



**Incorporating
Central Middlesex Hospital
Ealing Hospital
Northwick Park Hospital
St. Mark's Hospital**

DIVISION OF INTEGRATED MEDICINE

JOB DESCRIPTION

CONSULTANT

In Medicine for Older People (DMOP)

and

Stroke Medicine



Contract:	Permanent
Hours:	Full Time
Rota:	1:13 (weekends) (GIM) 1:7 (weekends) STROKE
Intensity category:	Category B GIM Category A Stroke
On-call Availability supplement:	3% GIM 5% Stroke
Responsible to:	Divisional Clinical Director, Integrated Medicine
Reporting to:	Clinical Director, Department of Elderly Care & Stroke Medicine
Principal Location:	Northwick Park Hospital
Tenure:	Substantive

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1. INTRODUCTION

THE TRUST

London North West University Healthcare NHS Trust

London North West University Healthcare NHS Trust is one of the largest integrated care Trusts in the country bringing together hospital across the boroughs of Brent, Harrow and Ealing. Our 9,000 staff, including 1,300 doctors and 4,000 nurses and serves a diverse population of approximately 850,000. The Trust was established in October 2014 following the merger of The North West London Hospitals NHS Trust and Ealing Hospital NHS Trust and has an annual budget of over £640 million.

This is a pivotal time for the Trust as we pursue a transformational programme of activity to improve the way healthcare is delivered across the acute settings in North West London. To evolve as an organisation, we must create an identity and culture that will support the ambitions we have for our services 'to provide excellent clinical care in the right setting by being compassionate, responsive and innovative.'

During this exciting period of opportunity and change, we have a clear plan to address our challenges and with the commitment of our teams we are making significant progress.

We continue to lead the way in a number of clinical services. Examples of excellence can be seen in our stroke service which is rated one of the best in the country and at St. Mark's Hospital, an internationally renowned specialist centre for colorectal diseases. We are also a leading provider in undergraduate and postgraduate medical training and education.

Key locations

Our hospital services are provided across four acute sites. These are **St Marks' Hospital; Northwick Park Hospital, Central Middlesex Hospital** and **Ealing Hospital**.

Northwick Park Hospital was officially opened by Queen Elizabeth II in 1970. It is home to the hyper-acute stroke unit, one of only eight such units in London. In December 2014, Northwick Park Hospital's £21m state-of-the art A&E department opened its doors and in January 2016 the new Acute Medical Unit opened providing



a total of 63 new beds across Crick, Darwin and Elgar wards. Medical research, both pre-clinical and clinical, has been a key feature of the hospital site since opening, and in 1994 the Northwick Park Institute for Medical Research (NPIMR) was formed. By maintaining top-rate research facilities and providing excellence in surgical training, NPIMR ensures the highest standard of science for translation into clinical care.

Northwick Park Hospital also retains complementary and enhanced research activity in several regional specialist units such as the Kennedy-Galton Centre (Clinical Genetics), the Lister Unit (Infectious Diseases) and a Regional Hyper Rehabilitation Unit.

St Mark's Hospital was founded in 1835 and has developed an international reputation as a specialist postgraduate teaching hospital for patients with intestinal and colorectal disorders. St Mark's is developing a closer academic relationship with Imperial College, in line with the Trust's academic strategy. The hospital moved from the City Road in central London in 1995 to become an integral part of the Northwick Park site.

Central Middlesex Hospital

Central Middlesex Hospital in Park Royal opened in 2006 and is the main provider of health services for the residents of Brent. The hospital provides specialist services in a modern environment for illnesses common in the local community, including asthma, diabetes and sickle cell. Brent has one of the highest populations of patients with sickle cell disease in the country. The Brent Sickle Cell and Thalassaemia Centre is based at the hospital to provide specialist care for patients with the condition.

Ealing Hospital

Officially opened in 1979 Ealing Hospital is a busy district general hospital providing a range of clinical services including A&E, 24/7 urgent care centre, ENT and cardiology. The hospital predominantly provides secondary care to its local community across Greenford, Hanwell, Northolt, Southall and West Ealing.



Organisational Values

All staff employed by the Trust are expected to embody our 'HEART' values throughout their employment. The values describe how we interact with each other and our patients and underpin everything we do and say to achieve our vision:

Honesty - open and honest in everything we do

Equality – we value all people equally and treat them fairly whilst recognising their individuality

Accountability – we will provide excellent care and ensure the safety and wellbeing of all patients

Respect – we treat everybody the way we would like to be treated

Teamwork – we work together to make improvements, delivering consistent, high quality, safe care.

1. TRUST MANAGEMENT

The Trust Board

Executive Directors

Pippa Nightingale
James Walters
Lisa Knight
Dr Jon Baker
Simon Crawford
Tracey Connage
Jonathan Reid
David Searle

Chief Executive Officer
Chief Operating Officer
Chief Nurse
Chief Medical Officer
Deputy Chief Executive & Director of Strategy
Chief People Officer
Chief Financial Officer
Director of Corporate Affairs

Non-Executive Directors

Matthew Swindells
Janet Rubin
David Moss
Dr Vineta Bhalla
Professor Desmond Johnston
Ajay Mehta
Sim Scavazza
Simon Morris
Bob Alexander
Dr Syed Mohinuddin
Huda Asad

Chair in Common
Vice Chair/ Non-Executive Director
Non-Executive Director
Non-Executive Director
Non-Executive Director
Non-Executive Director
Non-Executive Director
Non-Executive Director
Non-Executive Director
Non-Executive Director
Associate Non-Executive Director

Divisional Medical Directors

Dr Miriam Harris
Dr Henry Penn
Dr Lauren Fraser
Dr Matthew Bartlett
Dr Scott Rice
Dr Nitu Sengupta

Prof Omar Faiz and Miss Carolynne
Vaizey

Ealing Site
Integrated Medicine
Emergency & Ambulatory Care
Surgery
Integrated Clinical Services
Division of Women's and Children's
Services
St Marks

2. TRAINING AND EDUCATION

Training and education at Northwick Park Hospital and Central Middlesex Hospital

The Trust houses a large Postgraduate Education Department with offices on all three sites and has Deanery-funded Postgraduate Educational Fellows. The Department oversees the training of approximately 514 doctors in postgraduate training and 200 educational and clinical supervisors. Pre-registration nurse training is provided by the Trust in conjunction with University of West London. 100 students benefit from the wide range of clinical experience which is available; both for qualification and registration.

The Trust has established an extensive programme of post registration speciality based nurse training to enhance patient care and service delivery.

The main facilities available for running courses within the campus are based in the Medical Education Centre which is situated immediately above the John Squire Medical Library. The John Squire Medical Library is the North West reference library for the National Library Association, The Medical Education Centre houses the Postgraduate Education Office, 6 seminar rooms, and the Himsworth Hall which can be used when registrants total 100-300. In addition The Jonathan Levi Lecture Theatre is situated at the centre of the hospital. This lecture theatre is used for the weekly hospital Grand Rounds and can accommodate approximately 100 attendees.

Training and education at Ealing Hospital

Ealing Hospital has close academic and service links with Imperial College Healthcare NHS Trust. These include Specialist Registrar rotations in medicine and surgery, which are co-ordinated through the London Deanery. Many consultants have joint appointments or academic sessions at Imperial.

Ealing Hospital is an Associated University Hospital of the University of London and has students from Imperial College School of Medicine on attachments in medicine, surgery, gynaecology, anaesthetics, A&E and other departments. The value of medical training is well recognised and consultants devote appreciable time and effort to teaching junior staff and medical students.

There is an active Postgraduate Education department with many weekly meetings in the various specialties and a general weekly lunchtime Grand Round for medical staff from all departments. The postgraduate centre has undergone extensive improvements in recent years with a large lecture theatre, several seminar rooms and a well-equipped library and literature search facility. The postgraduate library is a multi-disciplinary facility providing state of the art information access on all medical issues, computer facilities with Internet access, and a clinical video library. Ealing Hospital also takes postgraduate students from the University of Buckingham and has several academic appointments at Professorial level in Medicine.

Revalidation and Continuing Professional Development

All consultants employed by the Trust are expected to demonstrate a commitment to revalidation. This is supported by the trust. Annual appraisal takes place with the aid of a computerised appraisal form, which consultants can update throughout the year. Continued professional development is encouraged and consultants can apply to the study budget for help with costs associated with education and development.

3. RESEARCH AND DEVELOPMENT

The creation of the new Trust has enhanced our R&D programme which is resulting in improvements in patient care. In 2015/16 over 70 consultants were active in research projects. The Trust acts as host to the London (North West) CLRN as part of its research “HUB”, sustaining research on a local and national basis. The Trust has an extensive research portfolio which is assessed against national guidelines: <http://www.guardian.co.uk/healthcare-network-nihr-clinical-research-zone/trust-research-activity-league-tables> making it a top performer in North West London.

The R&D Department is extremely active working at a local and national level supporting clinical research through extensive collaborations. The experienced team works on a wide range of studies including Cancer, Cardiology, Dementia, Gastroenterology, Infectious Disease, Medicines for Children, Rheumatology and Stroke. There are also strong links with the Pharmacy Department where we are a leader on pharmacy research training. The Trust plays great emphasis on supporting research, especially where it can demonstrate an impact on patient care. To support research we also have an agreement with Imperial Innovations Ltd. who are on-site to help promote and grow new ideas through developing intellectual property.



The Trust also hosts the NPIMR, and have an independent unit of Parexel on site who are a major Clinical Research Organisation who carry out Phase I studies and attend joint meetings to promote clinical research.

The R&D Department is also in the process of expanding its clinical research facilities to take on more clinical trials and extend our links with industry - thus making the Trust a vibrant place to undertake clinical research.

4. HEALTH CARE FACILITIES

Northwick Park Hospital

- There are 529 acute beds on the Northwick Park site.
- It is one of only eight hospitals in the capital to provide a 'hyper-acute' stroke unit offering faster treatment to patients who suffer a stroke, including 'clot-busting' drugs 24/7 and the stroke unit is rated as being one of the best in the country
- The hospital offers a full range of acute general hospital specialities including departments of thoracic medicine, cardiology, rheumatology, dermatology, diabetology, endocrinology and gastroenterology. Surgical specialities include general surgery, urology, vascular surgery, minimally invasive therapy, trauma and orthopaedics. Children's Services cover a wide field including acute general paediatrics, a neonatal intensive care unit, community child health and child psychiatry. St Mark's Hospital provides a comprehensive intestinal and coloproctology service. The Maxillo facial department provides care for the majority of North West London, Watford and parts of Buckinghamshire and Berkshire.
- It has a £2.6m newly refurbished radiology department which is home to some of the most high-tech imaging equipment available.
- Clinical facilities include the Regional Hyper Rehabilitation Unit, clinical genetics at the Kennedy-Galton Centre and a major Infectious Diseases Unit. Specialist units on the site include ENT and the British Olympic Medical Centre. Moorfields Eye Hospital and Imperial Health respectively provide Ophthalmic and renal dialysis services.
- The modern A&E department is one of the busiest units in London sees around 120,000 patients each year. Harrow CCG manage urgent care centre on the site.

The hospital is also home to TRUSTPLUS the dedicated private patient unit for St Mark's, Northwick Park and Central Middlesex Hospitals



Central Middlesex Hospital

The hospital provides outreach services in physiotherapy, ophthalmology, urology, general surgery and gynaecology to a large number of GP practices. These services provide local access for patients who may have difficulties attending outpatient appointments at CMH, and ensures a speedy and efficient service for patients and GPs. A full range of outpatient clinics is also provided at the hospital.

Central Middlesex Hospital has particular experience in the care of patients with conditions aggravated by deprivation, specifically TB, diabetes and coronary heart disease and is a leader in the research and treatment of Sickle Cell disease.

The hospital provides 159 beds, three theatres, and seven main specialist teams and combines the following:

- A Major Assessment Unit
- A Major Elective Surgery Service including ring-fenced theatres and beds
- Inpatient and Intermediate Care Services
- An Expert Consulting Centre providing specialist assessment and advice for outpatients and acting as local bases for specialist teams

Ealing Hospital

Ealing Hospital is a busy district general hospital providing acute services for patients in the west London area. The hospital provides a range of medical, surgical, maternity and child health services. It also provides 24/7 A&E and urgent care services.

The hospital provides

- We have 275 beds,
- The A&E department treats around 100,000 patients a year.
- We treat an ethnically diverse population. Over 40% of patients are from minority ethnic groups.
- An innovative haematology day unit, providing care in a home-like environment
- General surgery – specialist in upper vascular, GI, colorectal and breast surgery
- One of the largest HIV/AIDS units in London
- A genito urinary medicine (GUM) clinic
- Hammersmith Hospitals Trust satellite renal dialysis unit
- Cardiac Catheterisation Laboratory
- MRI – Magnetic Resonance Imaging

Full details regarding the locations of different London North West University Healthcare NHS Trust sites can be found on the Trust's website www.lnwh.nhs.uk

6. THE APPLICATION PROCESS

Applicants are advised that they **must fully complete** the application form.

Applicants may wish to cut and paste elements of the C.V into the application form. Alternatively, applicants may prefer to submit their C.V **in addition** to a fully completed application form.

N.B. 1) Application forms that are not fully completed and/or state “see C.V” will not be accepted or considered.

N.B. 2) Applicants are advised to consider the person specification and submit in their additional information, evidence which demonstrates how they meet the listed requirements. The shortlisting process will be based on the evidence provided.

7. THE DEPARTMENTS

The post holder will hold a joint rotating six month post in the Department of Medicine for Older People and Stroke Medicine at London North West based at Northwick Park Hospital.

Our collective goal is to provide excellent care for our frail older patients and stroke patients to hospital and back home. We aim to treat acute illness appropriately, to enhance quality of life, to reduce disability, recognise when life is nearing its end, and to provide individualised person-centred care in the right setting at the right time.

Department of Medicine for Older People (DMOP)

The Care of the Elderly Department currently manage around 200 beds across NPH and Ealing with a team of junior doctors, dedicated therapists and nurses. The department is developing acute frailty services across both acute sites (NPH and Ealing) which include a front door ED service including SDEC and OPRAC at NPH and an OPSSU at Ealing. We have admission avoidance services: STARRs and Harrow rapid response (run by CLCH), a well-established orthogeriatric service and a developing surgical liaison service. The department has a friendly and informal atmosphere where the junior doctors feel well supported and achieve their educational targets. We aspire to high standards of medical and nursing care, and routinely assess aspects of this with regular clinical governance activities and

meetings including monthly mortality reviews, to which the new appointee will be expected to contribute regularly. Mentoring will be arranged for all new consultants.

Consultant Geriatricians at Northwick Park Hospital

<u>Name</u>	<u>Specialist Interests</u>
Dr Sai Duraisingham	Clinical Lead, surgical liaison
Dr Lai Ping Thum	Frailty, Oncogeriatrics
Dr Sushen Bhattacharya	Orthogeriatrics
Dr Mahua Chatterjee	Surgical liaison/education
Dr Maria Vilasuso	Specialty training lead
Dr Daniel McCrea	Education, surgical liaison
Dr Eddy Chua	General geriatrics
Dr Younatan Beitverda	Falls, Community
Dr Irwin Cardoso	Stroke Medicine
Dr Nisha Jethwa	Cardiology liaison, Falls
Dr Sabiha Ali	Frailty
Dr Ekta Patel	Surgical liaison

Junior Doctors

The DMOP department has 5 SPR's, 3 IMT3's 4 GPVTS, 12 SHO's, 7 FY2's and 9 FY1's. The post holder will have a fair share of the junior doctors on the Unit. Allowing for holiday and nights this usually works out as 1-2 juniors per consultant team. S/he will be expected to play a part in supervision and training.

Frailty Team

The department has recently established a frailty team led by band 8A frailty practitioners.

The Stroke Unit

In 2009, Northwick Park was commissioned to provide comprehensive stroke services by Healthcare for London. This takes the form of a Hyper Acute Stroke Unit (HASU), Stroke Unit (ASU), TIA and Early Supported Discharge service.

- The HASU (16 beds) receives and assesses all strokes arriving at the hospital whether by ambulance or not. This service runs 24/7 and is contracted never to close. It operates according to a set of pan-London policies and standards that must be maintained at all times. Suspected strokes are initially assessed in A&E by a band 6 stroke nurse in conjunction with one of the Unit's junior doctors. Thrombolysis is delivered 24/7 on the decision of the consultant on call. The stroke physicians are supported on the rota by some A&E consultants. All admissions have consultant review within 24 hours. Practice

is audited continuously using Sentinel Stroke National Audit Programme (SSNAP). Patients are repatriated to their local stroke unit according to the pan-London protocol and those allocated to Northwick Park remain on the Unit. Patients may also be repatriated to our Stroke Unit from elsewhere. This allocation is by postcode and not discretionary.

- Suitable thrombectomy patients are transferred to Charing Cross Hospital, our local interventional neuroradiology provider. We engage with them with monthly mortality and morbidity meetings as well as quarterly regional meetings
- The Stroke Unit provides comprehensive rehabilitation by a MDT until the patient is ready to leave hospital. The team operates according to best practice as set out in the RCP stroke guidelines. Our particular strengths are the first class SLT team who operate to cutting-edge practice in assessment and treatment. Our psychology service is comprehensive to inpatients.
- Ensuring that all patients have the opportunity to participate in research is a Unit priority. We recruit to trials covering every stage of stroke from hyperacute to rehabilitation.
- Since opening, Northwick Park has excelled. We were awarded the BMJ Clinical Leadership Team of the Year 2013 and the Research Team of the Year 2012. London Ambulance have documented that we declared 'no beds' least often of any London unit. Our thrombolysis door-to-needle time has been one of the fastest in the UK for over 10 years, our thrombolysis rate is around 15% and our length of stay is one of the shortest in the UK. We have been visited by numerous teams from the UK and abroad to learn from our success. We were the first Unit in England to be awarded 'AA' on our SSNAP performance and have maintained that rating ever since. We see approximately 1300 stroke admissions and 1300 TIA per annum.
- The Unit has tight audit procedures with significant resources committed to this activity. As well as ensuring full compliance with SSNAP, we have mandatory monthly meetings to review thrombolysis performance, mortality & morbidity and readmissions.
- The acute stroke team offers Early Supported Discharge to Brent patients and there is also an ESD service covering Barnet and Hillingdon.
- We have AHPs working weekends and Bank Holidays helping to provide a seven day service.
- There is a weekly radiology MDT with neuroradiologists, neurologists, a neurosurgeon and neuro-oncologist from Charing Cross all present.

- There are excellent relationships with vascular surgery. Endarterectomies are done at Northwick Park and there is also expertise in carotid stenting.

Consultant Stroke Physicians at Northwick Park Hospital

Name	Specialist Interests
Dr Raj Bathula	Stroke Lead/ Education
Dr David Cohen	Research lead
Dr Joe Devine	Mortality Lead / Education
Dr Mudhar Abdul-Saheb	Appraisal Lead
Dr Aravinth Sivagnanaratnam	Education / Education
Dr Nick Winterkorn	Audit Lead/ Education

Junior Medical Support

The Stroke Unit has 13 junior doctors with 9 trust registrars, two SHOs on rotation and 2 FY1s. The post holder will have a fair share of the junior doctors on the Unit. Allowing for holiday and nights this usually works out as 1-2 juniors per consultant team. S/he will be expected to play a part in supervision and training.

8. DUTIES OF THE POST

The appointee will be responsible to the Divisional Director of Medicine for London North West University Healthcare NHS Trust. The 10-PA job is divided into 7.5 PA of direct clinical care (DCC) and 2.5 PA of supporting professional activities (SPA).

These are fixed commitments in accordance with HC90 (16). As the post holder develops their consultant role, there will be an expectation that different aspects of supporting professional activity may demand a greater proportion of the working job plan be dedicated to this. This issue will be addressed through regular appraisal and job planning.

6 Months in Geriatric Medicine

The post holder will be responsible for 1/3 of an elderly care ward working with 2 other consultant colleagues to provide internal cover for 34 inpatients. The post holder will have one outpatient clinic per fortnight and do 1 alternate afternoon a week covering the acute frailty service (working with a team of nurses and therapists in ED and SDEC to provide early focused CGA and multidisciplinary discharge planning).

There is an expectation that the post holder will participate in general medical on-call rota 1:13 Friday-Sunday (for which 1 PA is allocated). Weekends are 8-5 or 9-9 shifts post-taking new patients or doing ward rounds on the AMU wards.

Regular involvement in clinical governance (3 monthly meeting), morbidity & mortality reviews, service development activity, audit and teaching will be expected. The appointee will provide clinical supervision to junior doctors rotating to the department and will be the educational supervisor for up to 3 trainees. There is an active educational programme with a weekly departmental meeting, to which the post holder is expected to attend and contribute.

DRAFT JOB PLAN FOR FULL-TIME POST (10PA) GERIATRIC MEDICINE		
	MORNING	AFTERNOON
MONDAY	9am-12pm Ward round inpatients 0.75 DCC 0.25 SPA	1 GIM PA
TUESDAY	9am-10am Ward round new inpatients 0.25 DCC 10am-1pm alt week OPRAC/subspecialty liaison 0.75 DCC	1pm-5pm Acute Frailty (alternate weeks) OR sub-specialty liaison 1 DCC
WEDNESDAY	9am-12pm Ward round inpatients 0.75 DCC Relative meetings 0.25 DCC	1-2pm Departmental meeting 2-5pm CPD 1 SPA
THURSDAY	9am-10am Ward round new inpatients 0.25 DCC Ward referrals 0.25 DCC Clinical admin 0.5 DCC	1-2pm Grand round Audit and clinical governance Consultants Meeting (monthly) 1 SPA
FRIDAY	9am-12pm Ward round inpatients 0.75 DCC 0.25 SPA	1pm-3pm Sub-specialty liaison 0.5 DCC 3pm-5pm Relative meetings/weekend handover 0.5 DCC

This is a provisional job plan and will be mutually agreed with the Clinical lead

Internal cover is included – 3 consultants share one ward (34 beds) and cover leave.
GIM on-call – 1:13 rota = 1 DCC. 4 weekends per year, Friday- Sunday 2 long days
and 1 short day for 2 weekends and 1 long day, 2 short days for 2 weekends.



Covering post-take ward rounds (15-30 patients), ward rounds on AMU and troubleshooting on medical wards.

OPRAC/Outpatient clinics – approx. 3 new patients and 2 follow ups per clinic
Consideration of time off in lieu will be negotiated for weekend working or additional duties.

On occasion and as patterns of service provision evolve and change, further rescheduling of clinical sessions may take place following negotiation between post holder and Clinical Lead.

6 months in Stroke Medicine

- To provide in-patient and out-patient care for patients referred with suspected stroke or TIA
- To contribute to the provision of a 24 hour acute stroke specialist service delivering thrombolysis and other specialist treatments. Currently this involves being on call from home with CTs available by telemedicine and occasional out of hours visits to the hospital, including the thrombolysis rota.
- To contribute a full share to the consultant ward rounds every weekend day and public holiday. This currently works out as 1:7 weekends.
- To work with the rest of the clinical and managerial team to support and deliver quality improvements on the Stroke Unit and in the community.
- To provide clinical input into the early supported discharge service, specialist stroke community initiatives and stroke follow up.
- To take an active part in undergraduate and postgraduate teaching and training
- To participate in clinical and other service activities such as medical and service audit with the object of ensuring a high standard of patient care
- To contribute to the management of the clinical service and service development
- To contribute to the development of clinical quality and effectiveness in other clinical areas where these overlap with developments in stroke
- To advance the Unit's research programme

The job will include liaising with and teaching nursing staff, health care assistants, therapists and other members of the multidisciplinary team. It will also include teaching medical students rotating through the ward, and teaching and appraising all the Unit's junior doctors. The applicant will be expected to maintain and enhance the Unit's reputation for excellence at every level.

We are seeking to appoint a clinician who has completed training in Stroke Medicine or is already holding a substantive consultant post. Our main criterion is that they should be able to deliver first class clinical care. For this post, we would be happy with a geriatrician who is prepared to contribute to the whole stroke pathway.

The present stroke physicians also take continuing responsibility for all patients admitted to the stroke unit including stroke mimics and general medical patients who fill beds not needed for stroke at times of high demand.

The weekly departmental job plan below takes into consideration all the activities of the Unit. The clinical workload and on-call for all consultants will be the same. Consultants have different roles in non-clinical activities depending on their interests and thus the final job plans and the makeup of SPAs are not identical. All clinics are booked so as to incorporate time for clinic / admin support and are allocated 1 DCC.

The job is subject to an on call supplement, this will be 1 in 7 with high intensity.

When on call for HASU, it is expected that the appointee will be present from 0900 till 1700 and then available for immediate recall for the rest of the 24 hours. It is actually extremely rare for consultants to have to come in but they can expect 6-8 phone calls over night. CT images are automatically anonymised and sent to consultants smart phones so can be viewed remotely. Each weekend on duty involves a post-take ward round both days and assessing any high risk TIAs. Compensation for this is currently taken as time off in lieu.

The job plan will be negotiated between the consultant and his/her clinical director at least annually. The initial job plan for this post is planned to be:

	Description of work	Number of programmed activities
DCC	Inpatient work	5
Direct Clinical Care	Outpatients	2
	Multi-disciplinary meetings about direct patient care	0.5
SPA	Research, audit, mortality,	1
Supporting professional activities	Educational supervision	0.5
	CPD/ appraisal	1
Total		10

DRAFT JOB PLAN FOR FULL-TIME POST (10PA) STROKE MEDICINE		
	Morning	Afternoon
Monday	9am-1pm Ward round (HASU/ASU) 1 DCC	1pm-3pm Neuro XRM/relatives catch up 0.5 DCC 3pm-5pm GIM 0.5 DCC
Tuesday	9am-1pm TIA clinic 1 DCC	1pm-5pm CPD/appraisal 1 SPA
Wednesday	9am-1pm Ward round/ MDM 1 DCC	1pm-5pm Intra take ward round 1 DCC
Thursday	9am-1pm Post take ward round 1 DCC	1pm-5pm Educational supervision/ mortality work/audit 1 SPA 1-5
Friday	9am-1pm Stroke clinic 1 DCC	1pm-3pm Monthly meetings/service development 0.5 SPA 3pm-5pm PM ward round 0.5 DCC

IMPORTANT NOTES

It is intended that to support the activity of a Major Acute Trust, departmental activity is moving towards 24/7 working. Extended days and weekend working will underpin this and will be explored as part of the annual job planning process. This will provide opportunities for more flexible job plans which may include options for using annualised job planning and teleradiology to provide more flexibility than in conventional 10 sessions 5 day week job plans.

Teaching and management duties are performed alongside clinical lists, and protected time (where necessary) for these particular responsibilities will be agreed with the Clinical Director. Access to alternative sessions can be arranged after discussion with the Clinical Director.



The Department will adopt a very flexible approach to the particular aspirations of a suitable candidate.

A regular fixed session of Clinical Governance is organised for the whole department on all three sites and this takes the place of other clinical duties within the outline weekly job plan.

Direct Clinical Care and Supporting Activity PAs

It is expected that at least 7.5 PAs will be devoted to direct care. If the supporting PA sessions are not identifiable as being occupied with such work, then where possible they will be allocated to clinical duties, e.g. reporting and work within the department. All direct care PAs must be performed on site.

Supporting Activity PAs should include management, clinical audit, CPD activity, research, and teaching.

The exact allocation of these will be determined by review with the Clinical Director and Trust Executive and is reviewable annually. Consultants should normally be on site during their SPA sessions, unless this can be done remotely and agreed as part of job planning.

Teaching

The hospital is the largest teaching site for Imperial College medical students and always receives excellent reviews. The department currently teaches one junior medical firm and one senior neurology firm. We have also advertised a specialist stroke module which has been taken up on a number of occasions. The Trust and department have the capacity to take more students and would welcome an applicant with a special teaching interest to develop our undergraduate teaching further.

We are also in demand for postgraduate teaching to trainees in medicine, in A&E and for general practice. Because we host the HASU, our surrounding hospitals Ealing and Hillingdon are very keen for us to teach their medical trainees about stroke and its acute management. There is a lot of scope to increase this programme by running formal courses and we would encourage an applicant who wanted to do this.

The above description is not exhaustive, and may be altered to meet the changing needs of the post and of the department. The post holder will be expected to be flexible and to co-operate in accordance with the changing requirements of the department and of the Trust.

Administrative support:

The appointees will be given appropriate shared office accommodation with the provision of personal computer equipment (email and internet access), telephone and secretarial support.

Appendix A

PERSON SPECIFICATION		
	<u>ESSENTIAL</u>	<u>DESIRABLE</u>
Qualifications	Experience in the management of Older People MRCP	MD, PhD or equivalent
Registration	Entry on Specialist Register in Geriatric Medicine and General Medicine, via: <ul style="list-style-type: none"> • CCT (proposed CCT date must be within 6 months of interview) • CESR or • European Community Rights 	
Knowledge and Expertise	Clinical training and experience equivalent to that required for gaining (UK) CCT in General Medicine and Geriatric Medicine and be an Independent Thrombolysis practitioner Ability to take full and independent responsibility for the care of patients. IT Skills and computer literacy	NHS experience within the last 3 years Knowledge of and training in acute frailty services
Teaching	Experience of teaching and training undergraduates, postgraduates and junior medical staff	MD or PhD Evidence of ongoing interest and achievement in research
Management and Audit	Understanding the principles of clinical governance and its implications Leadership skills Knowledge of finance/budgets Ability to organise and prioritise	Management qualification or current study towards management qualification. Evidence of service audit or change management.

	<p>workload effectively.</p> <p>Ability to organise research and work within research governance procedures</p> <p>Ability to plan strategically and to exercise sound judgements when faced with conflicting pressures.</p> <p>Ability to motivate and develop the multi-disciplinary team, balancing departmental and personal objectives.</p> <p>Experience in conducting clinical audit</p>	
Research/ publications	<p>Knowledge of research methodology</p> <p>Evidence of achievement appropriate to appointment at consultant level</p>	<p>Training in research methodology.</p> <p>Publications in peer review journals</p> <p>Presentations to learned societies.</p>
Language	<p>Able to speak and write English to the appropriate standard necessary to fulfil the job requirements</p>	
Personal skills	<p>Energy and enthusiasm and the ability to work under pressure.</p> <p>An enquiring and critical approach to work.</p> <p>Ability to communicate effectively with colleagues, patients, relatives, GPs, nurses and other staff and agencies.</p> <p>Commitment to Continuing Medical Education and Professional Development.</p> <p>Patient Care: Commitment to deliver a high quality service with patient welfare at forefront of practice.</p>	

Appendix C

APPENDIX B: MAIN CONDITIONS OF SERVICE

STATEMENT OF PRINCIPLE

The Trusts' principal purpose is to provide for all the needs of patients in their care. The Trusts expect all its employees whatever their jobs to support and enhance patient care and overall service quality.

The Trusts expect that each of the employees shall act in such a manner as to justify public trust and confidence and to uphold and enhance the good standing and reputation of the hospitals, in accordance with the Staff Charter. Individuals must at all times carry out their duties with due regard to the Trusts' Equal Opportunities Policy.

TERMS AND CONDITIONS OF SERVICE

The post is subject to the provisions of the New Consultant Contract Terms and Conditions of Service for Hospital Medical and Dental Staff, including any locally agreed terms and conditions which are relevant to the post. As these are developed the appointee will be notified and therein after, these will form part of the contract of employment. Details of these are available from the HR Department.

The appointee will be entitled to be a member of the NHS Pension Scheme. If he/she chooses to become or remain a member of the Scheme, remuneration will be subject to deductions of Superannuation contributions in accordance with the Scheme. Membership of the Scheme is automatic unless election is made at any time in favour of provision under a Personal Pension Plan. After opting out of the Scheme the employee would assume full responsibility for pension provision and compliance with the Social Security Act 1986.

SALARY

Remuneration will be in accordance with the NHS rates for full time consultants which is currently £88,364 – £119,133 per annum in eight increments over 30 years based on ten programmed activities. If you are taking up your first Consultant post you would expect to commence on the minimum of this scale.



ADDITIONAL PROGRAMMED ACTIVITIES

Any additional PA's will be payable at 1/10th of your basic salary as defined in schedule 14 of the Terms and Conditions of Service.

ON CALL

If you take part in an on call rota you should be eligible for an availability supplement to your basic salary. This will be paid as defined in schedule 16 of the Terms and Conditions of Service.

RELOCATION EXPENSES

Relocation expenses may be available up to a maximum of £5,000, subject to eligibility.

Agreement to payment of Relocation Expenses should be agreed before accepting the post. To obtain a copy of the Relocation Expenses Policy contact the HR Department on 020 8869 3328.

ANNUAL AND STUDY LEAVE

Annual leave entitlement is 30 working days plus two statutory days. This increases to 32 days plus two statutory days after 7 years' service as a Consultant.

Study leave consists of 30 days over a three year period. Approval of annual and study leave is subject to the procedures set out within the individual departments and the Postgraduate Medical Centre.

So far as is practical, the Consultant appointed will be expected to share in the provision of cover for the annual and study leave of other Consultants in the specialty.

SPECIAL TERMS

The Trust is prepared to negotiate with the appointee alternative Terms and Conditions of Service (eg. a limited term appointment) where this would result in a mutual benefit to both the Trust and the postholder.

MEDICAL REPORT

This post is subject to satisfactory health assessment. If appointed, you will be required to bring the documentary evidence from either an occupational health department or a virology department, of satisfactory Hepatitis B status, to which this appointment is subject, because it involves undertaking exposure prone invasive procedures. Please note this is not just evidence of immunisation. In addition, written evidence should be brought of any tests of immunisation for Tuberculosis or Rubella. If you are recommended for appointment, satisfactory health clearance must be



completed before the appointment can be confirmed. If you do not have such clearance you will NOT BE PERMITTED TO START WORK on the proposed first day of duty.

DISCLOSURE AND BARRING SERVICE CHECKS

You will also be required to complete a Disclosure and Barring Check (DBS), and the clearance from the DBS must have been received, before commencing employment.

<https://www.gov.uk/disclosure-barring-service-check/overview>

<https://www.gov.uk/guidance/dbs-check-requests-guidance-for-employers>.

REHABILITATION OF OFFENDERS ACT

The post is exempt from the provisions of the Rehabilitation of Offenders Act and applicants are not entitled to withhold information about convictions including those which are 'spent'. Any information given will be confidential but failure to disclose such convictions could result in disciplinary action or dismissal.

PRIVATE PRACTICE

The successful applicant may undertake private practice in accordance with the Trust's Private Practice Policy and Schedules 9 & 10 of Terms and Conditions of Service.

REGISTRATION

The person appointed will be required to be fully registered with the GMC and/or GDC.

MEDICAL INDEMNITY

The Trust is financially responsible for the negligent acts and omissions of Consultant medical and dental staff in the course of their Trust employment. If, however, any private practice, within a NHS hospital or any other private hospital is undertaken, the appointee will be personally responsible for subscribing to a recognised defence organisation. The Trust will not be responsible for category 2 (eg. reports for insurance) or 'Good Samaritan' Acts. Health Circular HC (89) 34 provides full details of 'Claims of Medical Negligence against NHS Hospital and Community Doctors and Dentists'.

The Department of Health advises practitioners to maintain defence body membership in order to ensure they are covered for any work which does not fall within the scope of NHS Indemnity.



PROSPECTS FOR CHANGE

The proposals set out in the White Paper “Equity and excellence: Liberating the NHS”, are likely to impact on current working arrangements. The Trust will consult the members of staff concerned at the appropriate time, but meanwhile wishes to draw the attention of applicants to the possibility of change in the future.

JOB PLANS AND WORK PROGRAMMES

The appointee will be subject to the provisions of Schedule 3 of the Terms and Conditions of service. These provisions entail the agreement (between a consultant and the manager responsible for the management of the consultant’s contract) of a job plan (including work programme) for the performance of duties under the contract of employment. The job plan (including work programme) will be subject to review each year by the afore-mentioned parties.

PLACE OF WORK

The appointee may be required to work elsewhere within the Trust and/or at Community Resource Centres (hosted by other health agencies) within The London North West University Healthcare NHS Trust catchment area in accordance with the Trust’s principal aim of flexible working by staff to enhance patient care and he/she will be fully consulted.

ACCESS TO HOSPITAL BASE

The successful candidate will be expected to live within easy access, normally not more than approximately 10 miles by road from the London North West University Healthcare NHS Trust. The reimbursement of removal and associated expenses will be subject to the criteria laid down in the Trust’s Conditions of Service. In the event of the Trust agreeing to reimburse interest charges on a Bridging Loan, reimbursement will normally be made in full up to a maximum period of six months. Reimbursement will not be continued beyond this period. The private residence must be maintained in contact with the public telephone service.

Assistance can be given with the cost of installation and rental charges.

NO SMOKING POLICY

It is the policy of the Trust to promote positive health. Smoking, therefore, is actively discouraged and is prohibited in the majority of the Hospital including offices.

SECURITY

In the interests of safety and security the appointee will be required to wear Hospital Staff Identification Badge at all times whilst at work.

INFORMATION GOVERNANCE

In accordance with the Trust's privacy notice for employees, the Trust will hold computer records and personnel files relating to you which contain personal data. The Trust will comply with its obligations under the General Data Protection Regulation and all other data protection legislation. The data the Trust holds will include employment application details, references, bank details, performance appraisals, holiday and sickness records, salary reviews and remuneration details and other records, (which may, where necessary, include special category data and criminal offence data relating to your health, data held for ethnic monitoring purposes, and regarding DBS checks). The Trust requires such personal data for personnel administration and management purposes and to comply with its obligations regarding the keeping of employee records. The privacy notice sets out the Trust's legal basis for processing your personal data. Your rights of access to this data are prescribed by law.

You will familiarise yourself with the Trust's data protection policy which sets out its obligations under the General Data Protection Regulation and all other data protection legislation. You must comply with the Trust's data protection policy at all times and you agree that you will only access the systems, databases or networks to which you have been given authorisation. The Trust will consider a breach of its data protection policy by you to be a disciplinary matter which may lead to disciplinary action up to and including summary dismissal. You should also be aware that you could be criminally liable if you disclose personal data outside the Trust's policies and procedures. If you have any queries about your responsibilities in respect of data protection you should contact the Trust's Data Protection Officer.

GENERIC RESPONSIBILITIES

To comply with **all** Trust Policies and Procedures, this may be varied from time to time. Copies of the current policies and procedures are available from the HR Department or on the Intranet. In particular:

To have responsibility for the Health, Safety and Welfare of self and others and to comply at all times with the requirement of the Health and Safety Regulations.

To ensure confidentiality at all times, only releasing confidential information obtained during the course of employment to those acting in an official capacity in accordance with the provisions of the Data Protection Act and its amendments.

To positively promote at all times equality of opportunity in service delivery and employment for patients and staff in accordance with the Trust's policies, to ensure that no person receives less favourable treatment than another on the grounds of sex, marital status, race, religion, creed, colour, nationality, ethnic or national origin, sexual orientation, age or disability. To be trained in and demonstrate fair employment practices, in line with trust policies.

To comply with the Trust's Smoke-Free Policy



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 all healthcare associated infections including MRSA. In particular:

- Observe stringent hand hygiene. Alcohol rub should be used on entry to and exit from all clinical areas. Hands should be washed before and after patient contact in all patients with diarrhoea. Alcohol hand rub before and after patient contact may be used instead of hand washing in some clinical situations
- Attend infection control training provided by the Trust as set out in the infection control policy
- Contact Occupational Health in the event that an infection transmissible to patients is contracted

To work in accordance with the Trust's policies on safeguarding children and vulnerable adults. London North West University Healthcare NHS Trust is committed to protecting, safeguarding and promoting the welfare of children and vulnerable adults and expects all employees to carry out their duties in accordance with this commitment.

To undertake such duties as may be required from time to time as are consistent with the responsibilities of the grade and the needs of the service.

This job description is not an exhaustive document but is a reflection of the current position. Details and emphasis may change in line with service needs after consultation with the post holder.