

## **Job Description and Information Pack**

February 2024

DIVISION OF UNSCHEDULED CARE

Appointment of Full Time (10 Sessions)

#### CONSULTANT PHYSICIAN ACUTE MEDICINE

Based at Grange University Hospital, Cwmbran, South East Wales <a href="http://www.wales.nhs.uk/sitesplus/866/page/40418">http://www.wales.nhs.uk/sitesplus/866/page/40418</a>

Job Reference: (040-CON556)

Anticipated Start Date: ASAP

DIVISIONAL CONTACT FOR ENQUIRIES ABOUT THIS POST Dr Philip Campbell, Divisional Director for Medicine

Tel 2 01633 238863 Email: Philip.Campbell@wales.nhs.uk
Dr Thomas Cozens, Clinical Director for Acute Medicine

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#### **Links to Additional Information**

Aneurin Bevan Homepage

Aneurin Bevan Values and Behaviours
Framework

Aneurin Bevan Demography Profile

Medical Training/Careers in Wales

Visit Wales
Train Work Live



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#### Introduction

#### Introduction

This is an exciting opportunity to join the Acute Medicine team at the newly built Grange University Hospital (GUH) which is the ABUHB centre for specialist and critical care. The consultant posts will support acute medicine at GUH with the possible option of working on other acute sites such as Royal Gwent Hospital (RGH) in Newport and Nevill Hall Hospital (NHH) in Abergavenny depending on the individuals' specialist interests, preferences, or the demand of the service. RGH, NHH, and Ysbyty Ystrad Fawr (YYF) are collectively known as enhanced local general hospitals (eLGHs).

The Grange University Hospital has 560 beds and features a 24-hour Acute Assessment Unit, Emergency Department and Helicopter Pad.

It provides a 24/7 emergency admissions service for patients requiring Specialist and Critical Care services i.e.

- All emergency admissions for major illnesses and injuries and those in need of resuscitation.
- All Emergency Surgery and Trauma care
- Emergency Assessment Unit
- Critical Care
- Acute Cardiac Unit and Cardiology Inpatients
- Hyper Acute Stroke
- Acute Medicine
- Obstetric inpatients and high-risk births
- Children's Assessment Unit
- Neonatal Intensive Care and Special Care Baby Unit
- Paediatric inpatients
- Paediatric inpatient surgery
- Emergency endoscopy and gastroenterology inpatients

Aneurin Bevan Health Board is one of seven acute Local Health Boards in Wales. It provides acute, community and mental healthcare services to more than 600,000 people living in Southeast Wales, and is one of the largest and busiest NHS health boards/Trusts the UK. Currently, it is responsible for delivering services through its centre of specialist and critical care at the Grange University Hospital and three other acute hospitals in Newport, Abergavenny and Ystrad Mynach, supported by nineteen community hospitals, health centres and extensive mental health and learning disabilities facilities. The Grange University Hospital provides specialist and critical care services, emergency surgery, hyper acute stroke care as well as 7-day specialist input in cardiology, respiratory and gastroenterology. The three local enhanced General Hospitals (eLGHs) provide care to patients who do not require surgery, specialist care or intensive care support.

The post is open to anyone with a CCT in acute medicine or general medicine. We would also welcome applicants with CCT's in specialities to apply and are open to negotiation on job plans split with other medical specialities.

Aneurin Bevan University Health Board is committed to developing its acute medical model of care and consequently an exciting opportunity has arisen for dynamic individuals to join the existing Acute Physician (AP) team within the health board. Base sites will be at GUH but some shifts maybe be spent at RGH or NHH if the service demands it. You will be joining an established team of 16 Acute Physicians, between us covering Acute Medical Units in NHH, GUH, and RGH. The new purpose-built Same Day Emergency Care Unit (SDEC) based at GUH opened at the end of July 2022, and this job advertisement is to allow us to make best use of this opportunity, as well as growing the SDEC service in RGH.

The AMU at GUH has 21 spaces, of which 3 are triage or rapid assessment spaces, 7 are cubicle spaces (2 with en suite facilities) with provision for a procedure room, there is an 8 bedded short stay unit for acute medicine inpatients 'AMU2' and a Respiratory Assessment area of a further 8 beds. The team see all acute medical admissions to GUH which come through the AMU, as well as seeing Emergency Department (ED) referrals which are not directed at the front door to specialty teams. The patients on AMU will be handed over to specialty teams as appropriate, discharged, kept under the care of Acute Medicine on our 8 bedded short stay area, or transferred out to eLGHs for ongoing care. APs will be on site on the AMU 12 hours a day (0800 to 2000) 7 days a week.

The unit has appropriate levels of nursing staff and skill mix, as well as a team of dedicated on-call doctors (days, twilights and nights) to manage the daily medical take of 80-100 patients. The PTWR is completed in its entirety by acute medicine consultants, with the exception of a few patients per day who meet 'straight to specialty criteria'. There two simultaneous PTWRs, so each consultant is expected to see 20-25 new patients per 12h shift, which falls well within the guidelines laid out in the Report of the Safer Medical Staffing Working Party of the RCP for 'partly

consultant delivered care'. The Acute Medical team itself has 5 trainees assigned to it (F2, 3 ACCS trainees, an IM3 and an ST) who will perform various roles as required by their training needs and has responsibility for the acute medicine inpatient load (and one session of consultant time daily). The patient numbers vary but 10-25 across all areas is representative, with 75% dischargeable per day. There is a team of 6 Nurse Practitioners (mix of ANPs and NPs) and 8 Physician Associates (PAs) employed by the directorate who support the acute medical and on call teams with patient related admin and procedures, as well as having their own specialist areas of practice. The unit also has a dedicated pharmacy support and in-reach support from physiotherapists, occupational therapists, and social work 'home first team' as appropriate. There are close links with Gwent Frailty department who support early discharge.

This recruitment is to support the delivery of an SDEC unit which is fundamental to the functioning of the 'front door' in GUH. We are dedicated to this change in process, in which we are experienced and successful in delivering with many years' track record of delivery in both RGH and NHH. However, with the opening of a fourth acute site we need further recruitment to maintain this delivery. The SDEC unit is a shared space with the general surgical team and this innovative way of working is proving very effective. Here are 44 chair spaces, 7 examination trolleys, and 4 procedure areas. The nursing and ancillary staff are dedicated to 'SDEC' with no distinction between medicine or surgery. The SDEC unit is physically open and staffed between 8am – 10pm Monday to Friday but there is no expectation for continuous acute medicine consultant presence throughout this time. There is a clerking team of junior doctors and an ANP, and hours of activity tend to mirror the referral patterns from primary care, with peak numbers (5-15 per day) between 1100 and 1800; radiology and laboratory support services regard this as core working hours, and evening working is expected. The SDEC unit is able to accept:

- New patients, either diverted from ED / AMU, or referred directly to SDEC from WAST or primary care (via the flow centre).
- Booked patients (i.e. admissions avoidance or follow up following early discharge) via a diary system.

#### eLGH model

As far as it is possible, the aim is to have an identical model on the 2 eLGH sites that the AP team are responsible for. This will enable seamless cross-site working, and if necessary, will make cross covering easier in the event of any staffing difficulties.

In the morning, one AP will provide a ward round in the AMU to cover any overnight admission who had not been seen by a consultant. Additionally, they will review any potential discharges on the ward, especially the Acute Medicine defined patients. Currently, we are unable to provide a weekend ward round, but any successful applicant will be asked whether they would wish to provide weekend round for additional payment

Patients who are admitted to eLGHs during the day will be reviewed by other physicians on the on-call rota. Depending on recruitment we may be able to reinstitute a formal SDEC model whereby acute medicine stream patients to accelerated discharge or AMU for assessment by the on-call team and admission.

#### **Flow Centre**

In order that patients can be correctly streamed to the correct service at the correct healthcare setting, ABUHB have set up the Flow Centre. This was set up during the initial phases of the Sars-Cov-19 pandemic by APs along with assistance from other general physicians. It has now developed into a Flow Centre and Transfer Hub, based at Vantage Point house in Cwmbran, co-located with the local Welsh Ambulance Service Trust call centre. Whilst it does not form part of the core job plan, there will be an opportunity for any successful candidate to undertake sessions here, supervising and advising the Band 3 call handlers and Band 6 senior nurse, and providing direct liaison with primary care and WAST.

#### Role of APs

APs will provide clinical leadership and direction for the multi professional team in the management of the acute medical patients. It is expected that they will lead ward rounds, direct the management of patients, perform practical procedures, teach both junior medical and other staff, attend multidisciplinary meetings, take part in the governance activity of the department, participate in the management and administration of the service and liaise with other professionals both within and outside the Health Board as required.

It is expected that when on duty the working day will commence at 8.00am, and that weekend working (GUH) will be part of the job plan. Patients who attend AMUs during the period of AP cover will be reviewed as soon as results become available, in a 'real time ward round' model, to expedite further management plans and facilitate early discharge where appropriate.

The service for acute medicine is rapidly developing and evolving to meet the needs of patients whilst aiming to reduce the need for hospital admission. You will be expected to participate in service redesign and development with the aim of improving outcomes and reducing length of stay.

The right person for this job will be keen, energetic, and motivated, with an enthusiasm for acute medicine. They will be supported in developing the services, which will improve outcomes and quality of care of patients, hence the importance of auditing practice.

At present the out of hours on-call commitment for acute take remains with the general physicians. Candidates may participate on a voluntary basis, with agreement from the Divisional Director, as long as on-call work does not impact on delivery of core acute medicine.

#### **Special Interest**

The posts are based on a 10-session job plan. Whilst not essential to the post, candidates may have a specialty interest and, depending on negotiations with those particular specialties, may be released for a negotiable number of sessions per week.

#### Operational

The successful candidate will be responsible for:

- Development and clinical delivery of acute medicine within the health board
- Acute assessment of patients who require acute medical input
- Management of acute medical patients admitted to hospital
- Ensure timely and safe discharges to patients who do not require inpatient intervention
- Effective and timely communication with primary care team and with other specialties
- Work within a multi-professional team
- Providing effective leadership to multidisciplinary staff members
- Supporting and developing effective communications between all clinical stakeholders
- Supporting junior medical staff within the team to deliver a high standard of care
- Supporting staff members within the services to increase their knowledge and skills within their professional boundaries

#### **Education and training**

- Active participation in research and quality improvement processes
- Education and training of medical students, Trainee doctors and allied health professionals

#### Strategic

The successful candidate will:

- Use their clinical expertise to play an essential part in the provision of strategic planning, implementation, delivery and evaluation of existing and new integrated services within the Directorate
- Support the Directorate to develop a multi-agency team approach to the design and delivery of the services
- Advise the local Directorate on all clinical matters relevant to their field. Additionally, the post holder will provide medical expertise and advice to support the development and delivery of appropriate programmes of integrated care that will:
- Support service provision which positively focuses on the independence of people in their own homes
- Promote the appropriate use of hospital and community bed based resources by improving the quality of local assessment e.g. through the development of hot clinics, facilitating admission, where necessary, to the most appropriate facility and developing pathways to ensure timely and effective discharge
- Ensure that patients play a central role in managing their health and well-being through the development of initiatives such as 'The Expert Patient'

Facilities: office accommodation, secretarial support and full IT facilities will be provided.

Mentoring will be available to the successful candidate.

#### **Details for Visiting**

Those wishing to discuss the post informally in the first instance, or visit the department are encouraged to contact:

Dr Philip Campbell
Divisional Director Unscheduled care
Grange University Hospital
NP44 8YN
Tel: 01633

E-mail: Philip.Campbell@wales.nhs.uk

Dr Thomas Cozens Clinical Director, Acute medicine Royal Gwent hospital NP20 4UB

Tel: 01633 234053

E-mail: Thomas.Cozens@wales.nhs.uk

Shortlisted candidates are encouraged to visit and contact:

Dr James Calvert Mrs Nicola Prygodzicz
Medical Director Chief Executive

Aneurin Bevan University Health Board Aneurin Bevan University Health Board

Tel: 01633 435971 Tel: 01633 435958

Please note that pre-interview visits to other AAC panel members are neither required nor expected.

#### **Notes**

A candidate for a consultant appointment shall not be reimbursed for more than three attendances. Where an authority invites such a candidate to attend prior to shortlisting, it may reimburse the candidate's expenses provided that he or she is subsequently shortlisted, but not otherwise. In the case of candidates travelling from abroad, travelling expenses are payable only from the point of entry into the United Kingdom.

Applications are welcome from candidates wishing to work part time. If such a person is appointed, modification of the job content will be discussed on a personal basis.

## Job Description

#### The Job Itself

<u>Title:</u> Consultant Physician in Acute medicine

<u>Professionally responsible to:</u> The Medical Director

<u>Managerially accountable to</u>: The Divisional Director, with ultimate accountability to the Chief

Executive

Responsibility for Staff as Part of this Post Shared responsibility for junior medical staff or for junior medical staff

on a rotational basis

Base: Grange University Hospital, Cwmbran, SE Wales with sessions in eLGH

ad hoc (allocated to either NHH or RGH primarily)

Other hospitals at which duties are performed: In view of the fact that the organisation is undertaking an ongoing review of its services and medical model, and the locations at which work is undertaken, it is important to be aware that work patterns may change, and the place(s) of duties modified.

The Clinical Strategy of the Health Board is under constant development and the job holder may be required to undertake different duties agreed at the time of appointment.

#### **Purpose of the Post and General Responsibilities**

To provide, with consultant colleagues (as appropriate), a service in Acute Medicine, supporting the development of acute medicine services so designated with responsibility for the prevention, diagnosis and treatment of illness.

Specific responsibilities of the post are listed in the next section.

As a senior employee of the Health Board the post holder will work in close co-operation with, and support other clinical, medical professional and managerial colleagues in providing high quality healthcare to the Health Board's patients.

Integral to the responsibilities of the post are the following requirements:-

- To ensure the provision of a first class clinical service
- To provide effective leadership to all staff engaged in the specialty
- To sustain and develop teaching and research wherever appropriate
- To undertake all work in accordance with the Health Board's procedures and operating policies
- To conduct clinical practice in accordance with contractual requirements and within the parameters of the Division's and Health Board's service plans
- To maintain the confidence of business plans and development strategies formulated for the specialty, the Medical Division or the Health Board

#### Specific Responsibilities of the Post

#### Clinical

- To support the development and take part in the delivery of a comprehensive acute medicine service
- To share the responsibility for acute +/- general medicine patients admitted to acute medicine wards
- To participate and lead in the acute medical take, both on AMU and SDEC areas.
- To conduct clinical practice in accordance with contractual requirements within the parameters of the Division's and Health Board's agreed objectives
- All clinical staff are accountable and responsible for their own clinical competence and should limit their actions to those for which they are deemed competent. Clinical staff are also required to comply with the requirements of their professional organisations regarding supervision

#### Teaching/Training (as agreed with Clinical Director)

- To provide conditions for improved training opportunities in line with national and local recommendations arising out of Shape of Training (SoT) and related requirements
- To participate in the undergraduate teaching programme
- To assist and participate with the development of postgraduate training for F1s, F2s, SpRs, STs and other staff as appropriate
- Where agreed, to act as Educational Supervisor to junior and middle grade medical staff

#### Audit (as agreed with Clinical Director)

- To promote evidence-based clinical practice
- To undertake regular audit

#### **Quality and Standards**

- To be familiar with and actively promote adherence to the regulatory framework including NICE and National Service Framework Guidance and to actively promote professional standards "The Duties of a Doctor"
- To undertake all work in accordance with the Health Board's procedures and operating policies

#### **Learning Organisation**

To be involved in and actively manage complaints and any medico legal claims in their area of practice, management of serious incidents and responsibility for sharing any organisational learning from these

#### Patient Experience

■ To monitor and respond to measures of patient experience

#### Patient Safety

- To work actively to reduce unintended harm to patients
- To contribute actively to the content areas of the 1000 Lives Plus Campaign and any other subsequent patient safety campaign
- To adhere to the Health Board's Clinical Incident Policy

#### Personal Development

- To attend accredited conferences and meetings to update personal level of clinical practice, teaching and management skills in line with CME requirements
- To participate in an annual Job Planning Review process
- To participate in the Health Board's Annual Appraisal process
- The Health Board will provide support for CPD in accordance of the Royal College
- To prepare thoroughly with the support of the Health Board for annual appraisal and revalidation and to work towards personal development targets agreed at appraisal. The responsible officer within ABUHB is the medical director.

#### Management (as agreed with Clinical Director)

- To provide medical information for the development of systems appropriate for Health Board needs
- To participate in departmental consultant and senior staff meetings
- To attend other departmental, Divisional and Health Board meetings as necessary
- To attend regional and national meetings as necessary
- To undertake all work in accordance with Health Board procedures and operating policies
- To work within the financial and other restraints decided upon by the Health Board. Additional expenses of any kind will not be committed without the approval of the appropriate manager/budget holder

The post holder has a general duty of care for their own health, safety and wellbeing and that of work colleagues, visitors and patients within the hospital. This statutory duty is in addition to any specific risk management or clinical governance accountabilities associated with the post.

#### Finally, the post holder is expected to:

- Observe the rules, policies, procedures and standards of Aneurin Bevan University Health Board together with all relevant statutory and professional obligations
- Observe and maintain strict confidentiality of personal information relating to patients and staff
- Be responsible, with management support, for their own personal development and to actively contribute to the development of colleagues

#### Location

The principal place of work for this post will be Grange University Hospital (GUH) with option of working at other eLGH sites (RGH and NHH). The post holder will generally be expected to undertake their programmed activities at the principal place of work or other locations agreed in the Job Plan. Exceptions will include travelling between work sites and attending official meetings away from the workplace. A planned and cost effective approach is expected, and is included in the DCC sessional allocation. The post holder may be required to work at any site within the Health Board, including new sites.

#### Review

This job description will be regularly reviewed. It is intended as a guide to the general scope of duties and is not intended to be definitive or restrictive. It is expected that some of the duties will change over time and this description will be subject to review in consultation with the post holder.

#### On-Call Arrangements

There is no out of hours commitment for acute or general medicine anticipated. However, successful candidates may participate on a voluntary basis, with agreement from the Divisional Director, as long as on-call work does not impact on delivery of core acute medicine service.

#### **Provisional Job Plan**

(As required under paragraph 30a of the Terms and Conditions of Service)

Please note that APs work an annualised and variable job plan, and this is indicative. While the advert is primarily for GUH based clinicians, there will be opportunities to work on the eLGH sites as negotiated. The rota is annualised and DCC time for patient related administration (letters / dictation / telephone follow up / discharge notification) is prospectively and pre-emptively taken into account when sessions are calculated, as per BMA guidelines.

Day	Time	Location	Work	Category	No. of Sessions
Monday	АМ	RGH	AMU	DDC	
	PM	RGH	AMU	DCC	
Tuesday	AM	GUH	AMU	DCC	
	PM/EVE	GUH	AMU/SDEC	DCC	
Wednesday	AM	RGH / WFH	SPA	SPA	
	PM	RGH / WFH	SPA	SPA	
Thursday	AM	GUH	Short stay unit /CAZ	DCC	
	PM				
Friday	АМ	RGH	SPA	SPA	
	PM				
Saturday	0800-2000	GUH	AMU	DCC	1:
Sunday	0800-1200	GUH		DCC	1:
				Total Sessions	10

Programmed Activity	Sessions
Direct Clinical Care (including unpredictable on-call)	7
Supporting Professional Activities	3
Other NHS Responsibilities	
External Duties	
Total Sessions	10.00

Summary of available shifts, and the DCCs will be made up of a variety of these, the exact make up is to a degree negotiable, and will vary from week to week.

- GUH long day AMU cover, with responsibility for the patients from the preceding night and all day. This will include cross covering those streamed to SDEC unit as well as the AMU.
- GUH long day ED inreach, based in ED for the full shift seeing referrals as they come in.
- GUH short day short stay unit cover and CAZ (Covid Admissions Zone).
- eLGH day (0800-1600) AMU.
- eLGH short day (0800-1200) acute medicine short stay and CAZ.

Weekend day working in GUH is included within the job plan, current frequency 1:7 although this may change if appointments are made. Time off in lieu is allocated prospectively based on annualised sessional allocation, so

weekend sessions will be compensated for by having fewer sessions in the week preceding / following the weekend . There is no commitment to the night on call rota.

In line with the terms and conditions, the final job plan is subject to the agreement of the Health Board through the Clinical Director and the appointee.

The number of PA's may vary with the agreement of the post holder and the Health Board in advance or after commencement and an increase in SPA's would accompany an agreement to take on additional duties such as College Tutor etc.

# **Person Specification**

## **CONSULTANT ACUTE PHYSICIAN – CON555**

Requirements	Essential	Desirable	Measurable by
Qualifications	<ul> <li>Full GMC Registration and Licence to Practise</li> <li>On the GMC Specialist Register (including via CESR/European Community Rights) or will have a CCT/CESR(CP) date within 6 months of interview</li> <li>MRCP or equivalent</li> <li>Valid Certified Advanced Life Support Skills (or equivalent international qualification)</li> </ul>	- Relevant Higher Degree e.g. MD; PhD; MSc	Application
Clinical Experience	<ul> <li>Broad based experience in general medicine, including acute medicine</li> <li>Knowledge of UK hospital systems (or equivalent)</li> <li>Knowledge and participation in CPD</li> <li>Competence in general medicine</li> <li>Able to apply knowledge</li> <li>Safe and effective written and verbal communication skills</li> <li>Meet the requirement of the GMC's "Good Medical Practice"</li> </ul>	Experience of NHS     Wider experience, research and training in Mohs     Evidence of above average performance	Application/ Interview
Clinical Governance	<ul> <li>Evidence of participation in clinical audit and understanding role of audit in improving medical practice</li> <li>Comprehension of core philosophy and building blocks of Clinical Governance</li> </ul>	- Knowledge of risk management	Application/ Interview
Research	- Experience and knowledge of critical appraisal of evidence	<ul> <li>Evidence of initiating, progressing and concluding research projects with publication</li> <li>Research degree</li> </ul>	Application/ Interview
Teaching	<ul> <li>Evidence of organising programmes and teaching medical students and junior doctors</li> <li>Willingness to teach medical undergraduates and postgraduates</li> </ul>	<ul> <li>Organisation of further teaching programmes in medical education</li> <li>"Training the Trainers" experience</li> </ul>	Application/ Interview
Management	- Knowledge of the management and structure of the NHS	- Evidence of management training	Application/ Interview
Personal Qualities	<ul> <li>Ability to cope with stressful situations and undertake responsibility</li> <li>Excellent interpersonal skills and team-working skills</li> <li>Ability to work as part of a multidisciplinary and multi-agency team</li> <li>Ability to work flexibly in response to the changing needs of the service</li> </ul>	Evidence of leadership attributes     Motivational skills	Interview
Other Requirements	<ul> <li>Demonstrable skills in written and spoken English adequate to enable effective communication about medical topics with patients and colleagues</li> <li>Satisfactory pre-employment checks compliant with National Standards</li> <li>Ability to fulfil all duties of post, including on-call commitments and travel to meet requirements of the post</li> </ul>	- Ability to speak Welsh or willingness to learn	Application/ Interview

## The Specialty

### Names of Consultant Members, Department of Acute medicine

Number in brackets is number of acute medicine sessions per week

Dr Haris Saleem (6)	. Consultant Acute Physician with an interest in Gastroenterology
Dr Paul Mizen (5)	. Consultant Acute Physician with an interest in Gastroenterology
Dr Ferran Cavalle (5)	. Consultant Acute Physician with an interest in Cardiology
Dr Hannah Brothers (5)	. Consultant Acute Physician with an interest in Pleural and Respiratory Medicine
Dr Emma Mason (5)	. Consultant Acute Physician with an interest in Palliative Medicine
Dr Thomas Cozens (6)	. Consultant Acute Physician (Clinical Director)
Dr Vinod Mathrani (5)	. Consultant Acute Physician with an interest in Renal Medicine
Dr Llifon Edwards (8)	. Consultant Acute Physician with an interest in Respiratory Medicine
Dr Wendy Munro (7)	. Consultant Acute Physician (Clinical Lead for Quality and Governance)
Dr John Northfield (8)	. Consultant Acute Physician with an interest in Infectious Diseases
Dr Manjeet Singh (6)	. Consultant Acute Physician with an interest in Clinical Pharmacology
Dr Sarah Woollard (5)	. Consultant Acute Physician with an interest in Care of Elderly
Dr Kath Barnes (5)	. Consultant Acute Physician with an interest in Care of Elderly
Dr Stephanie Gray (8)	Specialist Grade in Acute Medicine
Dr Htin Aung (6)	Consultant in Acute Medicine with an interest in acute stroke.
Dr Deborah Wales (4)	Consultant Acute Physician with an interest in Respiratory Medicine
Dr Ifor Capel (2)	Consultant in Acute and Critical Care Medicine