

Chairman Mr Tom Spink

Chief Executive Prof Leslie Dwyer

Consultant Interventional Cardiologist



Department of Cardiology

**Norfolk and Norwich University Hospitals NHS Foundation Trust
and James Paget Hospital NHS Foundation Trust**

April 2024

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Introduction

This is a full-time substantive consultant appointment in cardiology to support the provision of interventional cardiology services for the region, including on call for primary PCI. The successful applicant would join an enthusiastic and cohesive team of 22 consultant cardiologists.

A candidate who is unable for personal reasons to undertake the duties of a whole-time post will receive equal consideration. If such a candidate is appointed the job content will be modified as appropriate in consultation with consultant colleagues and local management.

We welcome all applications irrespective of age, disability, gender, sexual orientation, race or religion. Additionally, people with disabilities will be offered an interview providing they meet the minimum criteria for the post. The Trust operates job share and flexible working.

The Department

The department provides specialist non-surgical cardiology services to the majority of Norfolk. The catchment population is approximately 900,000 and includes the oldest population in the UK (North Norfolk).

There are 23 consultants with specialist interests including adult congenital heart disease, cardiac rhythm management, cardiac imaging, coronary intervention, heart failure, inherited cardiac conditions, maternal cardiology and valve disease. Two academic consultants have joint appointments with the University of East Anglia Medical School. There is a 24/7 primary PCI rota and an additional general cardiology on call rota. The department has a large team of cardiology nurse specialists, advanced care practitioners and a cardiac rehabilitation service.

There is a large non-invasive investigation area adjacent to consulting rooms and consultant offices. In-patients are cared for on the eight-bed CCU, 37-bed Kilverstone ward and a day-procedure / elective area.

There are five cardiac catheter laboratories with a programme of lab refurbishments anticipated over the next 2 years.

There are specialist nurses supporting adult congenital heart disease, arrhythmia, heart failure and an award-winning cardiac rehabilitation service. We have close links to community cardiac services, mental health and wellbeing and palliative care.

The cardiology department has an established clinical governance programme, with weekly pacing MDT meetings, and monthly Directorate / Governance meetings. There is a weekly MDT meeting with Royal Papworth Hospital, and a monthly consultant meeting.

The appointee will be provided with an office, computer, internet access and secretarial support which may be shared. Remote review of all cardiac imaging and radiology, previous correspondence, procedure reports and departmental databases is available.

Interventional Cardiology

There are 8 interventional consultants providing elective and emergency PCI, with 23 sessions of PCI / angiography scheduled each week. We perform approximately 1700 coronary interventions p.a. of which >500 are PPCI cases. The hospital is a designated Heart Attack Centre and has a 24/7 helicopter landing pad facilitating admission of patients with out of hospital cardiac arrest from across East Anglia.

We have a full range of diagnostic, interventional, adjunctive and supportive treatments available including iFR / FFR, IVUS, OCT, rotablation, Shockwave, intra-aortic balloon pumps, and CorPuls compression device. The vast majority of procedures are performed trans-radially, and more than 90% of elective PCI is undertaken as day-case. The department has considerable expertise in DCB angioplasty, and recently performed several live cases demonstrating this technique at the BCIS Advanced Cardiovascular Interventions meeting. Regular CTO lists are undertaken, often assisted by external proctors.

Rigorous governance around PCI includes weekly M+M meetings, attended by cath lab staff, trainees and consultants. There is a comprehensive database of PCI procedures and outcomes to support the BCIS / NICOR audit, which has proved invaluable for research projects, leading to numerous publications.

Cardiac Rhythm Management

NNUH provides a regional pacing service, undertaking more than 1400 procedures per year. In 2022/23 it was the largest bradycardia pacing service in the country and in the top third of complex pacing centres. In addition, we also undertake leadless pacing and subcutaneous ICD. Following recent expansion there are 13 pacing sessions per week, including weekend and anaesthetic lists. The service is delivered by 8 consultants, some of whom are amongst the highest volume implanters in the country.

Pacing activity has increased by 10% per year for the past decade largely due to the increasingly elderly population in this region. We anticipate growth will continue in a similar trajectory over the next few years.

The EP service is delivered by three electrophysiologists who perform simple and complex ablation procedures including VT ablation with the support of CARTO and Rhythmia electro-anatomical mapping systems. There are 10 EP sessions per week including regular general anaesthetic lists.

Heart Failure Service

The NNUH heart failure service has is a dynamic growing network of allied health professionals across the NNUH and community services including close ties with Palliative Medicine. There is a Cardio-Oncology MDT with plans to establish a regional Cardiac Amyloid Clinic with a diagnostic service in conjunction with Nuclear Medicine.

Inherited Cardiac Conditions

The department is recognised as a Centre for Inherited Cardiac Conditions and covers both the NNUH and JPUH catchments. The service is run by Dr Ian Williams (inherited arrhythmias), Dr Sunil Nair (cardiomyopathy) and Dr Catherine Head (aortopathy), ICC specialist nurse Sr Emma Hughes and Sr Caroline Hall. A comprehensive ICC database has been developed, which now includes 1200 index cases or at-risk family members. There are 3 consultant and 3 nurse led clinics per week.

Both ICC and ACHD work in liaison with visiting Geneticists from the East Anglia Genetics Service. Link consultant Dr Sarju Mehta undertakes weekly clinics and a monthly MDT meeting at NNUH accompanied by a genetic counsellor. There are close links with the Barts ICC & St Georges ICC services.

Adult Congenital Heart Disease

The Norfolk and Norwich University Hospital (NNUH) is a level two specialist adult congenital heart disease (ACHD) centre, providing specialist care to a population of approximately 1.4m across Norfolk and Suffolk. There are currently >2500 adults with congenital heart disease under the care of this service. Weekly outreach services are provided by the NNUH team at the James Paget University Hospital (JPUH) in Great Yarmouth, and an adolescent transition clinic at Ipswich Hospital.

Pulmonary Hypertension services: NNUH is a shared care centre for Pulmonary Hypertension (PH) within a clinical network based at the Papworth Pulmonary Vascular Diseases Unit (PVDU) hub. Dr Head, consultant ACHD cardiologist, is also the NNUH PH service lead.

Obstetric services: The NNUH is a tertiary level maternal medicine centre with 6000 deliveries pa, providing care for complex maternal / fetal problems for women from Queen Elizabeth Hospital, Kings Lynn and the James Paget Hospital as well as the NNUH secondary care catchment area. There is a fortnightly joint maternal cardiology clinic and a regional fetal medicine service including fetal echocardiography.

Clinical Psychology: We have a dedicated clinical psychologist to support the mental health of patients living with long term cardiac conditions. This post is currently funded through departmental charitable funds and the Norfolk Heart Trust.

Other sub specialist services:

Non-invasive cardiac imaging:

- Echo: There are six echocardiography rooms equipped with Philips and GE machines, delivering in excess of 18000 studies per annum. All transthoracic echocardiograms are undertaken and reported by the physiologists. Two imaging consultants (dual TTE & TOE) and 7/8 of the Band 7 physiologists are BSE (adult TTE) accredited, one chief physiologist has EACVI congenital echo accreditation. The department is aiming for departmental BSE accreditation by 2025. Advanced echo modalities undertaken include 3D, TOE, bubble studies, contrast and stress echo. There are additional physiologist led services including valve clinics, dobutamine stress, bubble and contrast lists.
- Cardiac CT: The trust has upgraded the CT capability with a new Siemens Flash 128-slice dual-source cardiac CT. Current capacity is >1000 studies per annum, including TAVI and GUCH assessments.
- CMR: The full complement of Cardiac MRI techniques are delivered including stress perfusion, tissue characterisation including mapping techniques, a large GUCH cohort and recently the development of 4D flow techniques by Dr Pankaj Garg. A fundraising campaign for a dedicated Cardiac MRI scanner was launched in 2022 by the Norfolk Heart Trust and has raised successfully £1.2 million. The new scanner will be housed in the Diagnostics Assessment Centre which is due to open in 2025. Current capacity is 1000 studies per annum but is projected to increase to 2500.
- Nuclear Medicine: 3 Intevo Bold Spect CTs have recently been installed. The MIBI scans are reported by Consultant Radiologist Dr Clare Beadsmoore. A business case is in preparation to set up a local DPD bone scan service, as part of developing a regional Cardiac Amyloid Service.

Clinical Staff

Dr Alisdair Ryding	Service Director, PCI and lead for research
Dr Omar Abdul-Samad	Imaging and pacing, and honorary consultant at JPUH
Dr David Bloore	PCI (visiting consultant contributing to PPCI rota)
Dr Simon Eccleshall	PCI (lead)
Dr Pankaj Garg (UEA)	Associate Professor, cardiac MRI

Dr Tim Gilbert	PCI
Dr Cairistine Grahame-Clarke	Pacing, heart failure inc cardio-oncology, TOE, M&M lead
Dr Catherine Head	ACHD lead, maternal cardiology, aortopathy. Joint Chief of Medical Division
Dr Marina Hughes	Congenital cardiac MRI
Dr Wei Lim	Pacing and EP
Dr Clint Maart	PCI
Dr Ioannis Merinopoulos	PCI and honorary consultant at JPUH (locum)
Dr Santosh Nair	Pacing and undergraduate teaching (lead)
Dr Sunil Nair	Imaging and ICC (cardiomyopathy lead) JPUH Cardiology lead
Dr Daniel Raine	Electrophysiology and pacing
Dr Chris Sawh	PCI
Dr Kristian Skinner	Heart failure (locum)
Dr Marianna Stamatelatou	ACHD, pulmonary hypertension and Fontan
Dr Sreekumar Sulfi	PCI and honorary consultant at JPUH
Dr Richard Till	Electrophysiology (lead), pacing and lead for clinical governance
Prof Vass Vassiliou (UEA)	Cardiac MRI and valvular heart disease
Dr Ian Williams	Complex pacing (lead) and inherited arrhythmic syndromes
Dr Trevor Wistow	PCI and pacing

Dr Paula Christmas	Clinical psychologist (funded by the Norfolk Heart Trust and departmental charitable funds)
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Junior doctors

- 9 SpR NTN
- 2 Academic SpR
- 1 Clinical Lecturer
- 1 Senior clinical fellow (ward-based)
- 2 Clinical Fellow in Cardiology (Trust Dr post)
- 2 IMT1/2
- 2 GPST
- 1 FY2

Technical and other Support Staff

- Lead cardiac physiologist Cardiac Rhythm Management: Mrs Andrea Taylor
- Chief cardiac physiologists (Band 7) 8.0 WTE
- Senior cardiac physiologists (Band 6) 10.0 WTE
- Cardiac physiologists (Band 5) 2.0 WTE
- Cardiographers (Band 2) 11.81 WTE
- Cardiac specialist nurses 10 WTE

Cardiology matron:

- Matron: Mrs Helen Moerdyk
- 1 nurse consultant (ACHD)
- 16 WTE cardiology specialist nurses (Heart Failure, Arrhythmia, Heart Health)
- 3 WTE Advanced Care Practitioners

Management Team

- Care Group Operational Manager, Cardiology & AMDU: Catherine Beales

Cardiology at JPUH

Cardiology inpatients are treated on the Acute Cardiac Unit (9 beds) and the adjacent Ward 2 (21 beds). There are 4 intensive multichannel monitored beds, and telemetric monitoring in the step-down beds / ward 2. Facilities for temporary pacemaker insertion, pericardiocentesis, transthoracic and transoesophageal echocardiography are available on ACU in a dedicated procedure room. The patient mix includes high-risk acute coronary syndromes, heart failure, arrhythmias and endocarditis. The unit has a high number of experienced senior nurses. They are supported by Cardiac Nurse Specialists for rehabilitation and heart failure. There is a Cardiologist of the Day model. Patients are admitted to the unit via the on-call medical team.

The cardiology department undertakes approximately 6000 echos per annum, including more than 75 transoesophageal echos. In addition there are facilities for

treadmill testing, ambulatory ECG and blood pressure monitoring. A Dobutamine stress echocardiography service has been successfully running since January 2014, delivering 150-200 studies per year and is a physiologist led service. In 2019 a Consultant physiologist post was recruited to with a successful applicants filling the role on a job share basis. They are both being trained to be independent stress echo and TOE practitioners and have independently commenced an exercise echo service.

In addition to general cardiology clinics there are nurse-led rapid access chest pain clinics, heart failure clinics and a Consultant monthly ACHD clinic. A Cardiac CT service has been operational since November 2016, delivered by Dr Syeda Zahoor, with >400 studies undertaken in 2019. A Cardiac MRI service was started in 2020 by Dr Sunil Nair and now undertakes > 300 studies per year.

Consultant subspecialties are as follows: Dr Sunil Nair (Clinical Cardiology Lead, Imaging) Dr Omar Abdul-Samad (imaging/bradypacing), Dr Sreekumar Sulfi (coronary interventions), and Dr Rasool (locum). Drs Sunil Nair and Omar Abdul-Samad have TTE and TOE accreditation and level 2 accreditation for CT coronary angiography. There will be opportunities to participate in research / audit. Dr Stamatelatos visits from the Norfolk & Norwich University Hospital once per month and runs the ACHD clinic.

Patients requiring coronary angiography / PCI / bradycardia pacing / ICD / CRT are transferred to the Norfolk and Norwich University Hospital (NNUH). NNUH also provides a regional 24 hour / 7 days a week primary PCI service covering the whole of Norfolk and beyond. Cardiothoracic surgery is provided by Papworth Hospital.

There is an ACS in reach service run by our ACS specialist nurses of which there are 3 WTE.

Acute Cardiac Unit (ACU)

Our ACU has 9 beds and one bed for procedures. One cubicle bed for intensive monitoring, temporary pacing, pericardial aspiration and similar procedures. We utilise this room for TOE's, stress echocardiograms and for DC Cardioversions. There are four intensive multi-channel monitored beds for treatment of acute NSTEMI or patients who are severely ill. 5 monitored beds within one bay for patients with acute coronary syndromes or 'step downs'.

Admission to the unit is either directly from paramedic ambulances (ECG telelinks are available), from the A&E Department or the Emergency Admissions and Discharge Unit. Direct admissions from General Practitioners are infrequent.

Research, Education & Training

Research is important as NHS Trusts with more research activity have better outcomes for patients.

NNUH's [Research Strategy 2020-2025](#) brings focus and direction for our organisation, our patients and stakeholders and is intended to position NNUH as a leader driving research locally, nationally and internationally. The strategic Goals are to:

1. Embed a culture of research throughout the NNUH creating an inspirational environment that is recognised nationally and internationally, which inspires future leaders of clinical research.
2. Consolidate and deepen the special partnership with the University of East Anglia (UEA) and the Quadram Institute Bioscience (QIB).
3. Develop sustainable strategic partnerships critical to the region and the wider NHS.
4. Be recognised as a leading NHS Trust in applying research and adopting innovation to deliver the best patient care and to benefit the wider NHS.

CQC Report (April 2020) identified research as an area of outstanding practice

'A five year research strategy had recently been adopted The strategy was comprehensive and looked to build on previous research at the Norfolk and Norwich. It clearly identified that research was important as trusts with more research activity have better patient outcomes. Four achievable goals had been identified for the strategy and it was clear there was broad executive support for research within the organisation.'

NNUH is a partner in the National Institute of Health and Social Care Research (NIHR) Clinical Research Network East of England. In 2021/22 more than 170 staff members (generally doctors) led research studies as Principal Investigators and we are working to create opportunities for other healthcare professionals to be Principal Investigators and for increased patient participation.

In 2022, we received a prestigious award the NIHR [Clinical Research Facility \(NIHR CRF\) Norfolk](#) putting NNUH in a group of NIHR supported CRFs alongside Oxford, Cambridge, and London.

NNUH has an active departmental Research Leads Group which supports research (including research management and governance) and publishes an [Annual Report](#).

Examples of past successes include the Norfolk Diabetes Prevention Study (the largest study aimed at prevention through lifestyle interventions), a clinical trial of a new device for automated insulin delivery for pregnant women with type 1 diabetes, an intervention to support smoking cessation in patients and delivery room cuddles for extremely premature babies and parents.

During the pandemic NNUH contributed to a Covid vaccine trial delivered at pace and scale and to trials such as RECOVERY which discovered the first medicine to treat COVID.

NNUH's commitment to research is embedded within our Corporate Strategy '[Caring with PRIDE](#)' with aspirations to 'Drive....' and 'Embed world class research' and extend our partnerships with the University of East Anglia (UEA), Quadram Institute Bioscience (QIB) and the Norfolk and Waveney Integrated Care System.

Cardiology Research

We undertake significant research in all areas of cardiovascular disease including coronary intervention, electrophysiology, adult congenital heart disease, imaging, heart failure and cardiac epidemiology using big databases. The department is also very active in NIHR portfolio research including multicentre trials. In the past 7 years we have successfully supported 6 MD (Res) and one PhD and many more are currently in progress. The department's research profile is growing, and recently Dr Matthews won the 2023 BSCMR Young Investigator Award.

Key Research Staff

Principal Investigators: Dr Ryding, Dr Eccleshall, Dr Nair, Dr Hughes, Dr Merinopoulos, Dr Reinhold (Associate Professor), Dr Garg (Associate Professor), Prof Vassiliou (Professor) Prod Flather (Emeritus Professor).

Clinical Lecturers: Dr Matthews (NIHR Clinical Lecturer), Dr Debski (NIHR Clinical Lecturer).

PhD students: Dr Corballis (NIHR funded), Dr Tsampasian (NIHR funded), Dr Chattopadhyay (Wellcome funded), Dr Assadi (external funding), Dr Lee (external funding), Dr Natarajan (Research Associate, industry funding).

Research Associates: Dr Li.

Academic Clinical Fellows: Dr Grafton-Clarke (NIHR funded), Dr Paddock (NIHR funded), Dr Bhalraam (locally funded), Dr Meng (NIHR funded).

Research Nurses: Ms Donna Moore, Laura Staff, Anna Ilguanas.

University

The Norwich Academic Cardiology group is led by Prof Vassiliou, Dr Garg and emeritus Prof Flather. It sits under the metabolic health institute of the Norwich Medical School.

Key Research Infrastructure There is excellent collaboration between the cardiology department and the university, utilising infrastructure across both sites including interventional research equipment and imaging core lab analysis.

Funding

We have currently > £4 million active in research grants from NIHR, BHF, Wellcome and industry. We also participate in multiple industry sponsored studies.

Collaboration

Collaborations with active research projects exist with Imperial College London, University of Cambridge, University of Leeds, University of Sheffield, University of Edinburgh, University of Leiden.

Output

Cardiovascular disease was rated as excellent in the last REF cycle. We have published more than 160 papers in the last three years, including NEJM (2), Lancet (2), Circulation (3), EHJ (5), JACC (5) and JAMA internal medicine (1).

Duties of the Post

The appointment is to the Trust, not to specific hospitals. All consultants, including the appointee, will be expected to be involved in implementing the Trust's Clinical Governance programme. This includes active participation in clinical audit, quality, clinical guidelines/pathways, professional development, appraisal and risk management.

The appointee will support the delivery of a high quality, safe and compassionate healthcare service, whereby all staff are expected to act as a role model to others in all aspects of their work and consistently demonstrate NNUH's 'PRIDE' values of People focused, Respect, Dedication, Integrity and Excellence **and demonstrate behaviours that support and encourage an inclusive culture.**

Main duties

1. Provide, with the other NNUH consultants, a system of mutual cover for annual, study and professional leave for weekday cover. The weekend cover will only be swapped if necessary after discussion with colleagues.
2. The new post holder will help provide cross-cover of the PCI service, including 1 in 8 PPCI on call. Due to the PPCI on-call commitment there is a requirement to live with 30 minutes travel of the hospital.
3. Provide consultation and advisory service to medical colleagues in other specialties in the Trust.
4. Liaise with medical staff in other specialties and participate in the regular clinical meetings and other post-graduate activities of the hospitals.
5. Take part in the Royal College of Physicians continuing medical education programme. The Trust will provide study leave expenses in line with national terms and conditions of service.
6. Play a full part in the teaching and audit activities of the department. Undergraduates from the UEA Medical School are attached to NNUH regularly for their circulation unit (12 clinical weeks, 24 UEA based), which may involve the successful candidate in bedside (clinic and ward) teaching as well as seminars and PBL feedback.
7. Attendance is expected at the weekly MDT with cardiothoracic colleagues at Papworth, monthly Directorate and clinical governance meetings, and subspecialty MDT. All consultants, including the appointee, will be involved in implementing the Clinical Governance programs of the Trust. This includes active participation in clinical audit, quality, clinical guidelines/pathways, professional development, appraisal and risk management.
8. Comply with the outline Consultant work programme (under provisions of Circular HC90/16) and the weekly timetable of fixed commitments (i.e., regular scheduled NHS activities under paragraph 30B of the TCS).
9. Deploy unallocated, flexible, professional time on liaison, emergency work, travel, continuing clinical responsibility, teaching, research, medical audit, interdisciplinary meetings and continuing professional development. The postholder will be a member of the consultant staff committee at NNUH and is encouraged to attend meetings.

10. The post holder will be expected to contribute to the educational and clinical supervision of the NTN SpRs.

Job Plan

A formal job plan will be agreed between the appointee and their Service Director, on behalf of the Medical Director, as soon as possible after the commencement date of the appointee. This will be signed by the Chief Executive and will be effective from the commencement date of the appointment. A copy to be forwarded to the Medical Staffing Department to be retained on the personnel file.

The Trust has discretion to offer additional programmed activities in appropriate cases. However, where after the appropriate panel approval has been obtained it is agreed to pay temporary additional programmed activities these will only be payable to newly qualified consultants after three months in the post. Such additional programmed activities will not be paid retrospectively to the date of appointment. In the case of other consultants the date from which the additional programmed activities become payable will be a matter of agreement with the Service Director.

The Job Plan will then be reviewed annually, following the Appraisal Meeting. The Job Plan will be a prospective agreement that sets out a consultant's duties, responsibilities and objectives for the coming year. It should cover all aspects of a consultant's professional practice including clinical work, teaching, research, education and managerial responsibilities. It should provide a clear schedule of commitments, both internal and external. In addition, it should include personal objectives, including details of their link to wider service objectives and details of the support required by the consultant to fulfil the job plan and the objectives.

Provisional assessment of Programmed Activities in Job Plan for a whole-time contract:

- The balance between Direct Clinical care Activities and Supporting Programmed Activities will be agreed with the candidate as part of the initial job planning process.
- The standard full time job plan will consist of 10 programmed activities of which up to 1.5 will typically be SPAs. The Trust will initially allocate 1.5 SPAs for appraisals, CPD, mandatory training, job planning etc. A further 1 SPA may be allocated for formal audit, formal research and formal undergraduate and post-graduate education activity and supervision. Permission from your Service Director/Medical Director must be sought for participation in external NHS activities and once agreed these should be recorded in your job plan.

Mentoring for New Consultants

The Trust supports the principle of mentoring for all new consultants and has plans to formally incorporate this into Trust policy in the near future.

Provisional Timetable

The following provides an outline of the expected clinical activity and clinically related activity components of the job plan which occur at regular times in the week. Agreement should be reached between the appointee and their Service Director with regard to the scheduling of all other activities, including the Supporting Professional Activities. Upon appointment the consultant will be given a specific "work programme" detailing the initial allocation of direct clinical care activities and supporting activities. This timetable is indicative; the definitive timetable will be agreed by the Trust and the appointee and subject to regular review.

Day	Time	Location	Work	NHS Activity Code	Number of PAs
Monday	0800-1200	NNUH	On-call inc Triage round and GP calls (alt weeks) PCI (alt weeks)	DCC	0.5
	1300-1700	NNUH	PCI	DCC	0.5
Tuesday	0830-1230	NNUH	Not at work (alt weeks) PCI (alt weeks)	DCC	0.5
	1300-1400	NNUH	Ward round	DCC	0.25
	1400-1500		Patient admin	DCC	0.25
	1500-1700		CPD	SPA	0.5
Wednesday	0830-1230	JPUH	Travel to JPUH ACU and ward 2 round	DCC DCC	0.188 0.812
	1300-1700	JPUH	Referrals Admin Travel	DCC DCC DCC	0.5 0.312 0.188
Thursday	0830-1230	JPUH	Travel to JPUH Clinic Admin	DCC DCC DCC	0.188 0.5 0.312
	1330-1730	JPUH	CPD Patient admin Travel	SPA DCC DCC	0.25 0.562 0.188
Friday	0830-1230		Not at work		
	1330-1430	NNUH	Cardiothoracic MDT	DCC	0.25
	1430-1530		Patient Admin	DCC	0.25
Saturday Sunday	1530-1700		Ward round	DCC	0.375
Additional agreed activity	Additional PCI lists are available as additional activity and are paid as WLI				
Predictable on-call work	1 in 8 weekends and weekdays	NNUH	0800-1000 triage ward round 1 in 8 week days and 1 in 8 Saturdays inc 1000-1700 PCI list *	DCC	0.6 *(time off in lieu Fri and Mon after on call week end)
Unpredictable on-call work	1 in 8	NNUH			1.4
Clinical Governance	Once per month	NNUH	1300-1700	SPA	0.25
TOTAL PAs	Category A 5% on call supplement				10

Commented [GT(1): Maybe add 30 mins of pt admin at 0800

Person Specification

JOB REQUIRMENTS	ESSENTIAL	DESIRABLE
Qualifications	<p>Full GMC Registration</p> <p>Entry on the GMC Specialist Register</p> <p>Via;</p> <ul style="list-style-type: none"> • CCT (Proposed CCT date must be within 6 months of the interview) • CESR or • European Community Rights 	<p>MD/PhD</p> <p>Current ALS</p>
Aptitudes	<p>Independent in percutaneous coronary intervention, including PPCI.</p> <p>Good communicator.</p> <p>Capable of working in a multi-disciplinary team.</p> <p>Enthusiasm for service development and teaching.</p> <p>Demonstrates understanding and commitment to Equality, Diversity and Inclusion.</p>	<p>Expertise in more advanced PCI including any of the following: Rotablation, IVUS / OCT, bifurcations, chronic total occlusions.</p> <p>Previous responsibility for service improvement.</p> <p>Management skills</p>
Experience	<p>Applicants who are Nationals from another European country or elsewhere overseas would have to show equivalence to the 5 years training period in the National Health Service required for the specialty training and expertise in children's safeguarding</p>	<p>Experience in research or published papers in area of special interest</p>
Interests	<p>Commitment to develop an appropriate special interest</p>	
Circumstances	<p>Flexible outlook on working hours.</p> <p>Must live within a 15-mile radius of the base Trust or 30 minutes travelling time.</p> <p>Ability to travel across multi-sites whilst public transport may not be available.</p>	
Communications and Language Skills	<p>Ability to communicate effectively with clinical colleagues, colleagues in pathology and support staff.</p> <p>Ability to present effectively to an audience, using a variety of methods, and to respond to questions and queries.</p>	<p>Good presentation skills.</p>

Applicants who are Nationals from another European country or elsewhere overseas would have to show equivalence to the 5 years training period in the National Health Service required for the specialty.

It is essential that all Trust employees will adhere to, and follow good infection control practices, as detailed in the Trust's Infection Control Manual and other related policies and guidelines

About the Trust

The Norfolk & Norwich University Hospital NHS Foundation Trust (NNUH) is one of the busiest teaching trusts in England. We serve over 900,000 people across Norfolk, North Suffolk and surrounding areas for specialist services. In 2016/17 our 7,500 members of staff delivered 816,000 outpatient appointments, 90,000 day cases and 90,000 inpatient admissions from our two hospitals.

- The Norfolk and Norwich University Hospital is located on the Norwich Research Park and serves the population of Norfolk and Norfolk Suffolk and further afield for specialist services. It opened in 2001 and is a 1,200 bed teaching hospital with state-of-the-art facilities. We provide a wide range of secondary and tertiary services, including Accident and Emergency. The trust will be commemorating 250 years of a hospital in Norwich in 2021.
- Cromer and District Hospital is located in Cromer on the North Norfolk coast and serves the North Norfolk population. It was redeveloped in 2012 to replace the 1930s-founded hospital. We provide a wide range of consultant-led outpatient services, day case operations and a Minor Injuries Unit (MIU). The trust is commemorated 150 years of a hospital in Cromer in 2017/18.

Our vision is to 'provide every patient with the care we want for those we love the most', Our PRIDE values support our vision and guide the behaviour of everything we do.

- **People-focused:** We look after the needs of our patients, carers and colleagues, to provide a safe and caring experience for all.
- **Respect:** We act with care, compassion and kindness and value others' diverse needs.
- **Integrity:** We take an honest, open and ethical approach to everything we do.
- **Dedication:** We work as one team and support each other to maintain the highest professional standards.
- **Excellence:** We continuously learn and improve to achieve the best outcomes for our patients and our hospital

Our strategy, agreed in 2016, is based on four key objectives:

- We will be a provider of high quality healthcare to our local population
- We will be the centre for complex and specialist medicine for Norfolk and the Anglia region
- We will be a recognised centre for excellence in research, education and innovation
- We will be a leader in the redesign and delivery of health and social care services in Norfolk.

Our clinical services are structured across four divisions offering a wide range of careers to new staff of all disciplines. Our four divisions are Medicine, Surgery, Women's and Children's, and Clinical Support Services. We always strive to hit the highest standard in each of these areas, including pioneering treatments and the best career development for employees. In addition, the Trust provides a full range of more specialist services such as Oncology and Radiotherapy, Neonatology, Orthopaedics, Plastic Surgery, Ophthalmology, Rheumatology, Paediatric Medicine and Surgery.

- Medicine is comprised of Cardiology; Respiratory Medicine; Stroke; Nephrology; Gastroenterology; Allergy; Older People's Medicine; Endocrinology; Neurology; Rheumatology; Emergency and Acute Medicine; Oncology, Palliative Medicine and Haematology.
- Surgery consists of General and Thoracic Surgery; Dermatology; Urology; Head and Neck; Ophthalmology; Orthopaedics; Plastic Surgery; Anaesthetics, Critical Care, Pain Management, Sterile Services, Theatres and the Day Procedure Unit.
- Women's and Children's Services consists of Obstetrics; Gynaecology; Paediatric Medicine; Paediatric Surgery and Neonatology.
- Clinical Support is comprised of Nuclear Medicine; Cellular Pathology; Laboratory Medicine; Therapeutic and Support Services; Radiology; Pharmacy; and Health Records.

We want to recruit people who are looking for new challenges and opportunities, share our values and want to be part of our vision to provide every patient with the care we want for those we love the most.

The Faculty of Medicine and Health Sciences (FMH)

The Faculty of Medicine and Health Sciences is led by the Pro-Vice-Chancellor of Medicine and Health Sciences, Professor Dylan Edwards, working closely with the Heads of School, and the Associate Deans who share responsibility for the areas of Research; Enterprise and Engagement; Learning and Teaching; Admissions; and Postgraduate Research. These senior academics, together with the Senior Faculty Manager, the Faculty Human Resources Manager, and the Faculty Finance Manager, form the Faculty Executive. Teaching is organised through the Faculty's two Schools of study, comprising Health Sciences and Norwich Medical School, assisted by a Centre for Inter-professional Practice.

The School of Health Sciences

On 1st August 2014, the Schools of Nursing Sciences and Rehabilitation Sciences at the University of East Anglia (UEA) came together to create a new School of Health Sciences. The School's purpose is to resolve health challenges through the advancement of knowledge and interdisciplinary working. This innovative development has built on the strong reputation of the two Schools and creates an outstanding learning environment for students; fostering cutting edge research and offering opportunities for real innovation in enterprise development.

The School of Health Sciences encompasses a family of interrelated disciplines; midwifery, all fields of nursing, operating department practice, paramedic science, physiotherapy, occupational therapy and speech and language therapy. Research is focused on developing solutions to future global health challenges, which may arise as a consequence of our life style choices (e.g. obesity, diabetes); living longer with long term conditions and the need for systems, services and training models to adapt to different health care needs in the future.

The school has a clear vision and strategy to be a leading international academic force, improving the quality of healthcare through research and education. The School's academic structure is designed to secure the delivery of this strategy. Staff belong to one of three health challenge units which drive innovation in research, teaching and learning in three theme areas: reforming health systems; promoting family and community health and living well with long term conditions. The groups foster a collaborative ethos and serve as an academic 'home' community for those with related interests from a variety of professional backgrounds.

There are currently over 1300 undergraduate, pre-registration students and around 1200 post registration and postgraduate students taking a variety of modules and courses, including the flagship NIHR Masters in Clinical Research. The success of the School is reflected by the popularity of its programmes and a number of measures of esteem. The School is ranked 5th for nursing and midwifery and 7th for health professions in the Guardian University Guide (2015) and has recently climbed four places to 8th place for nursing in the Complete University Guide (2015).

The Norwich Medical School

The Norwich Medical School was established at UEA in 2001 and has over 200 members of academic, research and support staff – and a large number of active NHS secondees and honorary appointees – from a wide range of disciplines (including medical specialties, biological sciences and a range of social and statistical disciplines, including health economics, clinical psychology, epidemiology and medical statistics). The School has grown with a current entry each year of 168 students. Its first students graduated in 2007 and since then the School has been in the top 10 of all medical schools on the National Student Survey on three occasions, the Prescribing Skills Assessment pass rate is over 97%; the Situational Judgement Test is among the top scores nationally and the Preparedness to Practice and Core Skills Acquisition are consistently top 5. In 2014, 2015 and 2016 the school was shown to have produced some of the best prepared Foundation doctors, demonstrated through national data provided by the GMC following their annual survey of all doctors in training.

The Schools' research focus is on developing translational research themes that answer important health questions, from an understanding of the basic mechanisms and genetics of disease through to clinical trials and from there to incorporation into clinical guidelines and evaluation within the broader health care community.

The Medical School has a vision to build a clinical and translational research programme of international standing based on the existing strengths of the Medical School, UEA, The Norfolk and Norwich University Hospital and the Norwich Research Park. The presence of three BBSRC research institutes on the Norwich Research Park (Institute of Food Research, John Innes Centre, The Earlham Institute (formerly the Genome Analysis Centre or TGAC) provides unique opportunities not available to other comparable medical schools and in 2018 the Quadram Institute will also open its doors. Preventive medicine is a major goal for 21st century medicine. The role of diet in the prevention of a wide spectrum of disease will be a particular focus of research within the Medical School. Incorporated with this will be parallel strategies to understand the epidemiology and health economic impact of the conditions studied.

Areas of research within the Medical School include:

- Cancer Studies
- Clinical Science and Trials
- Dementia
- Epidemiology
- Gastroenterology and Gut Biology
- Health Economics
- Health Services Research
- Medical Microbiology
- Musculoskeletal Science
- Nutrition
- Psychological Sciences

Norwich Medical School is housed on East (main) campus in the Norwich Medical School Building, and on West Campus in the new £20m Bob Champion Research and Education Building, which opened in late 2014, adjacent to the Norfolk and Norwich University Hospital, providing outstanding facilities for staff and supporting clinically orientated research.



Norwich Research Park

The Norwich Research Park is a partnership between the NNUH, UEA and four independent world-renowned research institutes, namely the John Innes Centre, Quadram Institute Bioscience and The Genome Analysis Centre (all strategically funded by the Biotechnology and Biological Sciences Research Council (BBSRC) and The Sainsbury Laboratory to the Gatsby Charitable Foundation. The BBSRC is itself a partner as is the John Innes Foundation.

The Norwich Research Park is home to around 30 science and IT based businesses. With over 11,000 people including 2,700 scientists and an annual research spend of over £100 million; the Norwich Research Park is Europe's leading centre for research in food, health and the environment.

The main strength of Norwich Research Park is the concentration of world-leading scientists coupled with the capability for multidisciplinary research. The vision of the Norwich Research Park partners and local government stakeholders is to develop a thriving science and innovation business park over the next decade by supporting

spin-out and start-up companies and through attracting inward investment from large corporate organisations involved in science and technology.

Norwich Research Park aims to deliver solutions to the global challenges of healthy ageing, food and energy security, sustainability and environmental change.

It is an international centre of excellence in life and environmental sciences research with world-class expertise in the research and development pipeline from genomics and data analytics, global geochemical cycles and crop biology, through to food, health and human nutrition.

Our science transcends conventional boundaries by forging interdisciplinary links, thereby driving innovation, enterprise and promoting economic growth, and particularly underpinning a new bioeconomy.

Quadram Institute

The Quadram Institute is the name of the new centre for food and health research to be located at the heart of the Norwich Research Park, one of Europe's largest single-site concentrations of research in food, health and environmental sciences. The new £81.6m facility to house the Quadram Institute opened in 2018.



The new world leading centre for food and health research will bring together the Institute of Food Research, the NNUH's regional gastrointestinal endoscopy facility and aspects of the UEA's Norwich Medical School and the Faculty of Science.

Due to population expansion combined with people living longer and the need to screen a broader age range for diagnostic and potential preventative reasons the NNUH will be doubling its capacity for bowel screening.

The dedicated unit and world leading research facilities will be located in the Quadram Institute. The Quadram Institute's mission will be to develop solutions to

worldwide challenges in human health, food and disease. The concept for the institute is to enable a step-change in food and health science research by providing new insights and accelerating innovation that will deliver new foods and treatments as well as proactive health and lifestyle interventions, for the benefit of society and the bio-economy.

Its creation underlines the collaboration of the four founding partners and reflects its strategy to work across four research themes: the gut and the microbiome (the gut flora); healthy ageing; food innovation; and food safety. These research themes will link closely to the world-class plant and crop research at the John Innes Centre and bioinformatics at The Genome Analysis Centre, both also located at the Norwich Research Park, creating a powerful plant-food-health pathway to deliver clinically-validated strategies to improve human nutrition, health and wellbeing. The Quadram Institute will work closely with the food industry, healthcare and allied sectors to transfer its scientific knowledge into practice.

Norwich Radiology Academy

The Trust is home to the Norwich Radiology Academy, run on behalf of the Department of Health and Royal College of Radiologists. The academy, one of only three in the country, is also located on the Norwich Research Park in the Trust's Cotman Centre and provides a ground breaking approach to radiology training in the UK.

Education and Training

The Trust has an outstanding reputation for providing a good quality education and excellent clinical experience for trainees. The large catchment population provides a wealth of clinical material. Most departments have well-developed in-house teaching programmes and there are many examples of locally developed skills courses including Basic Surgical Skills, MRCS training and Minor Surgical Skills courses as well as more specialised courses such as for the FRCS (Orth). There is an established system of educational supervision and assessment for Foundation Programme and Core Training.

The Trust has one of the best-equipped Postgraduate Centres in the country. There is an excellent lecture theatre and library as well as seminar rooms and clinical skills laboratories within the Centre which is currently situated within the Hospital and in the new Bob Champion Research and Education Building.

There are opportunities for trainees to do an MSc in Health Sciences with the University of East Anglia. A diploma in clinical skills is being developed in collaboration with the University, aimed at the Core Training grade. There is an excellent local GP VTS scheme and this, and good quality educational programmes in NANIME, provide strong links with local GPs. For all these reasons Norwich is able to attract good quality candidates to fill training posts and eliminate many of the problems of recruiting into shortage specialties.

The Trust provides individual consultants with a budget to support additional training and CPD. A large number of consultants have active involvement in external College, regional or national activities.

Research and Development

The Trust encourages all consultants to become involved with research. This is facilitated by the proximity of the Norwich Research Park.

There is a joint UEA and NNUH Director of Research & Innovation (Helen Lewis) and a joint research office which currently monitors nearly 200 new research applications per year. There is a Clinical Trials Unit based partly in the hospital and partly at the University. The Trust hosts the Clinical Research Network: Eastern (CRN). Our recruitment to clinical trials is consistently above target.

General Conditions of Appointment

The Trust requires the successful candidate to have and maintain full registration with the General Medical Council, NHS Indemnity and private cover if appropriate. The appointee is advised to maintain membership of a Medical Defence Organisation for professional duties not included within the NHS Indemnity Scheme.

Consultants are required to have continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are expected to undertake administrative duties that arise from these responsibilities. Specifically, Consultants will co-operate with the Service Directors to ensure timely and accurate production of discharge letters and summaries of patients admitted under their care. "Timely" will, as a minimum, be the meeting of standards agreed between the Trust and the Purchasers.

The successful candidate will normally be required to reside within 15 miles of the main hospital base or 30 minutes travel time.

The appointee will be accountable managerially to the Service Director and professionally to the Medical Director of the Trust.

The main terms and conditions of employment relating to this appointment will be those set out in the national handbooks of the Terms and Conditions of Service of Hospital Medical and Dental Staff and, as appropriate, of the General Whitley Council. Consultants will normally be appointed on the bottom of the consultant salary scale except where they have recognised seniority at a consultant level.

The appointee may be required to undergo a medical examination prior to appointment and will be required to attend the Occupational Health Department within one month of commencement. She/he will also be required to comply with the Trust's policies and procedures concerning Hepatitis B, details of which will be supplied to candidates shortlisted for posts that would involve exposure prone procedures

The post is exempt from the provisions of section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975. Applicants are, therefore, not entitled to withhold information about convictions, which for other purposes are "spent" under the provision of the Act, and in the event of employment any failure to disclose such convictions could result in dismissal, or disciplinary action by the Trust. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.

In accordance with the Protection of Children Act 1999, Criminal Justice and Court Services Act 2000 and Care Standards Act 2000 (Part VII – Protection of Vulnerable Adults, the Trust has a legal duty to safeguard children and vulnerable adults in its care from the potential risk of associating with persons with previous convictions involving children and vulnerable adults. In order to carry out checks on those persons having access to children and vulnerable adults, the Trust will use the Disclosure and Barring Service (DBS). The Trust therefore requires all medical staff successful at interview to complete and submit a Disclosure Application Form, and any offer of employment will be subject to a satisfactory Enhanced Disclosure check being returned from the DBS.

It is essential that all Trust employees will adhere to, and follow good infection control practices, as detailed in the Trust's Infection Control Manual and other related policies and guidelines

All Trust staff have a statutory duty to safeguard children in their care and promote the welfare of children and young people. Staff are expected to know about the Trust's safeguarding procedures which can be found on the intranet. Staff must be familiar with the signs and symptoms of abuse and know what to do if any such concerns are raised.

The Trust is a no smoking hospital and smoking is not permitted on any of the Trust's premises.

Contacts for Further Information

Candidates requiring further information are invited to contact the following:

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