

Job Description

Job title:	Consultant Paediatrician Adolescent Medicine and General Paediatrics
Division:	Paediatrics and Adolescents
Board/corporate function:	Specialist Hospitals Board
Salary band:	£93,666 to £126,281pa inc
Responsible to:	Divisional Manager (Paediatrics and Adolescents)
Accountable to:	Divisional Clinical Director (Paediatrics and Adolescents)
Hours per week:	8 PAs
Location:	University College Hospital

The Appointment

We are seeking an energetic highly skilled general and adolescent focused paediatric consultant to join our team at University College Hospital to work in general paediatrics and adolescent medicine including the TRACCS team.

The post holder would join the adolescent team, seeing young people with complex medical conditions in outpatients, day care and admissions. They would work closely with the large MDT in the TRACC service (Treatment and rehabilitation of children and adolescents with complex conditions), as well as the post-COVID MDT. They would provide liaison between general and adolescent teams and provide support and advice to the T12 adolescent ward and attending consultants.

The post will contribute to the general and acute paediatric rota and general paediatric clinics. Currently the general paediatric team includes 11 general paediatricians (most of whom participate in a consultant-of-the-week attending service, general paediatric clinics and a 1:10 on-call rota). We deliver services in a range of subspecialty areas.

We are developing innovative integrated approaches to clinical care with partner organisations outside the hospital. A new Electronic Health Record System offers exciting opportunities in both Quality Improvement and Research.

Applicants must be in possession of a CCT/CCST or equivalent in paediatrics, or within 6 months of achieving CCT.

Visits to the Hospitals

General enquiries about the job or for an informal discussion about this post should be directed to clinical leads for general paediatrics - Dr.Sarah Eisen (sarah.eisen@nhs.net) and Dr Christina Petropoulos (c.petropoulos@nhs.net), and adolescent consultants Dr.Terry Segal,

UCLH is an NHS Foundation Trust comprising: University College Hospital (incorporating the

Clinical Lead for Speciality Paediatrics (terry.segal@nhs.net), Dr Joanna Begent(j.begent@nhs.net), Dr Najette ayadi O'Donnell(n.ayadio'donnell@nhs.net)

Short-listed candidates are encouraged to visit the hospital before being interviewed by the Appointments Committee.

University College London Hospitals NHS Foundation Trust

University College London Hospitals NHS Foundation Trust (UCLH) is one of the most complex NHS trusts in the UK, serving a large and diverse population.

We provide academically-led acute and specialist services, to people from the local area, from throughout the United Kingdom and overseas.

Our vision is to deliver top-quality patient care, excellent education and world-class research. We provide first-class acute and specialist services across eight sites:

- University College Hospital (incorporating the Elizabeth Garrett Anderson Wing and Grafton Way Building)
- National Hospital for Neurology and Neurosurgery
- Royal National Ear Nose Throat and Dental Hospital
- Royal London Hospital for Integrated Medicine
- University College Hospital Macmillan Cancer Centre
- The Hospital for Tropical Diseases
- University College Hospitals at Westmoreland Street

The delivery of the vision is through four values

Safety and wellbeing

Deliver the best outcomes	Keep people safe	Reassuringly professional	Take personal responsibility
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Kindness

Respect individuals	Friendly and courteous	Attentive and helpful	Protect your dignity
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Teamwork

Listen and hear	Explain and involve	Work in partnership	Respect everyone's time
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Improving

Courage to give and receive feedback	Efficient and simplified	Develop through learning	Innovate and research
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We are dedicated to the diagnosis and treatment of many complex illnesses. UCLH specialises in women's health and the treatment of cancer, infection, neurological, gastrointestinal and oral disease. It has world class support services including critical care, imaging, nuclear medicine and pathology.

The Trust is closely associated with University College London (UCL), London's Global university and one of the top ranked universities in the world. The UCL School of Life & Medical Sciences (SLMS) has an exceptionally strong base of research and teaching in Biomedicine and include the UCL Medical School, one of the highest rated medical schools in the country. Child & adolescent health research at UCL is concentrated within the UCL Institute of Child Health, one of the leading child health research institutes in the world. More information is available on www.ucl.ac.uk. Dr Yamin Baki and Dr Camilla Sen are the undergraduate leads for paediatrics who are supported by two undergraduate fellows.

UCLH Trust has an arrangement with the Medical School to provide clinical teaching for the MBBS undergraduate programme, for which purpose it receives NHS funds from the Workforce Development Confederation. The Trust is recognised by the University of London for this purpose. UCL Medical School is currently ranked 10th in the world in the QS World University Rankings (2018) and 7th in the UK by the Complete University Guide 2018. UCL Medical School is part of the School of Life and Medical Sciences (SLMS), the largest of UCL's Schools, which is a major biomedical research centre and a leader in medical and health research (ranked number 1 in the UK for medical research - REF 2014).

UCLH is a member of UCLPartners, one of five accredited academic health science systems in the UK. UCLP's purpose is to translate cutting edge research and innovation into measurable health gain for patients and populations nationally and internationally, Child Health is a core theme of the program. More information is available on www.uclpartners.com.

The Trust implemented a new Electronic Health Record System ("Epic") in March 2019. Epic replaced multiple separate electronic systems, providing an integrated platform to support patient care. Patients and other healthcare providers will be able to access their health records, and communicate with hospital staff more directly. It offers many opportunities to integrate safety and quality improvement into day-to-day activity. Through its data warehouse, there are untold opportunities for both hypothesis generating and hypothesis testing research at patient and population levels. UCLH has just embarked on a programme of work with The Alan Turing Institute to harness the power of data science and artificial intelligence to support clinical decision making to make services safer, quicker and more efficient.

Paediatric & Adolescent Division

Governance structure

The Paediatric & Adolescent division, together with Women's Health, Queen Square division, and the Ear Nose Throat and Dental Hospital form the Specialist Hospitals Clinical Board.

The Medical Director of the Board is Dr Tim Hodgson. The Divisional Clinical Director for the Paediatric and Adolescent division is Dr Sara Stoneham. The divisional manager is Toral Pandya and the Matron for Paediatrics and Adolescents (non-cancer) is Kim Robinson.

The Paediatric and Adolescent Division consists of several departments, covering integration with primary care, secondary care, tertiary and national referral services. These include General Paediatrics (leads Dr Sarah Eisen and Dr Christina Petropoulos), Adolescent medicine and specialties (lead Dr Terry Segal) Children and Young People's Cancer Service (CYPCS, lead for teenagers and young adults Dr Vicky Grandage, lead for paediatrics Dr Maria Michelagnoli), Child and Adolescent Mental Health (lead Dr Mike Groszmann) Adolescent Rehabilitative Medicine (TRACCS, lead Anna Gregorowski), Paediatric Urology (Lead Dr Navroop Johal), UCLH Surgery (Lead Mr Khaled Dawas) and GOSH surgical link Mr Stavros Loukogeorgakis. The Lighthouse lead for health is Dr Najette Ayadi-O'Donnell.

General paediatric and adolescent service

Around 19,000 children and young people each year attend the emergency department, which has recently moved to new facilities. Acute admissions of children and teenagers are to age-specific wards T11 South and T12 South in the hospital tower. Our adolescent unit is the largest in Europe and one of which we are proud. TRACCS service looks after young people with complex conditions such as functional symptoms, post COVID syndrome and ME/CFS with an integral MDT. Total admissions across the Trust for children and teenagers are over 6,000/year and the wards take all children and teenagers admitted to the Trust including general paediatrics, surgery, urology, orthopaedics, ENT, dentistry and maxillo-facial surgery. Babies from the neonatal unit with chronic lung disease and drug withdrawal are also sometimes transferred to the paediatric ward. All children and teenagers are under the care of a general or specialist paediatrician, even when other specialty teams share care.

TRACCS service looks after young people with complex conditions such as functional symptoms, post COVID syndrome and ME/CFS with an integral MDT.

The adolescent/TRACCS consultants have complex clinics, medical or with MDT, day cases, admissions to T12.

There is a full MDT every week and other bespoke meetings for service development and patient care. Monthly education slot for the team. We support junior trainees and medical students doing projects through IBSC at ICH.

We encourage research projects and service development projects.

At UCH there are dedicated children's and adolescent's outpatient areas, with general paediatric clinics and many specialty clinics including neonatology, diabetes, adolescent endocrinology, asthma, allergy, epilepsy, infectious and tropical diseases, migrant health, adolescent rheumatology, haemoglobinopathy, urogenital problems, adolescent health, CFS/ME, TRACCS, obesity, specialist child protection, paediatric surgery, adolescent gastroenterology and gynaecology.

The Trust has a policy that all children should be seen in an age-appropriate area by suitably trained staff, and many of the "adult" specialists who see children have moved their paediatric and adolescent practice to this area. Play specialists / activity coordinators are in all clinical areas (14 in total). We are fortunate to have a liaison psychological medicine team supporting the secondary and complex tertiary work that we undertake. The team consists of a number of psychiatrists, psychologists and psychotherapists. We have a strong team of children's specialist nurses (CNS's) particularly in the fields of allergy, asthma, infectious diseases and migrant health, endocrinology, diabetes, urology and adolescents.

Complex adolescent gastroenterology

This is an ad hoc service for patient with complex functional symptoms run with the adolescent gastroenterologist and the TRACCS team.

Post COVID service. The adolescent department support a pan London Post COVID service for virtual MDT, and outpatient clinic.

The adolescent TRACCS team looks after YP with complex conditions such as ME/CFS, Long COVID, functional conditions and those with chronic illness where there are complexities.

We have a YP board, and a regular group who meets to support developmentally appropriate care and transition.

Emergency Department

UCH provides a busy emergency service for local residents for children and adults. While the Emergency Department (ED) is managed directly through the ED Division, services to children and young people <18 years are jointly led with paediatrics. As with all London ED services, annual attendances to the UCH ED have been rising for some years. 19,000 children and young people attended UCLH ED in 2019-20. The new ED for Children & Adolescents has 9 cubicles and a designated paediatric resus bay in the adult resuscitation area. The paediatric ED is open 24 hours, 7 days a week and is staffed by paediatric and ED nurses. Dr Yasmin Baki is the lead paediatrician to the ED and works alongside Dr Tulsi Patel, lead ED consultant for paediatrics. There are 4 PEM fellows. There are weekly team meetings. Paediatric doctors see all children under one year of age, GP referrals, and those with safeguarding or clinical concern. The paediatric doctors support the ED team when it is busy and there is an escalation policy to facilitate rapid decision making. Senior decision makers remain in the department at times of peak activity. There is a strict discharge policy so that no junior staff discharge patients from the ED. Paediatric consultants provide regular training and education for the ED staff.

Integration with primary care

UCLH is developing innovative ways of working together with primary care to improve child health. This includes an enhanced referral management process with Camden CCG to allow for electronic patient discussion between GP and paediatrician with full access to primary care records, previous correspondence, and test results, complemented with outreach MDTs with paediatricians visiting GP practices. Similar approaches in Islington are in development. We offer both rapid referral and general paediatric clinics. We are working towards having specific paediatricians linked to groups of GP practices.

Other services

A single oncology service for 0-19 years has been established between Great Ormond Street Hospital and UCLH. Inpatients are managed on T11 North and T12 North wards. Teenagers and young adults with cancer who require ambulatory/ outpatient care are now treated in the

University College Hospital Macmillan Centre where they have a dedicated floor in this modern building with enviable medical and recreational facilities. UCLH, in the Grafton Way Building, is one of only two sites in the UK offering innovative Proton Beam Therapy (PBT) for certain cancer patients, with children making a significant proportion. New models of care will be required, with synergistic clinical provision and research opportunities. These children require extensive supportive care, offering opportunities for the development of new services linking acute paediatrics, CYPCS and radiotherapy.

There is an adolescent endocrinology service offering adolescent endocrine care, including specialties such as pituitary, adrenal, reproductive disorders, specialist Turner syndrome clinic, and the endocrine clinic linked with the national Gender Identity Development Service, as well as transition for young people from Great Ormond Street Hospital and a regional Diabetes service. Most Diabetes and endocrine Consultants are employed jointly between UCLH and GOSH. The Child & Adolescent Diabetes Service at UCLH is the leading service in the UK, having the best results in the 2016 National Paediatric Diabetes Audit and the largest insulin pump service in the UK.

UCLH is a Specialist Haemoglobinopathy centre and children and young people with haemoglobin disorders are admitted under paediatrics for joint care with the Red Cell team.

Our leading level 3 neonatal unit forms part of the Women's Health Division alongside maternity services and the North Central London perinatal centre. These are situated in the Elizabeth Garrett Anderson Hospital on the UCH site.

The Lighthouse

The Lighthouse is the UK's first dedicated service for children and young people (CYP) who have experienced historic sexual abuse (SA) and or exploitation. Based on the Child House model ('Barnahus') the aim is to help reduce children's trauma, gather evidence for court and increase prosecutions for child sexual abuse. Located in London, it serves half a million children and provides a service for CYP, 0-18 years and adults age 18-25 with learning disabilities.

Academic Paediatric Links

The Paediatric & Adolescent Division at UCLH has strong academic links with the Population, Policy, and Practice (PPP) Research and Teaching Department at the UCL Institute of Child Health, led by Prof Jugnoo Rahi. Several senior academics from the programme undertake teaching or clinical work at UCLH, including Professors Terence Stephenson and Russell Viner. The PPP Department also has several junior academic paediatricians linked with UCLH, including 2 Clinical Lecturers, several research fellows, Academic Clinical Fellows and research nurses. The academic teams are well integrated with the clinical service

Consultant Medical Staff

Consultant medical staff in the Paediatric and Adolescent Division and those who make a substantial contribution to paediatrics.

General Paediatrics & Adolescent Medicine (subspecialty interest and other roles indicated)

Dr Billy White (Obesity & Diabetes)

Dr Joanna Begent (Safeguarding, Adolescent Medicine) [OBJ]

Dr Christina Petropoulos (Epilepsy Lead , linical lead General Paediatrics)

Dr Terry Segal (Adolescent Medicine, Endocrinology, GIDS, Paediatric specialties lead)

Dr Dalbir Sohi (Paediatric and Adult Allergy Lead)

Dr Penny Salt (Asthma Lead, Allergy, HDU lead)

Dr Yasmin Baki (ED Lead for Paediatrics, undergraduate education site lead)

Dr Sarah Eisen (Clinical lead General Paediatrics, , Lead for Infectious Diseases, RESPOND (refugee health)

Dr Andrea Leigh (Red cell haematology,)

Dr Camilla Sen (RESPOND (refugee health), Infectious Diseases, undergraduate education site co-lead

Dr Hannah Jacob (Named Doctor)

Dr Najette Ayadi-O'Donnell (College Tutor, The Lighthouse, Adolescent Medicine)

Dr Sakaria Ali (FGM, Safeguarding, RESPOND (refugee health), Epilepsy)

Paediatric Endocrinology / Diabetes – including the National Gender Identity Development Service endocrine unit

Dr Ranna Elkhairi (Lead)

Professor Peter Hindmarsh

Dr Caroline Brain

Professor Gary Butler

Professor Mehul Dattani

Professor Russell Viner

Dr Billy White (Diabetes & Obesity)

Dr Catherine Peters

Dr Sandra Walton-Betancourth

TRACCS (Treatment & Rehabilitation for Adolescents and Children with Complex Conditions)

Anna Gregarowski (Lead) Nurse Consultant

Dr Terry Segal

Dr Joanna Begent

Dr Najette Ayadi-O'Donnell

Children and Young People's Cancer

Dr Victoria Grandage (Lead for TYA)

Dr Sara Stoneham

Dr Stephen Daw

Dr Rachel Hough

Dr Maria Michelagnoli (Lead for Paediatrics and Divisional Q &S lead)

Dr Ben Carpenter

Dr Rachael Windsor

Dr Jeremy Whelan

Dr Trung Nguyen

Dr Carmen Soto

Dr Ajla Wasti

Dr Srivatsa Kavitha

Paediatric Radiotherapy

Dr Mark Gaze

Dr Jenny Gains

Dr Yen Chang

Paediatric Surgery

Mr Stavros Loukogeorgakis

Paediatric and Adolescent Gynaecology

Ms Hazel Learner

Ms Ephra Yasmin

Paediatric and Adolescent Urology

Mr Navroop Johal

Mr Alex Cho

Gunter de Win

Lead Paediatrician at the Lighthouse

Dr Najette Ayadi-O'Donnell

Brandon centre

Dr Jo Begent

Lead for psychological health

Dr Mike Groszmann

Child and Adolescent Psychiatry

Dr Simon Lewis

Dr Mike Groszmann

Dr Jacob Ellis

Dr Georgie Fozzard

Lead for Child and Adolescent Psychology

Dr Lucy Casdagli (and team of psychologists)

Lead for Child and Adolescent Psychotherapy

Louise Allnutt

Non-malignant haematology

Dr Sara Trompeter

Adolescent Gastroenterology

Dr Sara McCartney

Dr Charlie Murray

Dr Fevronia Kiparissi

Dr Natalia Zarate- Lopez

Dr Paul Harrow

Dr Asma Fikree

Adolescent Rheumatology

Dr Debajit Sen

Dr Nicky Ambrose

Dr Corinne Fisher (Lead for YP)

Paediatric Dermatology

Dr Claire Martyn-Simmonds

Dr Jennifer Crawley

Hospital for Tropical Diseases

Dr Sarah Eisen

Radiology

Dr Paul Humphries

Dr Trevor Gaunt

Dr Kshitij Mankad (neuroradiology)

Junior Medical Staff – General Paediatrics & Adolescent

2 x ST6-8 (General paediatrics)

2 x Clinical Academic Training Fellows (both 0.5 WTE clinical, ST6-8 equivalent)

2 x Undergraduate Education Fellows (50:50 Education:clinical ST4+)

1 x Specialty Doctor (General paediatrics)

1 x ST6-8 (Adolescent)

1 x Clinical Fellow (Adolescent)

1 x ST2-3 (Jointly between Endocrinology & Adolescent)

1 x ST2-3 (General paediatrics)

4 x GPVTS (General paediatrics)

1 x Foundation Doctor (General Paediatrics)

Together with junior doctors working in haematology/oncology and community paediatrics, there are 10 doctors on the middle grade and 14 doctors on the SHO out of hours rota.

Education & Quality Improvement

Postgraduate

The department is highly regarded post-graduate training hospital for both paediatric and GPVTS specialty trainees. There are extensive opportunities for a new consultant to develop interests in any of these areas with significant corporate support available. The paediatric and adolescent department has a very active education program. We are very fortunate to be part of an organisation that includes a state-of-the-art education centre including a simulation facility. As well as regular educational sessions within the department that are open to all staff,

there is an additional Wednesday afternoon postgraduate education program that is hosted at UCH in rotation with the Whittington Hospital and the Royal Free Hospital. We also host two APLS courses annually as well as the ST3 simulation program delivered by a faculty from Great Ormond Street Hospital, the Royal Free, Whittington Hospital and UCLH. The Division runs *Responsive In-situ Simulation for Kids* - an immersive simulation programme taking place in clinical areas in response to real clinical issues that are or are anticipated. There is a rotating monthly programme of Thursday lunchtime meetings covering journal club, M&M and QI project presentations. A range of safety activities take place within the department including frequent ward safety huddles as part of the *Situational Awareness for Everyone (SAFE)* project, for which UCLH has won an award.

Undergraduate

The Department provides undergraduate education to UCL 5th year medical students and visiting elective students. We have 2 senior paediatric trainees in undergraduate education fellow OOPE posts (50% education/50% clinical) with a fully funded PG cert in medical education. COVID has been a time of great innovation for the team with the development of new resources, a new blended education programme and fantastic feedback. This work has been published in several forums. We are keen to continue to develop in this area and are linked to the wider paediatric GEMS (national paediatric undergraduate) network.

Research

The Department is growing its research portfolio, with several completed commercial and non-commercial studies, and a growing pipeline of new studies coming online in the near future. We have our own research nurse within the department to support these activities. There are abundant opportunities for the post-holder to develop a research interest, both within UCLH itself and through links to partner organisations. It is anticipated that the introduction of the Electronic Health Record System will increase opportunities for this both in terms of recruitment to clinical studies and permitting database projects using routinely collected clinical data. The EHRS has been designed to permit linkage to external datasets in coming years enabling more integrated research.

Accountability

The post holder will be accountable to DR Terry Segal, Clinical Lead for adolescent specialties, Dr. Sarah Eisen and Dr Christina Petropoulos, Clinical Lead for General Paediatrics, and to Dr. Sara Stoneham, Clinical Director for the Paediatric & Adolescent Division of the Specialist Hospitals Clinical Board.

Job Plan

The job plan will contain 8 Programmed Activities per week on average. 5 PA of these will cover adolescent work (general, TRACCS and Post COVID) and 3 PA will cover general paediatric oncalls and attending, with a small outpatient clinic commitment. The job plan will be negotiated with the Clinical Lead soon after appointment, but would be expected to contain 2 supporting PAs (SPAs) on the basis that the post-holder takes responsibilities to support the wider Division.

Direct clinical care (DCCs)

Attending (1.57PA): The post holder will be responsible for about 6 attending weeks per year (some may be “double attending” with second consultant). All attending consultants have clinical responsibility for CYP on T11 and T12 wards and in ED that require paediatric input by day. At certain times there is an additional paediatric consultant present within the ED. Attending weeks consist of 11 PAs of DCC (08.30-17.00 Monday-Friday).

On-Call (1.7 PA): The post will contribute to the general paediatric acute on-call rota. This will be 26 shifts PA, a 1:10 consultant on call for general paediatrics and includes on-site cover till 9pm weekdays and 1:10 weekends on-site cover from 8:30am to 9pm each day and subsequently on call from home with return if necessary.

The on-call and attending rotas are organised separately and it is common to undertake one on-call during an attending week. Many consultants append on-call weekends to attending weeks, but this is flexible.

Outpatients: will include adolescent TRACCS and Post COVID clinics , and a few general clinics to review patients from attending weeks.

Ward work will include Day care patients and ward patients.

Adolescent medicine alternate weekly team MDT and alternate week T12 MDT meetings.

Contribution to the adolescent and departmental teaching.

Supporting Activities (2) depending on roles

Supporting activities include:

- Potential for leadership roles
- Service development of adolescent service
- Undergraduate teaching and examining (including tutor groups).
- Postgraduate teaching
- Educational supervisor to trainees (pending accreditation as an Educational Supervisor)
- Research, governance and quality improvement activities
- Representing the division on committees
- Personal CPD

The post holder will be expected to contribute fully to the administrative and teaching activities within the department. The number of SPAs allocated will be dependent on the teaching and other commitments.

All consultants represent the department on various committees within the Trust as well as taking responsibility for particular delegated areas according to their interests and availability. The Clinical Director, with the agreement of the other consultants, is responsible for delegating these responsibilities, including lead for audit, clinical governance, safeguarding, college tutor, and representation to Trust-wide committees covering resuscitation, antimicrobial stewardship and clinical guidelines. Further roles benefiting the Division include significant contributions to education and training.

The post holder will contribute to the teaching of medical students and junior doctors. He/she will participate in the weekly postgraduate meetings of the paediatric department as well as audit, governance and training meetings. He/she will contribute to the teaching programme for

paediatric trainees and will be an educational supervisor. He/she will supervise juniors carrying out quality improvement projects. The post holder will contribute regularly to undergraduate teaching and will be asked to tutor small groups of students.

The post holder will be expected to contribute to and participate in governance activities in depth and breadth. A strong desire to improve governance standards is essential. The post holder will be invited to divisional staff meetings held every month in addition to an informal consultant's forum.

The award of 2 SPAs will be dependent on the post-holder taking on a divisional role. The general and adolescent paediatric consultants meet regularly and agree additional roles as part of annual team job planning to ensure that job plans are fair, achievable and personal choice is granted wherever possible.

Example timetables for the post are detailed below. Please note this is an outline programme and the post holder will be expected to discuss and agree a detailed job including personal and professional objectives with the clinical director / clinical lead.

Timetable & PA allocation

- The job plan is annualised to 42 working weeks. Annual leave and study leave make up the remaining 10 weeks.
- The attending component (6 weeks a year) equates to 1.57 PA per week of DCC. This will be a mix of ward rounds, ED cover and ambulatory paediatrics. The on-call (1:10) calculation equates to 1.7 PA per week annualised of DCC.*
- Non-attending weeks are made up of DCC and SPA**.
- A formal job plan would be agreed with the clinical lead on taking up the post
- SPA time 2 PA per week will be flexible each week to ensure that the needs of the clinical service and undergraduate education are met.
- On a 8PA contract, during the non-attending weeks, the post holder will have two days off per week.
- The DCC clinic commitment will include a monthly general clinic (1.25PA per clinic) and weekly adolescent clinics (1.5PA per clinic) day cases and admissions , as well as MDT meetings.

***On Call 1:10 (DCC 1.7)**

4.30pm-9pm weekdays onsite, on call from home thereafter

8.30am-9pm weekends onsite, on call from home thereafter

Frequency of Rota Commitment	Value of supplement as a percentage of full-time basic salary	
	Category A	Category B
High Frequency: 1 in 1 to 1 in 4	8.0%	3.0%

Medium Frequency: 1 in 5 to 1 in 8	5.0%	2.0%
Low Frequency: 1 in 9 or less frequent	3.0%	1.0%

**** Non-attending week timetable (this is for illustration purposes)**

	Monday	Tuesday	Wednesday- WFH UCH alternate with LH	Thursday - UCH alternate with LH	Friday UCLH
AM	<i>Ward attenders SPA</i>	off	Adolescent team meetings teaching/SDM 9-10 10-11.30 MDT	8.30-9.30 grandover 10.15-11.30 Adolescent MDT T12 11.30-12 triage Lunchtime dept meetings	Non work day
PM	<i>Monthly general clinic 2 post covid clinics per month</i>	off	SPA and admin	Clinic Adolescent weekly	Non work day

Attending weeks 6 per year

8.30-5pm ward work with inbedded meetings, education slots etc

Administrative & Secretarial Support

Shared administrative and secretarial support for this post will be provided. A Trust computer will be provided, within shared departmental office space. Access to the internet is provided. As the Trust moves to implementing an Electronic Health Records System these provisions will change as Epic (the chosen EHRS) contains numerous administrative functions active on mobile phones and tablets. Remote access is available to support flexible working.

General Information Relating to Terms and Conditions of Service

The post will be offered under the terms and conditions of service for Consultants [England 2003].

Basic Pay and Pay Thresholds: Basic pay is £74,504 and, subject to satisfactory job planning and review, will rise through annual threshold increases to £100,446 London Weighting is currently £2,162 per annum. Part-time Consultants will be paid pro rata to the thresholds described above, based on the number of agreed weekly Programmed Activities. The starting salary for new consultant appointments will be at the minimum of the pay scale in accordance with the Medical & Dental Whitley Council Terms and Conditions for Consultants, Schedule 14. Previous service at Consultant level or equivalent may be taken into account when determining the starting salary; please contact the Consultant Recruitment Adviser for further information. An on-call availability supplement equivalent to 5% of full time basic salary is payable for participation in the on-call rota.

The Trust is entitled at any time to deduct from the post-holder's salary, or any other monies payable to the post-holder by the Trust, any overpayment of salary or wages, under-deduction of charges, over-payment of holiday entitlement or any other sum which the post-holder may owe to the Trust and, if this is insufficient, the Trust may require payment of the balance.

The Workforce Directorate is responsible for ensuring that the Trust complies with its legal obligation, which includes any prohibition on offering an appointment, and with any requirements stipulated by regulatory bodies. It is essential that staff and patients are confident that every worker has been checked to ensure the Trust has confirmed his/her:

- Identity
- Criminal record (where applicable)
- Essential qualifications
- Professional registration
- References
- Occupational health clearance
- Eligibility to work in the UK (work permit/visa)

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 and, when relevant, for entering data onto a computer database in accordance with the rules and regulations of the Data Protection Act.

Confidentiality

All employees and honorary appointees are required to exercise discretion and maintain confidentiality at all times.

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.

Consultant Terms and Conditions

The Terms and Conditions referred to in the contract can be viewed in full on the Trust's intranet site (Human Resources/New consultant contract) or via the NHS Employers' website

(<http://www.nhsemployers.org/pay-conditions/pay-conditions-348.cfm>).

Criminal Record

In view of the nature of the work this post is exempt from the provision of Section 4 (2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exemption order 1975). Applicants are, therefore, not entitled to withhold information about convictions including those which for other purposes are "spent" under the provisions of the Act. You are, therefore, required to declare any pending prosecutions or convictions you may have, even if they would otherwise be regarded as "spent" under this Act and any cautions. In the event of employment, failure to disclose such convictions could result in dismissal or disciplinary action by the Authority. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the order applies.

The Trust will check with the police for the existence and content of any criminal record of the successful applicant. Information received from the police will be kept in strict confidence.

The disclosure of a criminal record, or other information, will not debar you from appointment unless the selection panel considers that the conviction renders you unsuitable for appointment. In making the decision the Trust will consider the nature of the offence, how long ago and what age you were when it was committed and any other factors which may be relevant, including appropriate considerations in relation to the Trust's published Equal Opportunities Policy.

Failure to declare a conviction, caution or bind-over may, however, disqualify you from appointment, or result in summary dismissal/disciplinary action if the discrepancy comes to light. If you would like to discuss what effect any conviction you have might have on your application, in confidence, for advice, please contact a Senior Officer in the Human Resources Department.

Data Protection

In accordance with the Data Protection Act (1998), the Trust is authorised, if required to do so, to obtain, process and/or use information held on a computer in a fair and lawful way. The Trust is authorised to hold data only for the specific registered purpose and not to use or disclose it in anyway incompatible with such purpose. It is further authorised to disclose data only to authorised organisations as instructed.

Equality and Diversity

To comply with the Trust's Equal Opportunities Policy and treat staff, patients, colleagues and potential employees with dignity and respect at all times.

Health and Safety

Employees must be aware of the responsibilities placed on them under the Health and Safety at Work Act (1974), to ensure that agreed safety procedures are carried out to maintain a safe environment for employees, patients and visitors.

Hepatitis B

All employees who perform “exposure prone procedures” should be immunised against Hepatitis B. Antibody response should be checked on a regular basis. If successful in being appointed to a post, all employees MUST report to the Occupational Health Department within two weeks of starting in post. Failure to comply with this, or the new regulations pertaining to Hepatitis B, may result in an employee being suspended from duty. For further information, either contact the HR Department or the Occupational Health Department. All matters discussed will remain confidential.

Insurance Policy

The trust accepts no responsibility for damage to or loss of personal property with the exception of small valuables handed to their officials for safe custody. Staff are therefore recommended to take out an insurance policy to cover personal property.

Ionising Radiation Use

Under the Ionising Radiation (Medical Exposure) Regulations 2000 the Trust is obliged to maintain a register of all persons entitled to act as “Practitioners” or “Operators” (i.e. to justify or to carry out a medical exposure) and to keep records of their training.

If your post includes the responsibilities of either “Practitioner” or “Operator” as defined by these regulations you must provide the Trust with evidence of training. This should include evidence of completion of an approved training course plus details of practical experience.

Please note that if, during the course of your duties, you refer a person for a medical exposure you are obliged to provide sufficient relevant clinical information to the Practitioner to justify the use of Ionising radiation. You are expected to follow any guidelines for such referrals, which the Trust provides.

Job Sharing

UCLH has a job sharing policy under which all posts are open to job sharing, with or without a partner.

No Smoking

UCLH operates a “No Smoking Policy” which does not allow smoking at work, in trust buildings, entrances or grounds. Smoking is a Health and Safety issue, and all staff have a responsibility to ensure that smoking does not occur in public areas or entrances and to be aware of, not only health risks, but also the risks of unnecessary fire alarm activation. The trust has a comprehensive staff support programme for staff who wish to give up smoking. For more information, contact the stop smoking services Manager.

Private Practice

All consultants should adhere to the national Code of Conduct for Private Practice. Private Practice should as far as possible, be undertaken within UCLH facilities, always ensuring that

the needs of the practitioner can be met. In this way income generated can be used to further develop patient care within the Trust.

The appointee must follow Trust agreed procedures when seeking to commence private practice. Any private practice commitments must not prejudice the basic service requirements contained in the job plan.

Appointees expressing an interest in a part time post in order to undertake private practice will normally be expected to hold a 6 programmed activity [PA] contract.

Public Transport and Car Parking

Car Parking facilities at the Trust are limited. The current car parking policy and permit allocation policy has recently been revised and permit applications should be directed to the Head of Staff Services.

Recruitment & Selection

All employees who are responsible for recruiting new staff are required to have completed recruitment and selection training before they can be involved in any recruitment process.

Relocation Expenses

Assistance may be given to newly appointed Consultants with part of the cost of their removal expenses, providing (generally) this is their first appointment in the National Health Service and also that the removal is necessary to comply with UCLH requirements concerning the place of residence.

Residential Criteria

It is considered acceptable for new employees to commute a distance of approximately 25 miles to the hospital unless there are exceptional circumstances or job requirements that prevent this. Trust staff must be able to contact a consultant by telephone.

Service Commitment

UCLH expects its employees to communicate with colleagues, patients and visitors in a polite and courteous manner at all times and to adhere to the UCLH Service Commitment "Putting Patients First" and adopt a professional approach to customer care at all times.

Staff Involvement

The Trust is committed to involving staff at all levels to improve patient services and working lives. The Trust continually strives to improve internal communication systems and encourage staff involvement in organisational and service developments – including business planning – to enable staff to influence discussions which affect them and their working conditions.

Staff Nursery/Crèche

UCLH has childcare provision at three nurseries for employees. The nurseries are based in the following areas:

- The Mousehole nursery (23 Devonshire St.)
- The Fig Tree (4 St. Pancras Way)

Places at these nurseries are available for babies and children aged 4 months – 5 years. If a place is not immediately available, names will be placed on a central waiting list.

NHS Pension scheme

The post-holder will be entitled to join or remain in the NHS Superannuation Scheme, which provides:

- A pension and a tax free lump sum on retirement
- Life assurance cover
- Voluntary early retirement benefits
- Ill-health retirement benefits
- Redundancy benefits
- Family benefits
- Options to increase benefits

All pension benefits are based on salary and length of membership of the Scheme. Contribution rates for most members is 7.5% of pay, but the real cost is normally around 3.5% because of the tax relief on contributions and the lower rate of National Insurance contributions paid as members opt out of the State Earnings Related Pension Scheme. Legislative changes affecting the NHS pension scheme from 1ST April 2008 include the Gender Recognition and Civil Partnerships Acts and the Finance Act 2004, introduces new upper limits on tax free pension benefits and certain Child allowances. Medical, dental and ophthalmic practitioners and high earners can find out more via www.nhs.uk/nhsplus/2008/04/01/pensionbooklets.cfm.

No contribution will be made by the Trust to personal pension plans for those who opt out of the above scheme.

Person Specification

Post Title: Consultant Paediatrician with an interest in **Adolescent Medicine**

Directorate/Department: Paediatric & Adolescent division

Full time Post: 8PA post

	Essential Criteria	Desirable Criteria	Where evaluated
Professional Qualifications	<p>Eligible for full GMC Registration</p> <p>On GMC Specialist Register or within 6 months of attainment of CST in <i>Paediatrics</i> at date of interview</p> <p>MRCPCH or equivalent</p> <p>APLS provider</p>	<p>A higher degree, MSc, MD, PhD or equivalent,</p>	<p>A</p> <p>GMC</p>
Clinical Experience	<p>Broad experience in general and emergency paediatrics including ED, inpatient, acute ambulatory and outpatient settings.</p> <p>Experience in adolescent healthcare</p> <p>Experience in complex safeguarding</p> <p>Level 3 safeguarding training</p>	<p>Experience in a tertiary subspecialty service</p> <p>Level 3 safeguarding training</p> <p>Training in forensic examination</p> <p>Young persons SPIN</p> <p>Safeguarding SPIN</p>	<p>A</p> <p>R</p> <p>I</p>
Clinical Skills	<p>Ability to manage all common paediatric emergencies and acute illnesses.</p> <p>Ability to manage complex presentations and conditions in young people</p>	<p>Experience with medically unexplained symptoms</p>	<p>A</p> <p>R</p> <p>I</p>
Clinical Knowledge	<p>Good broad knowledge of general paediatrics</p> <p>Knowledge and experience of local and national safeguarding policies</p>	<p>e-learning for health adolescent course</p> <p>adolescent training</p>	<p>A</p> <p>R</p> <p>I</p>

		Knowledge and experience of local and national safeguarding policies	
Quality Improvement & Leadership	<p>Evidence of leadership ability and commitment to clinical governance.</p> <p>Range of quality improvement projects in the past three years.</p> <p>Competent in a range of IT skills</p>	<p>Previous leadership role.</p> <p>Experience leading projects between organisations.</p>	<p>A</p> <p>R</p> <p>I</p>
Education & Research	Experience in a range of teaching techniques at both undergraduate and postgraduate level	<p>Postgraduate teaching degree or diploma</p> <p>Research experience</p>	<p>A</p> <p>R</p> <p>I</p>
Personal Qualities	<p>Communication; ability to communicate with clarity and intelligently in written and spoken English; ability to build rapport, listen, persuade/ negotiate.</p> <p>Accountability; ability to take responsibility, lead, make decisions and exert appropriate authority.</p> <p>Interpersonal Skills; ability to see patients as people, ability to empathise and work co-operatively with others</p> <p>A 'can do' approach to working with colleagues</p> <p>Share the Trust values of safety, kindness, teamwork and improving</p>	Previous leadership role	<p>R</p> <p>I</p>

Evaluation Key:

A= Application Form

I= Interview

R-References

T/P=Test/Presentation

