

Consultant in Acute General Medicine (AGM) and Gastroenterology

1 post



POST OF CONSULTANT in ACUTE GENERAL MEDICINE (AGM) and GASTROENTEROLOGY

Oxford University Hospitals NHS Foundation Trust is appointing one whole-time consultant in ACUTE GENERAL MEDICINE (AGM) and GASTROENTEROLOGY to support an expanding department and new model of working.

The appointments are on a full-time basis but applications are welcome from those who wish to work less than full-time or job share.

Candidates are advised to visit the Departments and are invited to contact the relevant Clinical Director of AMR, Dr Sudhir Singh tel: 01865 234848; Clinical Director for Gastroenterology Dr Alissa Walsh, Tel: 01865 xxxxxx, and Tony Ellis Tel:07958229392.

The following papers are attached:

- 1. Advertisement
- 2. Job Description
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CONSULTANT in ACUTE GENERAL MEDICINE (AGM) and GASTROENTEROLOGY.

OXFORD UNIVERSITY HOSPITALS NHS FOUNDATION TRUST

Applications are invited for a consultant post in Acute General Medicine (AGM) and Gastroenterology at the Oxford University Hospitals NHS Trust (OUHFT). The OUH NHS Trust comprises four hospitals: the John Radcliffe Hospital, Nuffield Orthopaedic Centre, Churchill Hospital and the Horton General Hospital. Applicants will be based mainly at the Horton Hospital with Gastroenterology sessions at the John Radcliffe Hospital.

This is an exciting time to join AGM and Gastroenterology at OUHFT and become part of a consultant workforce with a reputation for excellence. We are seeking an enthusiastic colleague who is skilled in the delivery of acute medical care including the interface with the Emergency Department and other hospital specialties, and a gastroenterologist who is able to deliver specialist care for both in-patients and outpatients integrated within the OUH team of gastroenterologists/hepatologists.

The Horton General Hospital is located in the market town of Banbury and serves the growing population of North Oxfordshire and surrounding areas. The AGM department has recently transformed the way in which consultant-led care is delivered across the inpatient areas with a dedicated EAU consultant, ward based medical teams and increased Ambulatory care.

We work in a flexible and modular way that allows the opportunity for ongoing consultant career development. We expect the successful candidate to develop their subspecialaty interests.

We will support new colleagues in developing teaching and leadership roles. The Trust is a clinically led organisation and AGM consultants play key senior management roles. Research activities are developing and new appointments may support this.

The Trust is one of the NHS Digital Exemplar sites and is already paper-light in many areas. New colleagues are expected to support this ongoing work; training will be provided.

The appointments are on a full-time basis. Applications are welcome from those who wish to job share or work less than full-time, or from those looking to combine clinical work with a research career or teaching and training. Those with academic and subspecialty interests are encouraged to discuss the opportunities that are available.

Oxford is a beautiful historic City. We have excellent schools and fabulous communities. There is good access to London, the Cotswolds and rail links around the Country. There is something for everyone.

In the interest of equal opportunities, we want to make sure that information about candidates is provided in the same format so all applicants should fill in the standard application form on the NHS Jobs website.

2. Job Description

JOB TITLE:	Consultant in AGM and Gastroenterology
GRADE:	Consultant
DEPARTMENT:	Acute General Medicine
ACCOUNTABLE TO:	Managerial Responsibility Dr Sudhir Singh – Clinical Director Professional Accountability Dr Sarah Smith - Divisional Medical Director Dr Larry Fitton - Divisional Director

PRINCIPAL ACTIVITIES:

Clinical

The post-holder's principal duties will be delivered at the Horton Hospital, but it is a condition of the appointment that the post-holder will be willing to work in any of the Trust's locations. The post-holder will provide consultant physician services for the Oxford University Hospitals NHS Foundation Trust, including care of acute admissions, care of outpatients, leading ward rounds and other professional activities relating to Acute General Medicine and Gastroenterology.

AGM at the Horton Hospital:

The department consists of an Emergency Assessment Unit (18 beds), short stay ward (18 beds) and 2 general medical wards (28 and 30 beds). AGM consultants also provide medical care for patients on a 4-bed Critical Care Unit (CCU) providing level 2 care, supported by anaesthetic colleagues.

There is a team of at least 8 WTE general physicians delivering AGM at the Horton. The majority of consultants work across both JR and Horton sites which helps to maintain excellent levels of communication and cohesiveness across the sites. The current consultant body consists of general physicians with specialist interests in Cardiology, Gastroenterology, Infectious Diseases, Diabetes, Endocrinology and Geratology. The department receives regular specialist input from Respiratory, Acute Oncology and Palliative care.

Inpatient teams are ward-based and consultants manage approximately 20 inpatients supported by a team of junior doctors comprising an ST3+, IMT/CMT/FY2/GPVTS and an FY1.

The Horton AGM consultant on call rota for this post is 1 in 16 (ie shared with a colleague). The current working practice is to work blocks of 2 months alternating between medicine 1:8 with reduced Gastroenterology committment and pure Gastroenterology with consults The unselected acute admissions equal approximately 20 per day with referrals from ED or following triage by the senior decision maker carrying the GP referral phone. Some specialist services (e.g. Stroke, ACS, oncological emergencies) may go directly to the John Radcliffe. The AGM consultant on call is responsible for the full 24hr period and will undertake reviews regularly throughout the day. Following the post-take ward round, patients will be assigned to a consultant team based on their location. Handover occurs at 0900 and 2130 daily. All

documentation including medical clerking, post-take consultant ward round and subsequent ward rounds are on the Trusts electronic patient record.

Educational opportunities include regular journal club, case-based discussion sessions, formal reflection and SIM training sessions. There is an on-site postgraduate education centre and library.

Ambulatory Care

Ambulatory Care is delivered 7 days a week through the Ambulatory Assessment Unit (AAU) at the John Radcliffe and 5 days a week at the Rowan Ambulatory Unit (RAU) at the Horton Hospital. The ambulatory consultant in charge leads the unit for a whole day to support continuity and decision-making. Phone referrals are handled by consultants or senior registrars regardless of provenance (GP, paramedics, ED, advanced practitioners), with a heavy emphasis on decision support and risk shareholding, supplemented by an expanded spectrum of interface options including home-based care delivered through an established Acute Hospital At Home model. Consultants are also expected to take a proactive role in interacting with the Emergency Department and other areas of the Trust under pressure, and deploy the AAU resources flexibly according to need. The ambulatory units are supported by a team of doctors in training and dedicated ambulatory fellows, as well as a skilled nursing team, integrated senior physiotherapist and pharmacy team.

Ambulatory Care consultants have backgrounds in Acute Medicine, Geriatrics, Endocrine, Renal, Stroke and Emergency Medicine and Primary Care. This broad background, together with a strong academic narrative, help drive a dynamic and innovative Unit. Consultants have a diverse portfolio of activities including BRC (Biomedical Research Centre) and NIHR (National Institute of Health Research) supported projects, point of care imaging and diagnostics, mixed methods and systems research and education. The department hosts the Trust's RCP Chief Registrar Programme, ambulatory fellowship programme and founded the physician associate programme.

Gastroenterology

The post-holder's duties will be primarily at the **Horton Hospital in Banbury** with 2 sessions at the **John Radcliffe Oxford in Gastroenterology.** It is a condition of the appointment that the post-holder will be willing to work in any of the Trust's locations.

The Consultants provide a consult based service to the Consultants in Acute Medicine who manage the inpatients on the Horton site. There is complete integration with colleagues at the John Radcliffe Hospital allowing for complex patients to be managed across all sites with open pathways for transfer where necessary. The consultants at the Horton Hospital have access to all MDT's for patients with cancer, advanced liver disease, and advanced IBD. In addition there are regular X-Ray meetings and clinicopathological meetings which are based at the John Radcliffe and accessible by MS Teams.

Clinics are a standard 4h duration with new (30min) and follow up (15min) patients. Endoscopy lists are a standard 12 units per list, with a mixture of upper gastrointestinal endoscopy (1 unit diagnostic, 2 units therapeutic) and colonoscopy (2 units diagnostic including simple polypectomy, 3 units therapeutic). Consultants are allocated 0.5PA per clinic to manage the administration arising from clinics, and 0.2PA's per endoscopy list to manage administration arising from endoscopy lists.

There are emergency endoscopy slots in hours Monday-Friday but no out of hours service. Patients presenting with active bleeding out of hours are directed to the John Radcliffe Hospital by the ambulance service and transfers arranged as necessary in the rare occasion that an in-patient develops bleeding at night/over a weekend

The Gastroenterology department have a team of secretarial and administrative support. Office space will be provided, with access to a computer/laptop. IT support is available from the Trust IT support team. One of the existing consultant team will support as a mentor, any new Consultant joining the team

Teaching/Research

The Dept of Gastroenterology at the Horton Hospital currently has two trainees in Gastroenterology. The postholder will contribute to their training and participate in the regional teaching programme, held on a Thursday afternoon.

Oxford University Hospitals NHS Foundation Trust is a Teaching Hospital. The post-holder is required to participate in programmes for teaching clinical students, training junior doctors and in clinical examinations. This is an integral part of everyday clinical activity. The post-holder's contribution to teaching, training and research will be included in the regular job plan review. We are fortunate to have trainees and students of the highest calibre. There are many teaching, training and research opportunities within the department and the wider Trust and Universities. We have close links with two universities (Oxford University and Oxford Brookes University) that train many of our clinical staff and are actively exploring interdisciplinary and multi-professional opportunities. We are at the centre of a new Academic Health Science Network. www.oxfordahsn.org

Clinical Governance

The post-holder will participate in all clinical governance activities, including clinical audit, clinical effectiveness, risk management, quality improvement activities as required by the Trust, and external accrediting bodies.

Personal and Professional Development

The post-holder will be required to keep himself/ herself fully up-to-date with their relevant area of practice and to be able to demonstrate this to the satisfaction of the Trust, and participate in annual appraisal and development of a portfolio to support revalidation. The Trust has well developed systems to support Appraisal and Revalidation. All new consultant appointees are assigned a mentor. Professional or study leave will be granted at the discretion of the Trust, in line with the prevailing Terms and Conditions of Service, to support appropriate study, postgraduate training activities, relevant CME courses and other appropriate personal development needs.

Management

The post-holder will be required to work within the Trust's management policies and procedures, both statutory and internal, accepting that the resources available to the Trust are finite and that all changes in clinical practice or workload, or developments requiring additional resources must have prior agreement with the Trust. He/ she will undertake the administrative duties associated with the care of his/ her patients, and the running of his/ her clinical service under the direction of the lead clinician and/or directorate chair.

Risk Management

The management of risk is the responsibility of everyone and will be achieved within a progressive, honest and open environment.

Staff will be provided with the necessary education, training and support to enable them to meet this responsibility.

Staff should be familiar with the:

- Major Incident Policy
- Fire Policy

and should make themselves familiar with the 'local response' plan and their role within that response.

Responsibilities for Health & Safety

The post holder is responsible for ensuring that all duties and responsibilities of this post are carried out in compliance with the Health & Safety at Work Act 1974, Statutory Regulations and Trust Policies and Procedures. This will be supported by the provision of training and specialist advice where required.

Infection Control

Infection Control is everyone's responsibility. All staff, both clinical and non clinical, are required to adhere to the Trust's Infection Prevention and Control Policies and make every effort to maintain high standards of infection control at all times thereby reducing the burden of Healthcare Associated Infections.

All staff employed by the Trust have the following key responsibilities:

- Staff must decontaminate their hands prior to and after direct patient contact or contact with the patient's surroundings.
- Staff members have a duty to attend Trust's mandatory infection control training
- Staff members who develop an infection (other than common colds and illness) that may be transmittable to patients have a duty to contact Occupational Health.

Equality and Diversity

The Trust values equality and diversity in employment and in the services we provide. We are committed to promoting equality and diversity in employment and will keep under review our policies and procedures to ensure that the job related needs of all staff working in the Trust are recognised.

The Trust will aim to ensure that all job applicants, employees or clients are treated fairly and valued equally regardless of sex, marital status, domestic circumstances, age, race, colour, disablement, ethnic or national origin, social background or employment status, sexual orientation, religion, beliefs, HIV status, gender reassignment, political affiliation or trade union membership. Selection for training and development and promotion will be based on the individual's ability to meet the requirements of the job.

Freedom of Information

The post holder should be aware of the responsibility placed on employees under the Freedom of Information Act 2000 and is responsible for helping to ensure that the Trust complies with the Act when handling or dealing with any information relating to Trust activity.

Patient and Public Involvement

The Trust is committed to, and has a statutory duty to involve service users, carers and the public in the work of the organisation. We consider that patient and public involvement is the

responsibility of every individual working for our Trust. All staff have a responsibility to listen to the views of patients and to contribute to service improvements based on patient feedback. You will be expected to support the Trust with this through your working practice.

Serious Incidents

All staff must report incidents and near misses so that the Trust can reduce the risk of harm by investigating and incorporating risk reducing measures to safe guard patients, visitors and staff, in accordance with the Trust Incident Reporting Policy.

Children's Rights

The post holder will endeavour at all times to uphold the rights of children and young people in accordance with the UN Convention Rights of the Child.

Safeguarding Children and Vulnerable Adults

The Trust is committed to safeguarding children and vulnerable adults throughout the organisation. As a member of the trust there is a duty to assist in protecting patients and their families from any from of harm when they are vulnerable.

Information Governance

You must maintain a Trust email account. All staff must complete annual information governance training which can be completed on-line. For further details, go to the Information Governance intranet site: http://orh.oxnet.nhs.uk/InformationGovernance/Pages/Default.aspx

General

The post-holder will assume a continuing responsibility for the care of patients in his/her charge and the proper functioning of his/her department.

3. Person Specification

Requirements	Essential	Desirable
Qualifications/Training		
Professional	Medical Degree (MBChB, MBBS)	Higher medical degree
qualifications	MRCP or equivalent	
Professional training	CCT in Gastroenterology and General Medicine	
	Registration on the GMC specialist register in Acute/ General Internal Medicine/Gastroenterology or	
	Are within six months of achieving CCT at the time of interview. AND JAG accreditation or equivalent in Gastroscopy	
Experience		
Work experience	Training in General Medicine/Gastroenterology to specialist level or equivalent.	Evidence of completed and published research.
	Experience in acute general medicine (minimum of 12 months at SpR or consultant level)	
	General training in Gastroenterology to specialist level or equivalent.	
	Extensive experience in upper and lower Gastrointestinal Endoscopy.	
Type of experience	Broad experience of acute general medicine and Gastroenterology at Consultant or senior trainee level	
Level of responsibility	Evidence of ability to make decisions at consultant level and to manage complex clinical problems.	
Skills and Knowledge		
Leadership skills	Excellent leadership skills. Evidence of ability to lead a clinical team at the level of a consultant in a teaching hospital.	Evidence of leadership in NHS, research, teaching, professional bodies or service development.
Organisation and management skills	Sufficient organisational skills to function as a consultant	Management qualification.
Professional - extra skills or achievements	Evidence of significant contribution to successful teamwork	Ability to use word processor, spreadsheet and presentation
	Evidence of interdisciplinary and multi-professional working	programs. Prior experience with clinical
	Evidence of flexibility and open to innovative ways of working	information systems.
Communication and	Excellent spoken and written English.	Proven ability to communicate in
interpersonal skills	Highly developed communication and interpersonal skills.	written form (publications, reports etc).
Teaching and training	Experience of formal and informal contributions to	Education qualification
skills	teaching and training at undergraduate and postgraduate level.	Experience as clinical or educational supervisor

Clinical governance experience	Evidence of effective and sustained contribution to clinical governance, clinical risk management and clinical audit activities	
Research skills	Ability to support departmental research.	Peer reviewed publications Research grants
Other Requirements		
GMC Registration	Full registration and licence to practise	
Transport		Full driving licence

4. Indicative Job Plan outline & Programmed Activities

Indicative timetables and job plans are outlined below for the post.

We are very happy to tailor the job to individual sub-specialty interests. There will be a background of general clinic and general endoscopy however there is a need in all areas of Gastroenterology/Hepatology for further expertise and we want to work to the candidate's strengths, to make the job enjoyable and to strive to promote career progression.

The final Job Plan for the post will be agreed with the Clinical Directors for Medicine and Gastroenterology jointly upon appointment and will be subject to renegotiation at least annually.

The job plan is 8.5 + 1.5 (DCC + SPA).

HORTON GENERAL HOSPITAL (HGH)

1	Time	Locatio n	Work	Categorisation	PAs
	09:00-11:00	Horton	Gastro referrals	DCC	0.5
Monday	13:00 – 17:00	Horton	Gastroenterology Clinic (incl admin)	DCC	1
	09:00-13:00	Horton	Audit	DCC	1
Tuesday	14:00-1800	Horton	Gastroenterology Clinic (incl admin) (6 months o fyear when not on AGM)	DCC	0.5
	09:00-13.00	Horton	Endoscopy (incl admin)	DCC	1
Wednesday					
	14:00-18.00	Horton	Educational meetings/governance	SPA	1
	09:00-13.00	JR	Specialist clinic/procedure list	DCC	1
Thursday	14:00 - 16:00	JR	Gastroenterology MDT	DCC	0.5
	09:00-13:00	Horton	Gastroenterology Clinic (incl admin)	DCC	1
Friday	14:00-16:00	Horton	Gastro referrals	DCC	0.5
	16:00-18:00	Horton	Educational Supervisor role (or suitable alternative role)	SPA	0.5
Saturday					
Sunday					

Additional agree Predictable emergency on- call work	ed activity to be wo	Horton	bly On-take/EAU duty: 1:16	DCC	1.5
Unpredictable emergency on- call work	Variable	On-site At home on the telephone and travelling to and from site			
TOTAL PAs		•			10

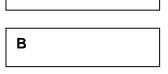
Programmed activity	10 PAs
Direct clinical care (including unpredictable on-call)	8.5
Sessions annualised	
Supporting professional activities	1.5
Other NHS responsibilities	0
External duties	0
TOTAL PROGRAMMED ACTIVITIES	10

On-call availability supplement

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Agreed on-call rota e.g. 1 in 5:

Agreed of	category	(delete):



1:16

On-call supplement e.g. 5%:

When in on acute medical block the postholder will be on-call 1:8 and responsible for 3 ward rounds in 24 hours. A post-take ward round will take place the following morning with patients handed over to colleagues with ward based teams. This equates to 3PA's

When on AGM ward the fixed sessions of endoscopy and OPD will be reduced proportionally. When off AGM wards the job plan will be tailored to 10PA's an example of which is set out below.

As an annulaised job plan, 1PA of endoscopy/OPD will deliver 42 sessions over the year.

5. Division and Service Information

DIVISION (Medicine, Rehabilitation and Cardiac)

Divisional Director: Larry Fitton General Manager: Arun Chandran Divisional Nurse: Louise Rawlinson Divisional Medical Director: Sarah Smith

DIRECTORATE (Emergency Medicine and Therapies)

Clinical Director: Sudhir Singh Operational Services Manager: David Griffiths Matrons: Sarah Wheeler, Kate Pierce, Lynda Huard, Katie Mimpress, Michelle Brock, Mary Byukusenge

5. Acute Medicine and Rehabilitation DIRECTORATE

5.1 Description of department at the Horton Hospital

The Horton is a District General Hospital in Banbury with an Emergency Dept, admitting a largely unselected medical take.

There is a team of at least 8 general physicians based at the Horton operating a traditional Firm structure, with on-call currently 1 in 8. We maintain the connection between sites by having rotating posts and specialist input from the JR to patients at the Horton. A consultant is typically supported by a team of 1 specialty registrar and 2 junior trainees – FY1 plus FY2 / CMT / GPVTS.

Currently the consultant body consists of:

Dr Mike Ward	Geriatrician/AGM
Dr Neil Stewart	Geriatrician/AGM
Dr Nikant Sabharwal	Cardiologist (no AGM commitment)
Dr Joanna D'Arcy	Cardiologist
Dr Shawn Morais	Cardiologist/AGM
Dr Jonathan Marshall	Gastroenterologist/AGM
Dr Tony Ellis	Gastroenterologist/AGM
Dr Nicola DeSavary	Geriatrician/AGM
Dr Matthew Scarborough	ID / Micro
Dr Angela Rogers	Endocrinologist/AGM
Dr Drosos Karageorgopoulos	s ID/AGM

Dr Tri Wangrangsimakul ID/AGM

The wards consist of 2 large medical wards (approx. 28 beds each) and an EAU (Emergency Assessment Unit) together with a co-located short stay ward. Each ward is supported by a pair of consultants who are responsible for all pts on their ward. Outliers are not common but remain under the care of the admitting team. Patients admitted to CCU remain under the admitting team and are supported by Cardiology and Anaesthetics teams.

The Medical Take is unselected acute medical admissions; there are around 20 per day. The consultant oncall is responsible for the full 24hr period encompassing 3 hot rounds during the day (late morning, late afternoon and evening) and a follow up round in the morning for the overnight admissions. There is a 9am handover to the wards and the next team.

Office space and secretarial support are in place for each Medical Firm as a whole. The post holder would share appropriately in this.

Job plans will be tailored as far as possible to the interests and capabilities of the individual in meeting the needs of the service. This may involve clinical commitments across two acute sites to secure integrated cross-site delivery. In line with the Future hospital Commission we are developing a 7 /7 acute generalist model with strong links to all the major supporting specialities. We anticipate further changes in the coming 1-2 years as 7 day working and more generalist capability is developed.

Horton Hospital

Acute General Medicine incl Geratology Orthogeriatrics and general orthopaedic ward CCU

5.2 Gastroenterology SUB-DIRECTORATE – Horton

There are 2 Gastroenterology Consultants based at the Horton General Hospital with Consultants from Oxford contributing on a sessional basis

Dr Tony Ellis (Hepatology/Gastroenterology/Bowel Cancer Screening)) Dr Jonathan Marshall (Hepatology/Gastroenterology)

Dr Tim Ambrose (IBD/Endoscopy) Dr Beth Bird-Lieberman (Bowel Cancer Screening/Endoscopy) Dr Jan Bornschein (Gastroenterology/Endoscopy) Dr Oliver Brain (IBD/Endoscopy) Professor James East (Bowel Cancer Screening/Advanced endoscopy) Dr Alissa Walsh (Bowel Cancer Screening/Endoscopy)

In addition there are three nurse endoscopists working on a sessional basis Eve Jones-Morris (Barretts screening and upper GI endoscopy) Helda Chainho Colonoscopy Sanjay Karola Colonoscopy

5.3 Gastroenterology SUB-DIRECTORATE – Oxford

There are 18 Consultants in the department of which the main base is at the John Radcliffe Hospital, with additional work performed at the Horton General Hospital in Banbury.

Dr Philip Allan (Gastroenterology / Nutrition / Intestinal Failure) Dr Tim Ambrose (Gastroenterology) Dr Adam Bailey (Upper Gl/Gastroenterology) Dr Noor Bekkali (Gastroenterology) Dr Elizabeth Bird-Lieberman (Gastroenterology / Endoscopy) Dr Jan Bornschein (Gastroenterology / Endoscopy) Dr Barbara Braden (Endoscopy) Dr Oliver Brain (Gastroenterology / Endoscopy) Dr Jeremy Cobbold (Hepatology) Dr Jane Collier (Hepatology) Dr Emma Culver (Hepatology / IgG4 systemic disease) Professor James East (Endoscopy) Dr Tony Ellis (Hepatology/Gastroenterology, Horton) Dr Jonathan Marshall (Gastroenterology, Horton) Dr Udit Mittal (Gastroenterology) (locum) Dr Rebecca Palmer (Gastroenterology/ Endoscopy) Dr Francesca Saffioti (Hepatology) (Gastroenterology Dr Alissa Walsh (Gastroenterology)

There are seven Honorary Consultants

Professor Paul Klenerman (Virology and mucosal immunology) Professor Ellie Barnes (Viral liver disease and hepatic immunology) Professor Alison Simmons (Mucosal immunology/IBD) Professor Holm Uhlig (Mucosal immunology/Paediatric gastroenterology) Professor Simon Leedham (Molecular carcinogenesis) Professor Jack Sastangi (IBD) Dr Michael Pavlides (Senior Lecturer, Hepatology, and non-invasive imaging)

Clinical Gastroenterology and Translational Medicine is integrated with Basic Science, with stateof-the-art Gastroenterology laboratories built in 2010 and co-located with the ward and the Gastroenterology Clinical Trials Facility on level 5 at the John Radcliffe, led by Professor Paul Klenerman, Sidney Truelove Professor of Gastroenterology and Head of the Translational Gastroenterology Unit within the Nuffield Dept of Experimental Medicine, University of Oxford.

General

The Translational Gastroenterology Unit in Oxford has its clinical and research base at the John Radcliffe Hospital. There is an allied clinical gastroenterology service at the Horton General Hospital, Banbury. The Gastroenterology Unit provides secondary care for the Oxfordshire Region (620,000 population) and tertiary care for inflammatory bowel disease, nutrition, intestinal failure, hepatobiliary disease, and other gastrointestinal disorders. There are around 1500 inpatients, 5,500 new patient gastroenterology referrals, 15,500 follow-up appointments and 19,000 endoscopic procedures/year (including Bowel Cancer Screening) across the John Radcliffe and Horton Hospitals. The clinical service offices, 19 bed Gastroenterology Ward, 6 bed Day Case Unit, 250m² newly furbished Research Laboratories, Gastroenterology Clinical Trials' Facility and seminar rooms are all located on level 5 at the John Radcliffe Hospital, immediately above the extended Endoscopy Unit and Outpatients' Department, on level 2. The Churchill Hospital, where the Transplantation and elective GI surgery are based, is one mile away, with a shuttle bus service. There is particularly close collaboration with upper gastrointestinal, HPB, colorectal and transplant surgery, as well as gastrointestinal and interventional radiology, and cellular pathology (summarised below).

The Service is consultant led. Dr Oliver Brain has a major interest in inflammatory bowel disease and nutrition; Dr Cobbold runs the hepatology service; Dr Walsh runs the endoscopy service (20,000 procedures/yr), supported by Dr Barbara Braden and Dr Bekkali who both have a special interest in interventional endoscopy and endoscopic ultrasound and Dr Adam Bailey, who also has a specialist interest in upper Gastrointestinal disorders and neuroendocrine tumours. The service consists of gastroenterological medicine incorporating endoscopy, upper GI and colorectal surgery, parenteral nutrition, and stoma therapy. Acute gastrointestinal disorders are managed jointly by specialist physicians and surgeons with common interests. The service is integrated with that at Horton General Hospital in Banbury. The Unit is expanding, with the extension of the Endoscopy Unit and a research and Clinical Trials' Facility, together with further Consultant appointments in progress. The clinical service is integrated with academic Gastroenterology in the Translational Gastroenterology Unit, led by Professor Paul Klenerman, the Sidney Truelove Professor of Gastroenterology.

Eight Honorary Consultants funded through the University, BRC, CRUK, and MRC (Jack Satsangi, Lee Placito Professor of Gastroenterology, epigenetics and IBD; Ellie Barnes, immunology of viral liver disease; Alison Simmons, mucosal immunology; Holm Uhlig, mucosal immunology and Paediatric Gastroenterology, and Simon Leedham, cancer biology) contribute to the service and academic structure. There are two recently appointed Senior Lecturers: Michael Pavlides in hepatology, MR spectroscopy and metabolic liver disease; and Emma Culver, hepatology and IgG4 systemic disease. Particular priority is placed on integration between the clinical service and research (below).

Great emphasis is placed on multidisciplinary care, with close cooperation between six colorectal and three upper gastrointestinal surgeons, 3 HPB surgeons, gastrointestinal histopathology, and radiology. A new Professorial Chair in Colorectal Surgery is in process of being appointed. Patients with inflammatory bowel disease or intestinal failure have joint management between surgical and medical teams. Two Gastroenterology Dietitians and two Gastroenterology Pharmacists are attached to the team. There is close liaison with Paediatric Gastroenterology, especially for adolescent IBD.

Endoscopy

The Endoscopy Unit at the Horton Hospital consists of two rooms which have recently been upgraded. The equipment is state of the art including Olympus Evis X1 stacks, image archiving, CO2 insufflation, water pumps, scopeguide and ERBE VIO 300D. There is video in room and regional teaching is undertaken on a regular basis.

6. Main Conditions of Service

- The post is covered by the national Terms and Conditions of Service of Hospital Medical and Dental Staff (England and Wales) and the Conditions of Service determined by the General Whitley Council for the Health Services (Great Britain), as amended from time to time. As the Trust develops it will review these terms and may vary the national agreements to respond to local conditions and reflect Trust requirements following negotiation with the BMA Local Negotiating Committee.
- 2. The new consultant will be required to maintain his/her private residence in contact with the public telephone service, and to reside within ten miles by road from the John Radcliffe Hospital unless specific approval for a greater distance is given by the Trust.
- 3. The salary scale is \pounds 93,666 \pounds 126,281 with eight thresholds.
- 4. The successful candidate must hold full registration and licence to practice with the GMC.
- 5. The successful candidate must have CCT (or equivalent for non-UK applicants of equivalent status), or be accredited (or equivalent), and be on the GMC Specialist Register in the specialty appropriate for the consultant post at the time of taking up the consultant appointment.
- 6. The successful candidate is not required to subscribe to a recognised professional defence organisation to fulfil his/her contractual obligations to this Trust, but should ensure he/she has adequate defence cover as appropriate, for example, for private and Category 2 work, and for GMC disciplinary proceedings.