Urogynaecology
- Jo Ficquet Lead for early pregnancy and college tutor
- David Walker Reproductive medicine and clinical lead
- Jane Farey Labour ward lead and lead for maternity risk and governance
- Kate O'Brien Reproductive medicine and early pregnancy
- Claire Park Maternal medicine and vulval disorders

- Sam Hayward General obstetrics and gynaecology
- Laura Atherton Cancer diagnostic lead/ PMB Lead
- Shashi Sholapurkar Obstetrician and Gynaecologist

In addition, the department has 1 Gynaecological Oncology Fellow, 2 Specialty Doctors, 6 Specialty Registrars, 4 GP trainees and 2 Foundation trainees. We are currently in the application process to become a gynaecology subspecialty training centre.

The general consultant team participate in a 1 in 12 on call rota out of hours.

The post holder will be expected to join the current oncology surgical team. There are 6.5 sessions of specialist gynaecological oncology operating per week for complex cases supported by a dedicated anaesthetic team and intensive care team as required. There is an established robotic service and a sentinel lymph node biopsy service for vulval and endometrial carcinoma. In preparation for surgery patients attend a joint surgical and anesthetic preoperative assessment clinic. There is dedicated colorectal team to support colorectal anastomosis led by Mr John Bunni who has completed a cytoreductive surgical fellowship in Basingstoke. The RUH currently offers the vast majority of gynaecological oncology services at the RUH. Radical plastic surgical reconstruction with microvascular anastomoses is currently a joint service with the Royal United Hospital and Southmead Hospital regional plastic surgical service. It is hoped that the applicant will continue this joint service and hold an honorary contract to offer this surgery in Southmead Hospital. Vaginal vault and cervical brachytherapy services are provided in Bristol Haematology and Oncology Centre. Patients requiring hepatobiliary surgical input as part of cytoreductive surgery are currently offered this with the regional hepatobiliary team at the Bristol Royal Infirmary. Patient follow up is either through the medical oncology service or the consultant supervised nurse led follow clinic and PIFU programme. The applicant will be encouraged to review any of these service arrangements in light of new research evidence.

The medical oncologist support for ovarian cancer is led by Dr Rebecca Bowen and Dr Lucy Dumas. Dr Emma De Winton and Dr Jen Van Greithuysen currently lead clinical oncology for gynaecological malignancy providing radiotherapy at the RUH within the cancer centre. We link with the Bristol Haematology and Oncology centre to provide CHART, Gamma knife SRS and HDR brachytherapy for patients. Our brand new Comprehensive Cancer Centre (The Dyson Cancer Centre) will house comprehensive oncology services and is due to be completed soon.

Clinical nurse specialists Emily Davies, Laura Coton, Natasha Hewby and Zoe Thurston provide CNS support as well as the follow up service. The trust has a colposcopy nurse specialist and post-menopausal bleeding advanced care practitioner. Specialist pathologists Dr Pinias Mukonoweshuro and Dr Sarah Johnson support the MDT. Full radiology services include PET, SPEC CT for sentinel node localisation and on-call interventional radiology and a dedicated team of four specialist gynaecological radiologists led by Dr Kelly MacDonald. The gynaecological ultrasound service support is immediately adjacent to the clinic and has just taken delivery of new state of the art scanners. The ambulatory care service provides rapid access for ascitic drainage and pleural taps and the medical therapy unit orders a range of day case intravenous therapies.

Members of the gynecological oncology MDT are actively engaged with the specialty at a national level contributing to the development of gynaecological oncology further afield and this is encouraged.

Research

There is an exceptionally strong research ethos in the trust both within the clinical trials unit and through Cancer Research at Bath University (CR@B) with Bath consistently among the top recruiters for national trials as well running a number of local investigator-led studies.

Approximately 17% of all incident cases of cancer are enrolled in clinical trials. We work closely with colleagues within our cancer alliance to maintain and develop collaborative relationships in research. We are involved in UK and international academic and commercial clinical trials. We have recruited excellently into recent pivotal and practice changing studies and our trials unit has been recognised nationally for recruitment as well as the quality and efficiency of data collection.

The gynaecological oncology department is no exception to this and is active in clinical research with regional collaborations on translational research and is currently recruiting to twelve national trials with more to be opened soon.

Details of the Post

Clinical Duties: The holder of this post will be a consultant in gynaecological oncology. The appointee will, together with consultant colleagues be responsible for the provision of a comprehensive gynaecological oncology services. They will be required to cover for colleagues during periods of absence and will have continuing responsibility for patients in their care and the proper functioning of the department.

The successful candidate will work according to the terms and conditions of the national consultant contract.

The post will be based at the RUH and the holder will participate in audit and directorate meetings and undertake administrative duties as required by the Specialty Cancer Lead and Lead Clinician for O and G. There may be the requirement to travel to other hospitals within the region for outreach gynaecological oncology clinics.

A commitment to maintain professional expertise by attendance at meetings and courses is expected, and completion of diaries for CME is essential. It is also essential that you have an annual appraisal.

An interest in research and teaching is expected with participation in projects, courses, etc. to enhance the standing and role of the department and Trust.

Attendance at, and organisation of, meetings is expected.

Management Duties: The post holder will be expected to work with local managers and professional colleagues in the efficient running of services and will share with consultant colleagues in the medical contribution to management

The holder will be expected to take an active role in the development of resource management and to assist in the preparation of business plans related to gynaecological oncology.

Consultants are required to undertake the administrative duties associated with the care of patients and the running of clinical areas where they work.

General Requirements: Subject to the provisions of the Terms and Conditions of Service, the post holder will be expected to observe the Trust's agreed policies and procedures, drawn up in

consultation with the profession on clinical matters and to follow the standing orders, financial instructions and code of expectations of the Trust.

Work Programme

The work programme will be reviewed on a 3 monthly basis and agreed with the post holder, Divisional Manager and Lead Clinician. Where possible a regular timetable will be established, however the nature of the post requires the post holder to be flexible in order to maximise theatre and clinic capacity.

Local procedures will be followed in the event of any disagreement over proposed changes, culminating in an appeal to the Trust Board.

Proposed Job Plan

The job plan will be a prospective agreement that sets out consultants' duties, responsibilities and objectives for the coming year. It will cover all aspects of a consultant's professional practice including clinical work, teaching, research, education, clinical governance, private practice and any other responsibilities.


Timetable

The job plan will be agreed with the Lead Clinician and Specialty Cancer Lead prior to commencement of the post.

The following provides outline details of the clinical activity and clinically related activity components of the job plan that occur at regular times during each week including supporting professional activities.

Outline Timetable

Day	Time	Location	Work	Categorisation	Hours
Monday	08.00-18.00	RUH	Operating alternate weeks	DCC	1.25 PA - DCC
	09.00-17.00	RUH	No allocation alternate weeks unless cover for leave required.*	-	-
Tuesday	09.00-13.00	RUH	WR / flexible clinical / colposcopy / flexible joint operating / clinical admin (including 0.25 PA administration)	DCC	1.25 PA - DCC

Day	Time	Location	Work	Categorisation	Hours
	13.00 – 18.00	RUH	Administration / Joint surgical pre-assessment clinic /SPA	DCC	1PA – DCC 0.25 SPA
Wednesday	09.00 – 13.00	RUH	MDT Colposcopy MDT 1 in 4	DCC DCC	1PA – DCC
	13.00-17.00	RUH	Oncology clinic (including 0.25 PA administration)	DCC	1.25 PA - DCC
Thursday	08.00-18.00	RUH	Operating alternate weeks	DCC	1.25 DCC
	0900-1000	RUH	Colorectal MDT & related administration	DCC	0.25 DCC
	10.00-18.00	RUH	SPA – alternate weeks	DCC SPA	1 SPA
Friday	09.00-1300	RUH	WR / Results clinic / FUG & VUG – alternate weeks	DCC	0.5 PA - DCC
	14.00-16.00	RUH	Directorate/ departmental meetings (consultant, M&M and gynae onc meetings) alternate weeks 1 in 2	SPA	0.25 SPA
	09.00-1300 14.00-17.00	RUH	No allocation alternate weeks unless cover for leave required.*	-	-
*Flexible clinical			*Flexible (Theatre/ clinic cover for absence of other gynaecological oncologist, oncall)	DCC	0.75 DCC
 RCOG Approved					Total Hours 40
					Total PAs 10

SUMMARY OF PROGRAMMED ACTIVITY	Number
Supporting Professional Activities	1.5 SPA
Direct Clinical Care (including unpredictable on-call)	8.5 PA
TOTAL PROGRAMMED ACTIVITIES	Total 10PA

Education supervision is optional would result in additional PA allocation at 0.25 PA per trainee.

ON-CALL AVAILABILITY SUPPLEMENT

Agreed on-call rota: 1 in 7 (to be confirmed dependent on on-call duties)

Agreed category (A or B): A

On-call supplement (%): 5%

On-call duties are for cover for gynaecological oncology patients in the immediate post-operative period from 1700 to 0830 the following day after gynaecological oncology operating lists. This is currently in addition to the current gynaecology consultant on-call.

A weekly timetable will need to be agreed with the clinical director before starting the post.

Residence within either 15 miles of, or forty-five minutes by road (e.g. from RUH) is a requirement of this post.

COMMENCEMENT OF DUTIES

This is a permanent post. The appointee will be required to take up the post at a mutually agreed time after appointment. If you consider it is unlikely that you will be able to take up the appointment within the agreed period, you are advised to highlight this.

Office and Secretarial Facilities

Secretarial support will be provided, shared office space is available.

Accountability

The Chief Executive is managerially responsible for the services provided by the Trust and the Lead Clinician is responsible for the provision of the service. The post holder will be responsible for the discharge of their contractual duties through the Lead Clinician to the Chief Executive.

The Foundation Trust will take direct responsibility for costs and damages arising from medical negligence in the treatment of NHS patients, where they (as employers) are vicariously liable for the acts and omissions of their medical and dental staff. However, it is strongly advised that the person appointed maintains defence body membership in order to cover any work, which does not fall within the scope of the hospital policy.

A medical professional indemnity scheme is available to cover compensation (including claimants' costs and expenses) arising from medical negligence in the treatment of private patients at the Royal United Hospital. It is a condition of this policy that all employed and non-employed consultants involved in the business of the Royal United Hospital shall be a member of a Medical Defence Organisation.

Health & Safety

Employees must be aware of the responsibilities placed on them under the Health and Safety at Work Act (1974) and any subsequent relevant legislation and must follow these in full at all times including ensuring that they act in line with all agreed procedures at all times in order to maintain a safe environment for patients, visitors and staff. Failure to comply with these policies may result in disciplinary action up to and including dismissal.

Healthcare Associated Infections (HCAs)

All Trust staff have a responsibility to act and follow all instructions to protect patients, staff and others from HCAs. All staff are required to follow the NHS Hygiene Code and all Trust policies and procedures related to it and the Health Act 2006. Failure to comply with any of these may result in disciplinary action up to and including dismissal.

Clinical Governance

The NHS Executive has defined Clinical Governance as:

“A framework through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish”

In line with Government requirements, the Trust has established a clinical governance committee. The Chief Executive is the accountable officer and the lead is the Director of Nursing, who is responsible for ensuring that systems for clinical governance are in place and monitoring their continued effectiveness.

As part of the requirements of clinical governance, the Trust's Committee is ensuring that all hospital doctors participate in audit programmes, including, where appropriate, specialty and sub-specialty national audit programmes endorsed by the Commission for Health Improvement.

Procedures are in place for all professional groups to identify and remedy poor performance, including critical incident reporting, professional performance and supporting staff to report any concerns they may have about colleagues' professional conduct and performance.

Conditions of Service

National terms and conditions of service (Consultants (England) 2003) cover the post.

Consultants unable to work full-time will be eligible to be considered for this post. If such a person is appointed, modification of the job content will be discussed on a personal basis in consultation with Consultant colleagues. This post is open to applications from candidates who wish to job share.

Residence within either 15 miles of, or forty-five minutes by road (e.g. from RUH) is a requirement of this post if the option of providing an on call service is chosen.

This post is subject to an Exception Order under the provisions of Section 4(2) of the Rehabilitation of Offenders Act, 1974.

You are required to be registered with the General Medical Council with a licence to practice with a licence to practice throughout the duration of your employment and to comply with and abide by the relevant code of professional practice, as appropriate.

Our Values and Behaviours

All staff are required to adopt and follow the Trust values and behaviours at all times. Our values and behaviours are:



Flexibility

This job description is intended to provide a broad outline of the main responsibilities only. The postholder is required to be flexible in developing their role in agreement with their designated manager. In addition they may be required by their manager to carry out any other duty commensurate with their banding and expertise.

Employment checks

An offer of employment will be subject to completion of the following employment checks in line with the NHS Guide for Safer Recruitment which forms part of outcome 13 for the Care Quality Commission.

- Identity
- Right to work
- Professional registration and qualifications
- Employment history and references
- Criminal record and barring
- Work health assessments

Annual Leave

6 weeks and two days per annum pro-rata to be approved by the Lead Clinician. Requests should be submitted at least six weeks before leave is required. Requests for annual leave over three weeks should be submitted three months before leave is required. Up to 5 annual leave days may be carried over from one leave year to the next with the agreement of the Lead Clinician.

Canvassing

Candidates should note that canvassing any member of the Advisory Appointments Committee or the RUH NHS Foundation Trust will result in their being disqualified (see Statutory Instrument 1983 No 276 para 8,1,b).

Policies and Procedures

The postholder is required to familiarise themselves with all Trust policies and procedures and to comply with these at all times. The Code of Expectations of Employees in particular set out what you as a postholder are required to follow at all times and you should study this carefully. Failure to comply with any of the Trust's policies may result in disciplinary action up to and including dismissal.

All staff must have an understanding of their responsibilities in relation to being accountable for knowing who is in and has access to their area of work. Staff must recognise the need to challenge appropriately and understand their duty of care relevant to their position within the organisation. Staff must be familiar with and understand the correct reporting process where there has been a potential breach.

Confidentiality and Data Protection

The post holder must maintain the confidentiality of information about patients, staff and other health service business and meet the requirements of the Data Protection Act (2018) at all times. The post holder must comply with all Trust Information and Data Protection policies at all times. The work of an NHS acute Trust is of a confidential nature and any information gained by the post holder in their role must not be communicated to other persons except where required in the recognised course of duty. Failure to comply with any of these policies may result in disciplinary action up to and including dismissal.

Equality and Diversity

The Trust values Diversity and actively works towards promoting Equality both in terms of its healthcare provision and within its current and potential workforce. It is the aim of the Trust to ensure that no job applicant or employee receives less favourable treatment because of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, or sexual orientation.

Safeguarding Children & Adults

All Trust staff have a responsibility to safeguard adults & children which includes an understanding of the relevant Trust & Local Safeguarding Adults & Children's Board Policies.

Patient and carer experience

The Trust continuously aims to improve the experience of patients and carers using the RUH. All staff are expected to follow the guidance contained in the Patient Experience Strategy for the RUH; the 3 main points to remember are:

- 1) Communicate clearly with people;
- 2) Involve patients and carers in their care and with the hospital;
- 3) Seek out and use patient and carer feedback in all services.

Also refer to the Carer Policy, Respect behaviours and references to improving experience contained in policy and guidance; all staff will be aware of Equality and Diversity and will assist with accommodating people with special needs. Your individual behaviour can make a significant difference to patient and carer experience.

Conflict of Interest

All Trust staff are required to identify and report any potential conflict of interest in line with the Trust Code of Expectations of Employees and other Trust policies.

Academic Facilities

The Royal United Hospital has two centres for academic support. The Post Graduate Medical Centre has excellent lecture and meeting facilities and is soon to house a new surgical simulation suite. The Bath Academy Education Centre houses an excellent medical library, clinical simulation suite, resuscitation training and again has extensive meeting facilities.

In addition to these facilities the Wolfson Centre houses a number of departments that are linked to Bath University with whom the hospital has excellent links. Bath University has a School for Health where academics collaborate actively with hospital staff over a wide range of disciplines. The hospital is also closely linked with Bristol University Medical School.

Undergraduate and post graduate training is undertaken on site. Many consultants have honorary appointments at Bath and Bristol Universities. There are strong links with several other universities and several members of staff have honorary chairs. There is a long tradition of research and education at the hospital and a regular supply of undergraduate students. All consultants are expected to take part in these teaching activities.

There is an active research and development department which fosters and facilitates research in all medical disciplines.

Formal medical audit in the Department is in operation.

Other Facilities

- a) There is an active Bath Hospital Social Club, Gym (the Oasis), tennis courts and swimming pool all on the site.
- b) There are a number of car parks scattered throughout the hospital site and a limited amount of garage accommodation for renting.
- c) The hospital is situated on the edge of the World Heritage City of Bath. There are good social and cultural facilities with the larger centre of Bristol being only 12 miles away. Bath has good transport links to the rest of the country and Bristol International Airport is only half an hour's drive away. Education in Bath is of a high standard and local schools consistently perform above the national average.

Candidates will be short listed for interview by the advisory appointment committee following submission of an application within the defined time scale against the specification set out below. These criteria will be used throughout the appointment process to select the most suitable candidate. Candidates should ensure that the criteria are fully addressed in their applications.

Person Specification - Consultant in Obstetrics and Gynaecology

REQUIREMENTS	ESSENTIAL	DESIRABLE
Qualifications	<ul style="list-style-type: none"> • MRCOG Postgraduate professional qualification • Full Registration with a license to practice with the GMC • Entry on Specialist Register (or entry expected within 6 months of interview date), Dual CCST in Obs and Gynae and Gynaecological Oncology. • BSCCP registration • Sub-specialist training in gynaecological oncology 	<ul style="list-style-type: none"> • Higher degree (MD / PhD, FRCS)
Clinical Experience	<ul style="list-style-type: none"> • Ability to work as an independent practitioner in gynaecological oncology • Evidence of competence in contemporary management strategies in gynaecological oncology • Clinical training and experience equivalent to that required for gaining UK CCST • Competent at emergency and elective general benign and oncological gynaecological surgery • Ability in ambulatory gynaecology (one stop clinics, colposcopy and hysteroscopy). • Ability in maximal effort cytoreductive surgery 	<ul style="list-style-type: none"> • Ability to perform robotic gynaecological surgery. • Ability to perform exenterative surgery for recurrent gynaecological cancer. • Ability or experience with HIPEC in ovarian cancer. • Ability to perform trans-vaginal ultrasound scans. • Ability in the use of ICG fluorescence for sentinel lymph node biopsy
Management and Administrative experience	<ul style="list-style-type: none"> • Ability to advise on efficient and smooth running of specialist service • Experience in developing clinical guidelines, policies and care pathways • Ambition to want to lead the gynaecological oncology service • Ambition to develop the service to ensure it provides the best care to patients • Experience of undertaking audits 	<ul style="list-style-type: none"> • Ability to lead clinical and management groups within specialty • Completed management course

REQUIREMENTS	ESSENTIAL	DESIRABLE
	<p>and presenting their findings</p> <ul style="list-style-type: none"> • Evidence of the understanding of the systems and structures of NHS Management 	
Teaching Experience	<ul style="list-style-type: none"> • Experience of educating junior doctors and medical students 	<ul style="list-style-type: none"> • Experience in clinical or educational supervisor.
Research Experience	<ul style="list-style-type: none"> • Ability to critically assess published research and incorporate it into clinical practice where appropriate • Publications in peer-reviewed journals 	<ul style="list-style-type: none"> • Ability to run national research studies as principal investigator • Ability to run research studies as chief investigator
Personal Attributes	<ul style="list-style-type: none"> • Ability to work effectively in multi-disciplinary team • Good communication skills • Good practical clinical skills • Ability to work as part of a team with colleagues of all disciplines • Commitment to continuing medical education • Willingness to acquire/improve clinical skills and knowledge in gynaecological oncology • Residence within either 15 miles of, or forty-five minutes by road (e.g. from RUH) is a requirement of this post. 	<ul style="list-style-type: none"> • Strong evidence of leadership in clinical and non-clinical areas