Royal Berkshire
NHS Foundation Trust

Consultant Job Information Pack

For Consultant in Rheumatology and General Medicine

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Working Together to Provide Outstanding Care for Our Community

Compassionate | Aspirational | Resourceful | Excellent

Job Information Pack: Contents

Thank you for considering the Royal Berkshire NHS Foundation Trust (RBFT) as your next place of work. We look forward to welcoming you during the recruitment process and hopefully into our friendly and enthusiastic organisation.

Section 1: Departmental Information

Departmental Welcome

This is an exciting opportunity to join our dynamic and enthusiastic team who believe in leading from the frontline with the aim of providing outstanding care to our community and investing in the well-being and development of our people.

In 2014 the Royal Berkshire NHS Foundation Trust was voted in the top 100 places to work and in 2023 Royal Berkshire NHS Foundation Trust is one of the highest performing Trust's for staff experience according to the results of the NHS Staff Survey.

In 2023 Royal Berkshire NHS Foundation Trust is one of the highest performing Trust's for staff experience according to the results of the NHS Staff Survey. The Trust was the highest scoring Trust in the following metrics: "Care of patients/service users is my organisation's top priority", "My organisation acts on concerns raised by patients/service users", "The team I work in often meets to discuss the team's effectiveness" "I am able to make improvements happen in my area of work". There is a dedicated well-being centre in the Trust, the Oasis Centre which provides scape and support for staff.

The Trust has in place a Clinically Led structure placing the decision making responsibilities with Clinicians supported by management teams. As an organisation we do not stand still and our success is because of the strong clinical leadership and the 'can do' attitude of the staff. There are 3 Care Groups (Urgent, Planned and Networked Care).

- Urgent Care – Care Group Director Dr David Mossop
    - Emergency care including A&E, ITU/Critical Care, Radiology
    - Acute Medicine including AMU, ASU, cardiology and respiratory
    - Maternity and Children's Services including Community Paediatics, Paediatric A&E and Neonatal Unit

- Planned Care – Care Group Director Dr Jon Simmons (Gastroenterology)
    - Theatres, anaesthetics, specialist surgery
    - Head & Neck Surgery
    - Abdominal Surgery
    - Berkshire Cancer Centre

- Networked Care – Care Group Director Dr Alex Evans (Gastroenterology)
    - Integrated Medicine A, Including renal, Audiology, Sexual Health, Outpatients

- Integrated Medicine B, including Clinical Haematology, Dermatology, Diabetes and Endocrinology, Rheumatology, Pain Management, and Long COVID.
- Pathology and Pharmacy
- Specialist medicine including elderly care

About The Department

The University Department of Rheumatology

In 2023 Rheumatology achieved university status, this was awarded in recognition of excellence in clinical outcomes, research and education. The Rheumatology department offers outpatient clinics at the Royal Berkshire Hospital and outlying clinics in community hospitals in Newbury, Henley-on-Thames and Bracknell. Approximately 1200 new patients and 4500 follow-up patients are seen annually in all the Department's outpatient clinics.

In addition to general rheumatology, we have now developed sub- speciality clinics; an Early Inflammatory Arthritis Service with ultrasound scanning has now been set up. A clinical pathway is now in place for urgent assessment of suspected giant cell arteritis (GCA). The department has undertaken assessments from Get It Right First Time (GIRFT). The Department was chosen as the 2nd pilot site nationally for GIRFT Rheumatology team in May 2019 and had a successful review with many leading practice examples identified. The department has set up a successful patient-initiated follow-up (PIFU) scheme and virtual clinics.

The department has successfully completed audits against the National Institute of Clinical Excellence (NICE) Clinical Guidelines (CG), achieving compliance in the standards of care. We are a high recruiter to the HQIP National Early Inflammatory Arthritis Audit which is embedded in our clinics.

There is already a well–developed Axial Spondyloarthropathy service. The department was selected as a centre of excellence for the NASS Aspiring to Excellence programme in 2019. There are 2 specialist physiotherapists attached to this service.

The Rheumatology department also operates a weekly metabolic bone clinic and was instrumental in setting up the Royal Berkshire Fracture Liaison Service (FLS). The Fracture Liaison Service took part in the RCP Quality Improvement Collaborative and has collaborates with the radiology department to identify patients with incidental vertebral fractures. The service has had excellent clinical outcomes in the last national FLS-Database report is now one of the top 5 performing units nationally.

A clinic for our new and follow-up vasculitis patients is now operated jointly by Nephrology and Rheumatology. Decisions regarding management of our patients with systemic vasculitis and other complex rheumatological conditions, are discussed collectively in our multi-disciplinary team with involvement from all the Consultants in the department and at our Oxford Regional MDT which is held every Wednesday.

Combined clinics are also run with the Dermatology department (every 3 months), Gastroenterology Department (every 3 months) for IBD/SpA patients and Respiratory department (monthly) for mutual patients with interstitial lung disease.

The department was awarded the British Society for Rheumatology Best Practice Award in 2016 for the joint working with Berkshire West CCG in setting up the Integrated Pain and Spinal Assessment Service (IPASS) which provides early triage and management of patients with chronic pain. This project was shortlisted in the finals of the HSJ Award for service improvement.

Currently the rheumatology department is responsible for staffing and rounds on a medical ward (Castle Ward) shared with the Diabetes and Endocrinology team. All the consultant rheumatologists share in General Medical ward duties (2 months per year). Rheumatology is thus firmly integrated into general internal medicine.

Day to day inter-speciality links within general medicine are also strong; there is a well – developed culture within the Trust of early cross referral of admissions to appropriate specialities; rheumatology specialists thus see a large number of "medical rheumatology" referrals including vasculitis, connective tissue disease and many other conditions, often in very ill patients, with a "rheumatological" presentation. Cases are discussed at our multi-disciplinary team meetings.

Meetings within the Rheumatology Department: The Department holds a weekly X ray meeting, a weekly multidisciplinary combined ward round / seminar, and a fortnightly journal club for which all medical members of the rheumatology medical team prepare papers in rotation. The Department takes a very active role in the monthly regional academic rheumatology meetings in Oxford.

The appointee along with the other consultant rheumatologists will attend all of these meetings whenever reasonably practicable. These activities are recognised and remunerated by the Trust as Supplementary Programmed Activities (SPAs). Proof of satisfactory attendance at all these activities is thus required by the Trust. To this end an attendance register is kept for these educational meetings.

Clinical Research: There are ongoing active research and development (R&D) programmes in the department. Among these are the Comprehensive Research Network Studies (CRN) for which the department is linked with Oxford and the Thames Valley Network. The department

has close links with the research institutes at the University of Oxford (eg. Botnar Centre of Musculoskeletal Sciences and Kennedy Institute of Rheumatology).

The department has received research funding from the Joint Academic Board at the University of Reading to develop machine learning analysing GP referral letters, blood tests and clinic letters to improve pre-hospital referral triage. The department has strong links with the Business Informatics, Systems and Accounting Department at the Henley Business School, University of Reading for digital transformation in patient care. The recent award of grants to the department from the EPSRC and NIHR for development of artificial intelligence (AI) and machine learning (ML) in rheumatology will further develop the strong research porfolio in the department.

The appointee will be encouraged to develop research links/studies and support is provided by the R&D Team to actively participate in research activities.

Disease modifying drugs (DMARDs) monitoring: The Department additionally operates a DAWN system for monitoring the blood tests of patients on DMARDs. The post holder will be expected to be involved in the decision making process of abnormal blood test results which are reported daily and supported by 3 Rheumatology Nurse Specialists. The Department now has several weekly clinics run by nurse specialists for drug monitoring using the DAWN automated monitoring system; we now have over 3500 patients on DMARDs on the DAWN system, providing one of the largest rheumatology databases in the UK. This system and the 3.5 WTE nurse specialists who operate it are funded by the Berkshire West CCG to undertake this monitoring. The Rheumatology Nursing Team was awarded the Trust Chief Executive Excellence Award in 2016 for this pioneering work. The rheumatology consultants manage the abnormal results on the DAWN system and also manage Advice and Guidance referrals.

Local GPs are making increasing use of email referral and discussion via Advice and Guidance to communicate with the Rheumatology consultants about new and existing patients. There is a strong and good working relationship with Primary Care. There is an educational and training

event with primary care colleagues through the Rheumatology Academy and Collaborative Network (RheumACaN). This innovative educational programme was shortlisted by the British Society for Rheumatology (BSR) for the Best Practice Award 2024.

Biologic therapies: The Rheumatology Department at this Trust has a well – managed biologic therapy programme for patients with inflammatory joint disease; agreed uniform criteria for treatment with biologic drugs are used across the Oxford region (i.e. in Buckinghamshire, Berkshire and Oxfordshire). There is a Biologics Nurse Specialist and also a Medical Infusion Unit (Battle Day Treatment Unit). The latter is staffed by 4 WTE Specialist Nurses where rheumatology patients attend for their biologic infusions. There is a dedicated Rheumatology Pharmacist who runs 2 clinics a week. This clinic is focused on biologic dose-tapering and shared decision making.

Support Services

Emergency Department (ED)

The Emergency Department sees in excess of 100,000 referrals a year and is a led by a team of 13 Consultants who provide front door cover from 08:00 to 24:00, 7 days a week as well as a rapid return at other times. There is close working between acute medicine and emergency medicine in ensuring smooth patient flow. A recent CQC inspection highlighted elements of good practice.

Radiology Department

There is a large radiology department with a team of 20 Consultants including four with an interest in musculoskeletal radiology. A weekly radiology conference is held with MSK Radiologists, Dr Philip Yoong, Dr. Timothy Arayaniagam and Dr. Justyn Jeon. Once a month a joint rheumatology/ respiratory radiology meeting is held.

Critical Care

RBFT has recently increased its critical care provision to 24 beds to accommodate for the increasing requirements of high risk surgical patients and a medical population with increasing co-morbidities. It has one of the best standardised mortality ratios in the country. The Intensive Care Unit is staffed by 16 Consultants, all of whom are dual CCT holders, with second specialties including Acute Medicine, Renal Medicine, Emergency Medicine and Anaesthetics. This has led to close working across the acute services in the trust. This service is augmented by a 24/7 critical care outreach service. It was noted to have an area of Outstanding for Caring by the CQC inspection in 2014. The Trust Call for Concern programme has been acknowledged nationally as an example of best practice.

Diagnostic and Laboratory Services

There is a full range of diagnostic and laboratory services provided by the Berkshire Surrey Pathology Service (BSPS).

Staffing

Speciality Management Team

Role (where applicable)	**Name**
Care Group Director	**Dr Alex Evans**
Care Group Director of Operations	**Benny Goodman**
Clinical Director	**Dr Pratap Neelakantan**
Clinical Lead	**Dr Antoni Chan**
Directorate Manager	**Mrs Lucy Shorthouse**
Matron	**Ms Mariana Carvalho**

Speciality Clinical Team

Role (where applicable)	**Sub-Specialty**	**Name**
Consultant	Rheumatologist	Dr Jeremy McNally
Consultant and Clinical Lead	Rheumatologist	Dr Antoni Chan
Consultant	Rheumatologist	Dr Gordon MacDonald
Consultant	Rheumatologist	Dr Anna Mistry
Consultant, Clinical Governance lead	Rheumatologist	Dr Sunil Melath
Specialist Registrar	Rheumatology	3
CMT/GPVTS		1 on medical rotation, 1 on GP Vocational Training Scheme
FY1/2		1
PA		Nikki Saunders Laura Taylor
Lead Nurse		Shirley Lee
Clinical Nurse Specialists		6
Biologic Infusion / Day Unit Nurse		4
Fracture Liaison Practitioners		2
Physiotherapists		2
Occupational Therapist		1
Admin team		7

Research, Training & Development

The trust is committed to ongoing training and support of consultants, There is a structured two year programme of induction and leadership development. Every consultant appointed is offered a choice of mentors and expected to meet with them on a regular basis.

The Trust has an excellent reputation for education, as measured by its GMC Survey and regular responses from trainees and medical students. It has a medical library with an active Library & Knowledge Services team, a resuscitation and clinical skills department offering external nationally accredited courses and an established simulation centre - all of which are fully equipped for Technology Enhanced Learning (TEL) in a virtual environment.

There is an expectation that all consultants will participate in trainee education and training, both in theatre and through running tutorials, viva practice, etc. This is an important aspect of the role. The Trust accommodates medical students from Oxford, Southampton and Brunel Universities, attracts high calibre trainees and has a good exam success record.

The post holder will work towards facilitating, growing and consolidating a research culture within their department/specialty, whilst supporting the ambitions of research within the organisation to ensure the Trust remains an excellent organisation to host research and support its own research portfolio in line with NHS and NIHR priorities.

The department has an active and well-received educational programme. There is a dedicated ST, CMT, IMT and F1/2/3 formal teaching programme which Rheumatology actively contributes to.

Section 2: Job Summary

This is a new/replacement 10 PA post for a Consultant Rheumatology and General Medicine at the Royal Berkshire NHS Foundation Trust.

Job Title:	Consultant in Rheumatology and General Medicine
Clinical Speciality / Sub-Speciality:	Rheumatology
Care Group/Clinical Directorate:	Networked Care
Reports To:	Clinical Lead for Rheumatology
Accountable To:	Chief Medical Officer (CMO)
Nominal Base:	RBH (i.e. RBH / PCEU / TMH)
Hours:	Full Time: 10 Programme Activities (PA)*
Contract Type:	Substantive
Salary:	£93,666- £126,281
New or Replacement Post:	Replacement post
On-Call Rota Requirements:	Option to be included in on call out of hours commitment for General Medicine as Physician of the Day (POD), currently 1 in 14 for this post
Pension:	NHS Contributory Scheme
Annual Leave Entitlement:	TBC
Study Leave Entitlement:	TBC

*1 PA = 4 hours

Section 3: Role Description

Job Summary

The post holder will share clinical and managerial leadership within the Rheumatology service with the present consultants. An office base with secretarial and administrative support will be provided.

Main Duties & Responsibilities

Clinical Responsibilities:

1. Outpatient clinics:

The departments provide an outpatient service based upon shared-care protocols and consultations provided directly by consultants or clinical assistants and junior medical staff under direct supervision. The clinics are held at the Royal Berkshire Hospital or in the spoke sites (Bracknell, West Berkshire Community Hospital or Townlands Hospital, Henley-on-Thames).

It is the policy of the Trust and the local CCGs to discharge patients from regular hospital follow up whenever this does not compromise patient safety or health. This policy is facilitated by the longstanding policy of close liaison between the RBFT and GPs in the Trust's catchment area. The appointee will be encouraged to develop a specialist clinic (if necessary with the assistance of a nurse specialist or of colleagues in other specialities).

2. Inpatients

The post holder will:

1. Supervise assessment, investigation and treatment of specialty inpatients on the specialty or outliers wards together with the other departmental consultants. The Rheumatology/Diabetes & Endocrinology cover Castle ward (base ward) and Hunter/Lister wards (outlier wards). Provide support to rheumatology patients receiving day case treatment on the Battle Day Unit. Weekend cover for Castle Ward is provided by Rheumatology/Diabetes & Endocrinology Consultants on a 1 in 8 rota. This involves a ward review in the morning on Saturday and Sunday with a junior doctor. There is no on call commitment out of hours for ward cover weekends.

2. Maintain and develop existing and new team-working practices involving medical staff, physiotherapists, occupational therapists, nurses, clinical psychologists and other Allied Health Professionals who form multidisciplinary team (MDT). The daily MDT board round meeting involving all team members is a cornerstone of the Unit's teamwork. All members of the team on the ward present their involvement in patient management at this daily meeting. The post holder will, with the other consultant(s), participate in and take an integral role in encouraging, developing and supervising this activity

3. With the other consultants provide specialist opinions and support to the in-patients of the other medical and surgical specialities across the Trust. This activity takes place predominantly but not exclusively in the months when the consultant is "on the ward" .

4. Provide prospective cover for the other consultants for all their clinical activities other than outpatient clinics. Annual, professional and study leave is thus agreed with colleagues before being booked with prospective cover in mind. The consultants who cover the ward provide prospective cover for annual, study and professional leave on all the occasions and at all the times that they wish to take such leave. Systems for leave are in place within the department and the Trust that require that adequate cover is maintained. Only in exceptional circumstances and with the permission of the Clinical Director will the Trust allow more than half of the number of consultants to be simultaneously absent

5. Provide at least 8 weeks' advance notice to the Trust of any curtailment or cancellation of outpatient clinics due to annual, study or professional leave.

3. Support for General Practitioners

The departments have developed particularly good links with local GPs over recent years; the postholder (along with the other consultant(s)) will:

1. Offer telephone and email advice to GPs whenever s/he can reasonably be expected to do so.
2. Contribute to the regular seminars hosted two or three times yearly for local general practitioners through seminars such as RheumACAN.
3. Provide advice on Advice and Guidance in a timely manner
4. With the other departmental consultants and under the umbrella of the Royal Berkshire NHS Foundation Trust take part in discussions with CCGs about service provision and development

Management Responsibilities:

The post holder will have active participation in the alternating monthly clinical governance meetings and business meetings within the department. The appointee will, with the other consultants share in the general management of the department. The appointee will be required to take on one of the departmental management roles such as audit, register, research and clinical governance. The appointee will also be educational or clinical supervisor to trainees.

The appointee will be offered a mentor or coach on appointment. The Royal Berkshire NHS Foundation Trust has a mentoring/coaching support programme for all new Consultant appointments.

There will be provision of office desk space and secretarial support for this post.

Training and supervision of junior medical staff

The departments have an active and well-received educational programme. The Trust has an excellent reputation for education, as measured by its PMETB report and regular responses from trainees and medical students.

There is rotation of junior staff within the services, including IMT, ACCS, GPVTS and FY doctors. The post holder will be expected to provide clinical supervision to some junior staff. There active teaching and training sessions for all members of the MDT especially the junior medical staff, including a journal club that all Consultants are expected to be involved in.

The post holder will provide sufficient supervision of junior medical staff and other non-consultant medical staff to allow:

- safety for patients
- provision of satisfactory opinions and information for patients and their GPs
- satisfactory curriculum – based and experiential learning for trainees and assessment of trainees to General Medical Council, Royal College of Physicians and Regional Speciality Training Committee standards.

The Oxford Deanery in consultation with the Trust will where necessary define the exact level of supervision required for satisfactory learning

The postholder will:

1. Participate in teaching all members including non–medical staff; will also participate in the weekly departmental seminars and X ray meeting, in case presentations at hospital Medical Grand Rounds and in taking part (together with other consultants in the Trust) in the IMT teaching programme
2. Serve as an Educational Supervisor (ES) and Clinical Supervisor (CS) to trainees in the Oxford postgraduate training Scheme (F1, F2, IMT and ST); as such will serve on the Regional Specialist Training Committee and will attend its meetings. The postholder will

undergo mandatory ES training at the intervals required by the General Medical Council and the Deanery

3. As an ES and CS be required to undertake regular appraisal and assessment of all doctors in training for whom the postholder has educational and operational responsibility. The post holder will be required to be familiar with the use of the e-portfolio used by trainees
4. Encourage and supervise clinical research and publication by junior medical staff particularly the Specialist Registrars (SpRs)
5. Be encouraged to participate in the organised programme of teaching (by consultants and SpRs) of University of Oxford Medical School and physician associate programme at University of Reading.

Governance and Audit

The departments in common with all other speciality groups in the Trust undertake an active clinical governance programme, with minuted team meetings (currently every two months). All consultant physicians are responsible for supervising presentations by their junior staff at these meetings. There are robust programmes of audit and Clinical Governance. Findings from audit and Clinical Governance are regularly fed into the educational meetings and communicated widely amongst the staff.

Appraisal

The appointee will have an appraisal undertaken annually by an approved trust appraiser and meet the requirements of the trust for satisfactory completion. The successful applicant will be required to actively take part in an agreed CPD programme.

The Responsible Officer for the post is the Medical Director and there is a revalidation officer to provide administrative support and advice for medical staff maintaining their credentials for revalidation

Mandatory Training

The appointee will be required to undertake and complete mandatory training as required by the Trust. There is a requirement to keep the mandatory training log completed within the set date lines.

Continuing Professional Development (CPD)

The appointee in common with all consultants will take part in a CPD programme involving CME, personal appraisal and assessment as determined by the Trust in agreement with professional bodies and the General Medical Council. Appropriate funding for this will be provided.

The Trust's annual combined study and professional leave allowance is an average 10 days per year (30 days over a three year period). All leave has to be requested on the Trust's electronic leave system; the Trust requires that eight weeks' notice of clinic curtailment and cancellation has to be given. Clinics may otherwise only be curtailed or cancelled in exceptional circumstances.

The Trust Education Centre at the Royal Berkshire Hospital has a library with a good selection of books and journals. There is a clinical skills lab and active simulation suite. The University has additional facilities including access to further journals.

Research

The departments have an excellent record of published clinical research and audit and the appointee will be encouraged to conduct and supervise research and audit projects. Departmental trust funds are available to support such projects. There are very active in recruitment to ongoing medical trials and research approved within the Trust R&D Board.

Cover

The appointee will prospectively share internal cover with the other consultant colleagues' annual, study and professional leave. He or she will be responsible (with the other consultants) for ensuring that is adequate consultant and junior doctor cover for the clinic and ward duties during periods of annual and study leave.

Accountability

The post holder will be accountable to both Clinical Director for the Emergency Care Directorate (for Acute General Medicine) and Clinical Director for Integrated Medicine (for Specialty work).

Section 4: Person Specification

Criteria	Essential (E) Desirable (D)		Assessment Method			
	E	D	A	I	S	R
Education and Qualifications						
Full registration with the GMC/eligible for registration within 6 months of CCT in Rheumatology and General Medicine or successful completion of CESR at interview date	✓		✓			
Membership of the Royal College of Physicians of the United Kingdom or equivalent	✓		✓			
Specialty Exit Examination (SCE) in Rheumatology		✓				
Higher degree e.g. PhD/ MD submitted/awarded		✓	✓			
Clinical Experience, Knowledge & Skills						
Fully trained in Rheumatology and General Medicine	✓		✓	✓	✓	✓
Previous responsibility for clinical governance and GMC Good Medical Practice	✓		✓	✓	✓	✓
All aspects of general Rheumatology and patient care	✓		✓	✓	✓	✓
Audit Management & IT						
Ability to work within clinical governance guidelines	✓		✓	✓		✓
Undertake audits and present data as required	✓		✓	✓		✓
Good IT skills, use of patient and hospital database	✓		✓	✓		✓
Evidence of clinical leadership role demonstrating accountability for quality of care, financial controls and efficient management of workforce		✓	✓	✓		✓
Research, Teaching Skill & Experience						
Track record of publications in peer reviewed journals	✓		✓	✓		✓
Evidence or providing good teaching and supervision to trainees	✓		✓	✓		✓
Educational qualification		✓	✓	✓		✓
Patient Experience						
Contributes to improving patients experience	✓		✓	✓		✓
See patients as individuals and involve them in decisions about their care	✓		✓	✓		✓
Ability to work in partnership to deliver a patient centred service	✓		✓	✓		✓
Demonstrate an understanding and willingness to embrace user involvement	✓		✓	✓		✓
Personal Qualities						
Able to abide by the Trust CARE Values; Compassionate, Aspirational, Respectful and Excellence	✓		✓	✓	✓	✓
Ability to communicate with clarity and intelligence in both written and spoken English	✓			✓		✓
Willingness to take responsibility, and exert appropriate authority	✓			✓		✓
Excellent interpersonal skills	✓			✓		✓
Work collaboratively with multi-disciplinary team, understanding each others unique role	✓			✓		✓

Assessment Criteria Key: A= Application, I= Interview, S= Simulation, R= References

Section 5: Job Plan Information

This is a full time post with a minimum of 10 PAs. A final job plan will be agreed upon appointment, ensuring both individual and Trust / departmental objectives align. Job planning commences annually with the Clinical Lead and Directorate Manager, in September, to compliment the departmental business planning process and concludes in December, following sign-off by the CMO.

The balance between Direct Clinical Care and Supporting Professional Activities will be agreed with the post holder in the final job plan. The SPA allocation is 1.5 for personal CME, audit and revalidation requirements including departmental meetings. Additional Pas (APAs) may be allocated for specific agreed objectives for the trust subject to the agreement of the Clinical Director.

Proposed Job Plan

Day	Time	Location	Work	Categorisation	PAs
Monday	AM	RBH	Rheumatology Clinic or Ward Round	DCC	0.75
	Midday		Rheumatology MDT meeting	SPA	0.25
	PM	RBH	Rheumatology Clinic	DCC	1.0
Tuesday	AM	WBCH	Rheumatology Clinic	DCC	1.0
	Midday		Ward Teaching	DCC	0.25
	PM		Clinical Administration	DCC	0.75
Wednesday	AM		Ward Round and admin	DCC	0.75
	Midday		CPD/CME	SPA	0.25
	PM	RBH	Rheumatology Clinic	DCC	1.0
Thursday	AM		CPD/ES/CS duties/ Regional Meeting/ Mandatory Training	SPA	0.75
	Midday		Grand Round	SPA	0.25
	PM	RBH	Rheumatology Injection and Flare Clinic	DCC	1.0
Friday	AM	RBH	Ward Round and admin	DCC	0.75
	Midday				
	PM		Admin	DCC	0.45

Direct Clinical Care (DCC)	7.7
On-call (optional)	0.8
Supporting Professional Activities (SPA)	1.5
Other Activities (ANR / ED)	0
Total weekly programmed activities	**10.0**

There is an option to provide on-call cover for General Medicine Service as Physician of the Day on a 1 in 14 rota. On-call is Category A (Immediate recall) with 3% on-call intensity supplement.

The weekday POD shift runs from 15:00 until 22:00 and then on call overnight from home. There is on-site support for the acute medical take from Acute Physicians, Intensive Care Physicians, Radiologist, Cardiologists and Stroke Physicians. There is an agreed referral and access system to other specialties in the hospital. Tertiary care is also provided from Oxford and London for Neurosurgery and Cardiac Surgery.

Section 6: Term & Conditions of Employment

The main terms and conditions of employment will be the Terms and Conditions for Consultants (England) 2003, as amended from time to time.

The trust is committed to the ongoing training and development of its medical workforce. New consultants are offered a structured two year programme of induction and leadership development and all newly appointed consultants are offered a choice of mentors, available to meet on a regular basis.

National Terms & Conditions of Employment

https://www.nhsemployers.org/sites/default/files/2022-03/Terms-and-Conditions-consultants-Mar-2022-v12.pdf

The Appointee

The appointee will have an overriding duty of care to patients and is expected to comply fully with best practice standards. The appointee will be expected to adhere to local policies and procedures and to take note of the standing orders and financial instructions of the Trust. In particular, where the consultant manages employees of the Trust, they will be expected to observe and apply the Medical Workforce policies and procedures of the Trust.

Equality & Diversity Opportunities

As an inclusive employer we work hard to ensure our entire staff community feels valued, engaged and appreciated. We understand and recognise the crucial value of diversity in our

workforce and to be an organisation that represents the diversity of the communities we serve. Equality, Diversity and Inclusion are embedded into our way of life – our strategies, policies and our expected Behaviours Framework which clearly set out the standards we expect in terms of everyone's responsibility in an inclusive culture here at the Trust.

Colleagues at the Royal Berkshire NHS Foundation Trust are amongst the most engaged of any NHS Acute Trust in England and over recent years we have made huge strides forward in further developing career progression and opportunity across our workforce. In addition to a range of corporate priorities and actions, we have a range of forums and networks to connect our staff and drive forward an even better experience at work – these include BME Networks; LGBT+ forums a Staff Disability Network and a Staff Carers Network.

Continuing Professional Development

The appointee is required to participate in personal appraisal and revalidation programme annually. There is a revalidation officer to provide administrative support and advice for medical staff maintaining their credentials for revalidation. The medical workforce is actively encouraged to take part in a CPD programme and can allocate up to 1.5 Pas to SPA activities into their job plan.

Clinical Governance

The post-holder will comply with the Trust's clinical governance requirements and participate in related initiatives where appropriate. This will include participating in clinical audit and review of outcomes, working towards achievement of national and local performance management targets, complying with risk management policies, and participating in the consultant appraisal process.

The post-holder will also be responsible for maintaining satisfactory patient notes as required within GMC Good Medical Practice (GMP) and, when relevant, for entering data onto a computer database in accordance with the rules and regulations of the General Data Protection Regulation (GDPR).

GMC's Good Medical Practice Standards

Good medical practice describes what it means to be a good doctor. It says that as a good doctor you will:

- make the care of your patient your first concern
- be competent and keep your professional knowledge and skills up to date

- take prompt action if you think patient safety is being compromised
- establish and maintain good partnerships with your patients and colleagues
- maintain trust in you and the profession by being open, honest and acting with integrity.

This guidance is split into four sections which describe the professional values and behaviours we expect from any doctor registered with us. We expect you to use your professional judgement and expertise to apply the principles in this guidance to the various situations you face.

This guidance came into effect 22 April 2013. It was updated on 29 April 2014 to include paragraph 14.1 on doctors' knowledge of the English language.

For more information please visit:

https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice

Conflict of Interest

All applicants to any post within the Trust are required to declare any involvement directly with any firm, company or organisation, which has a contract with the Trust. Failure to do so may result in an application being rejected or, if discovered (after appointment) that such information has been withheld, this may lead to dismissal.

Health and Safety Responsibilities

The Trust has designated the prevention and control of Health & Safety as a core component in the organisation's clinical governance, managing risk and patient safety programmes. In consequence, all employees are expected to:

1. Provide leadership on Health & Safety risk issues across the organisation
2. Be aware of and follow all Trust Health & Safety guidelines and procedures relevant to their work
3. Participate in mandatory training updates
4. Challenge colleagues who are not complying with Trust Health & Safety procedures and report to line manager

Infection Control Responsibilities

The Trust has designated the prevention and control of infection and the full implementation of the Health Act (2006) as a core component in the organisation's clinical governance,

managing risk and patient safety programmes. In consequence, all employees are expected to:

1. Provide clinical leadership which instils a culture of zero tolerance on HCAI (healthcare associated infection) across the organisation
2. Following consistently high standards of infection control practice, especially with reference to hand decontamination, adherence to dress/uniform code and for clinical staff, aseptic technique
3. Being aware of and follow all Trust infection control guidelines and procedures relevant to their work
4. Participate in annual mandatory training updates
5. Challenge colleagues who are not complying with Trust Infection Control guides and procedures and report to line manager
6. Review compliance with national policy to ensure high reliability in reducing HCAI's and ensure results are used to inform action e.g. audit of antibiotic use to amend prescribing practice

Safeguarding Children and Adults

The RBFT takes the issues of Safeguarding Children and Adults very seriously. All employees have a responsibility to support the Trust in its duties by:

1. Attending mandatory training on Safeguarding Children and Adults
2. Being familiar with the individual and Trust requirements under relevant legislation
3. Adhering to all relevant national and local policies, procedures, practice guidelines and professional codes
4. Reporting any concerns to the appropriate manager or authority.

Private Practice

All consultants should adhere to the Department of Health Code of Conduct for Private Practice which outlines the basis for the relationship between NHS and Private Practice activity. A declaration of all internal and external private practice should be disclosed as part of the annual job plan review and failure to do so may be in breach of the Fraud Act 2006.

Relocation Expenses

Financial assistance may be given to newly appointed to support costs incurred during their relocation, providing (generally) this is their first appointment in the NHS .The relocation must also comply with the Trusts requirements concerning the place of residence.

Residential Criteria

A consultant is required to reside within 30 minutes or 10 miles by road from their principal place of work unless agreed otherwise with the CMO.

Salary

The current salary applicable to the post is as per national pay scales.

Pre-Employment Health Assessments

The successful candidate will be required to complete a health questionnaire. This will be treated in the strictest confidence and will not be seen by other employees of the Trust expect for those in Occupational Health or with prior agreement from yourself.

Interview Expenses

Consultant candidates who have been summoned by a prospective employing organisation to appear before a selection board or invited to attend in relation to their application shall be entitled to appropriate expenses in the below situations:

- reimbursement of eligible expenses shall be paid as per the Consultant 2003 terms and conditions
- a candidate should not be reimbursed for more than 3 attendances once shortlisted to interview and a consultant that visits but does not apply should not be entitled to reimbursement on more than 2 occasions
- reimbursement will not be paid to a consultant who is offered but does not take up the post

All expenses are paid as per the Consultant 2003 terms and conditions of service.

Study Leave

Study leave will be obtainable within the limit confirmed in the Terms and Conditions of Service of Hospital Medical and Dental Staff (England & Wales) as amended subject to the Regional Postgraduate Medical Education Policy.

Disclosure & Barring Check

This post is subject to the Rehabilitation of Offenders Act (Exceptions Order) 1975 and as such it will be necessary to submit a disclosure to be made to the Disclosure & Barring Service to check for any previous criminal convictions.