

*Living Well, Caring Well, Working Together*

**CONSULTANT  
GASTROENTEROLOGIST  
with an interest in IBD**

(10 sessions per week)

Job Description

## PART A – THE JOB ITSELF

**Post title:** Consultant Gastroenterologist with an interest in IBD

**Base location:** University Hospital of Wales (UHW)

The appointment of this new full-time NHS post is part of a substantial investment in Gastroenterology and Endoscopy by WHSCC and Cardiff and Vale University Health Board (UHB).

It has been created to work in a dedicated multidisciplinary IBD team across C&V but primarily based in UHW. Whilst working towards this the new post will **not contribute to the acute general medical intake** but will provide out of hours emergency endoscopy and weekend cover for Gastroenterology and Hepatology inpatients as part of a rota with colleagues, and will also participate in a rota for inpatient care during weekdays. We are aiming to introduce an 'acute consultant of the week' over the next year and the successful post holder will contribute to this.

The IBD team consists of 5 IBD nurses, 4 consultants currently, 1 specialist associate, 1 senior clinical fellow, an IBD pharmacist, and IBD admin support and an IBD service manager. We have 4 dedicated IBD surgeons, histopathologist and GI radiologist who are part of the wider MDT and we have a dedicated IBD infusion room at UHL run by our infusion nurses and admin. Our fellow post has been recognised as a BSG approved post, due the combination of secondary and tertiary care we provide. We hold transition clinics with the paediatricians and joint clinics with the colorectal surgeons. We also run a hot clinic in the assessment area of our infusion unit, led by our SA. There are twice weekly MDTs (one with whole team and one with medical team to discuss complex/biologics patients). Dr Durai also heads up the research part of our IBD service, in which many of our patients enrol and get early access to treatment.

The successful candidate will join 16 other Consultants in Gastroenterology / Hepatology (12 with an interest in luminal Gastroenterology and four in Hepatology) in Cardiff.

The post will be based at the University Hospital of Wales but may also have some duties at the University Hospital of Llandough. The two hospital sites are located approximately six miles apart: with UHW on the east side of the city and UHL on the west side. Gastroenterology, Hepatology and Endoscopy across both sites are managed in a single Directorate within the Division of Medicine. The UHB is currently undertaking a review of its services and the locations at which they are undertaken; it is therefore important to be aware that work patterns may change and the place(s) of duties modified.

Suitable applicants should be competent (JAG accredited or equivalent) in diagnostic gastroscopy and colonoscopy.

In view of the fact that the Health Board is currently undertaking a review of its services and the locations at which they are undertaken, it is important to be aware that work patterns may change and the place(s) of duties modified.

### **Accountability:**

The post holder will be professionally accountable to the Medical Director and managerially accountable to the Clinical Board Director.

This post sits within the Gastroenterology Directorate which forms part of the Medicine Clinical Board.

|   |                       |
|---|-----------------------|
| Clinical Board Director:                      | Mr Alun Tomkinson     |
| Clinical Board Head of Operations & Delivery: | Louise Platt          |
| Clinical Director (Deputy):                   | Dr Brijesh Srivastava |
| Directorate Manager:                          | Nathan Williams       |

## **The Hospitals**

### University Hospital Llandough

University Hospital Llandough is a Teaching Hospital with 453 beds currently in use. The hospital is situated five miles from the centre of Cardiff. The acute medical intake is managed within the recently refurbished Medical Emergency Assessment Unit (MEAU) attached to an emergency ward facility. Medicine is represented by clinicians with an interest in Respiratory Medicine, Gastroenterology, Clinical Gerontology, Diabetes & Endocrinology and Clinical Pharmacology.

In addition to standard services offered, the hospital also provides specialist services including Mental Health, elective orthopaedics, the Therapeutics & Toxicology Centre and regional poisons unit. The hospital also provides some services not available at the other major site, such as the CF Unit. UHL functions as the bowel cancer-screening hub with all screening colonoscopy procedures and most complex/ advanced endoscopic procedures also undertaken on this site.

### University Hospital of Wales

The University Hospital of Wales is a 1000-bedded teaching hospital with over 200 inpatient medical beds. Medical patients are accommodated within seven dedicated medical wards (including Medical Decisions Unit) plus the Medical Assessment Unit, which was built as part of the new state-of-the-art Emergency Unit area - an extremely busy department with approximately 100,000 attendances per year.

In addition to the medical subspecialties, there is a large tertiary Critical Care Unit with Level 2 and Level 3 beds. The hospital manages a number of services of a regional and sub-regional nature, namely Cardiology, Cardiothoracic Surgery, Neurology, Neurosurgery, Medical Genetics, Bone Marrow Transplantation and Renal Transplant. Cardiff University's School of Medicine is based on the site and consequently the hospital is regarded as the major teaching hospital within Wales.

## **Names of Senior & Consultant members of the Department**

### University Hospital Llandough

#### **Gastroenterology (see later for further specialist interest etc)**

|                |                                     |
|----------------|-------------------------------------|
| Dr JT Green    | Gastroenterology                    |
| Prof S Dolwani | Gastroenterology                    |
| Dr J Turner    | Gastroenterology / General Medicine |
| Dr C Tibbatts  | Gastroenterology / General Medicine |
| Dr R Ramaraj   | Gastroenterology / General Medicine |



Dr H Haboubi  
Dr P Harborne

Gastroenterology / General Medicine  
Gastroenterology / General Medicine

### **Others**

Dr R Sabit  
Dr H Davies  
Dr I Ketchell  
Dr J Duckers  
Dr D Lau  
Dr S O'Mahony  
Prof M D Stone  
Dr S White  
Dr S Fernandez  
Dr P Gupta  
Dr S Ahmad  
Dr L D George  
Dr L M Evans  
Dr J Platts  
Dr N Agarwal  
Prof S Wong  
Dr C Krishna  
Dr A Thomas  
Dr N Junglee  
Dr L Grey

Respiratory Medicine / General Medicine  
Respiratory Medicine / General Medicine  
Respiratory Medicine / Cystic Fibrosis  
Respiratory Medicine / Cystic Fibrosis  
Respiratory Medicine / Cystic Fibrosis  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Diabetes / General Medicine  
Diabetes / General Medicine  
Diabetes / General Medicine  
Diabetes / General Medicine  
Diabetes / General Medicine  
Clinical Pharmacology / General Medicine  
Clinical Pharmacology / General Medicine  
Acute Medicine  
Acute Medicine / Clinical Pharmacology

### **University Hospital of Wales**

#### **Gastroenterology (see later for further specialist interest etc)**

Dr D Durai  
Prof AJ Godkin  
Dr L Sunderraj

Gastroenterology / General Medicine  
Hepatology  
Hepatology / General Medicine

Dr B Srivastava  
Dr T Pembroke  
Dr K Edwards  
Dr A Withanachchi

Hepatology / General Medicine & Deputy Clinical Director  
Hepatology / General Medicine  
Gastroenterology / Intestinal Failure / Acute Medicine  
Gastroenterology / General Medicine

### **Others**

Dr H Hughes  
Dr J Underwood  
Dr M Gillett  
Dr B Hope-Gill  
Dr S Barry  
Dr K Pink  
Dr A Buttress  
Dr A Roberts  
Dr A Rees  
Prof C Dayan  
Dr R E Morse  
Dr H G M Shetty  
Dr A Johansen  
Dr K E Davis  
Dr B Mohamed

Infectious diseases  
Infectious diseases / Acute Medicine  
Respiratory Medicine / General Medicine  
Respiratory Medicine / General Medicine  
Respiratory Medicine / General Medicine  
Respiratory Medicine / General Medicine  
Respiratory Medicine / General Medicine (CD – Medicine)  
Diabetes / General Medicine  
Endocrinology / General Medicine  
Endocrinology / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine  
Care of the Elderly / General Medicine

|               |  |
|---------------|--|
| Dr G Menon    | Care of the Elderly / General Medicine |
| Dr C Thomas   | Care of the Elderly / General Medicine |
| Dr T Ahmed    | Care of the Elderly / General Medicine |
| Dr M Davies   | Renal Medicine / General Medicine      |
| Dr S Riley    | Renal Medicine / General Medicine      |
| Dr S Griffin  | Renal Medicine                         |
| Dr H Bolusani | Acute Medicine                         |
| Dr A De Lloyd | Acute Medicine                         |

### Summary of other Medical Staff in the Department

Our inpatients (up to 16) at UHW are supported by 3 SPR's, 2 FY2's and 2 FY1's across both hepatology and luminal teams.

The number of trainees in the Health Board varies but there are currently 5 Specialty trainees in Gastroenterology (3 at UHW and 2 at UHL).

We are however hoping to move to an acute model over the next year, where all gastroenterology defined patients will be managed on the acute UHW site in ring-fenced beds, with short stay beds available at UHL for planned admissions, with a gastroenterology referral system.

We have also agreed a 'right-sizing' project, whereby we will recruit additional staff to manage the increased demand and subsequently frequency of rotas will change with recruitment. The review of services and the implementation of Government initiatives may result in revision to junior staffing levels and support.

### Other Relevant Staff

There are 6 clinical endoscopists who scope within the Health Board – Claudio Buggiotti (OGD), Rachael Edwards (OGD, colonoscopy and BSW), Karen Wright (OGD) Helen Ludlow (colonoscopy), Tina Jones (colonoscopy) and Natalia Fumis (colonoscopy).

Supporting staff include 5 IBD specialist nurses, GI / hepatology Specialist Nurses, nutrition nurses, pharmacist and dietician.

Gastroenterology became a separate Directorate of Gastroenterology, Hepatology and Endoscopy, within the Division of Medicine in May 2014.

|                                    |   |
|------------------------------------|---|
| <b>Clinical Directors</b>          | <i>To be appointed</i><br>Brijesh Srivastava (deputy) |
| <b>Service Manager</b>             | Vicci Page  |
| <b>Lead Nurse</b>                  | David Pitchforth                                      |
| <b>Senior Nurse</b>                | Beth Jones  |
| <b>Endoscopy lead</b>              | Phil Harbourne  |
| <b>Bowel Cancer Screening lead</b> | Sunil Dolwani   |
| <b>IBD lead</b>                    | Clare Tibbatts  |
| <b>Intestinal Failure lead</b>     | Kate Edwards  |
| <b>Liver lead</b>                  | Brijesh Srivastava                                    |
| <b>Governance lead</b>             | Dharmaraj Durai                                       |



## **Secretarial Support and Office Facilities**

The post holder will be provided with office accommodation together with secretarial support. A computer will be provided with access to the internet and hospital intranet to allow access to the hospital Clinical Portal, Welsh Clinical Portal, CWM and other core IT systems.

## **WORK OF THE DEPARTMENT – GASTROENTEROLOGY & ENDOSCOPY**

The Department provides a comprehensive service for patients with GI disorders from Cardiff and the Vale of Glamorgan – this is a population of approximately 500,000. We also provide tertiary services not available in local hospitals such as complex hepatobiliary disease, EUS, oesophageal manometry, complex IBD, intestinal failure and home parenteral nutrition and advanced endoscopy including EMR and ESD. The ERCP service is based at UHW and deals with 450 cases per year of a secondary and tertiary nature. Bowel screening colonoscopy is performed at UHL (4 screening colonoscopists), which is also a regional centre for endoscopy training and training and assessment of potential screening colonoscopists.

There are inpatient wards on both UHW and UHL sites – East 4 in UHL and A7 at UHW. We have a full complement of junior doctors and support staff at both sites.

Gastroenterology outpatient throughput on the two sites is currently approximately 12,000 (3,000 new and 9,000 follow-ups). The endoscopy units perform approximately 13,000 procedures per year.

There is a dedicated consultant delivered endoscopy on-call service (covering UHW & UHL) for upper GI bleeds, running 365 days per year. The consultants are not on the General Medical rota but provide a 7-day a week service for GI patients on both sites.

There are strong links with Cardiff University's School of Medicine, particularly with the Centre for Medical Education, Division of Population Medicine and Division of Infection and Immunology and department of Medical Genetics. We also work closely with the Radiology, Histopathology and Surgical Departments.

Oncology services are based at Velindre Hospital, with Palliative Care teams present on both sites and based at a local Hospice (Holme Tower).

### Endoscopy Units

The number of endoscopy procedures has increased greatly over the last few years. In 2018-19, over 13,000 diagnostic and therapeutic procedures were performed. There is a service need to significantly increase this further over the next few years to keep pace with growing demands.

### UHL

The endoscopy unit at UHL was opened in 2008. A fourth procedure room was opened in 2016 to deal with increased demands. The unit has been designed to meet JAG requirements for privacy and dignity and provides optimal patient flow. It is a local and tertiary Bowel Cancer Screening Centre. The procedure rooms are very well equipped with all modern equipment. There is a state-of-the-art Health Board wide computerised reporting system with image and video capture (CWM), which can also be accessed remotely through any networked computer. 2 further Endoscopy rooms have been approved for funding and will be completed by October 2023.



Currently, 46 endoscopy lists take place per week including 3 bronchoscopy lists and 3.5 bowel- cancer screening lists. It is likely that weekend endoscopy working will take place as part of the pandemic recovery plan.

The endoscopy service at UHL is widely regarded as a tertiary level centre for complex endotherapy including upper and lower GI EMR, ESD as well as the usual therapeutic endoscopy procedures and colonic stents. There is an interest and expertise in image-enhanced endoscopy & IBD, Barrett's oesophagus surveillance and surveillance of familial GI cancer. UHL is a local Bowel Cancer Screening Centre. It is also the designated National Referral Centre for complex polypectomy within the Bowel cancer Screening programme for Wales, population 3.3 million. A regionally commissioned RFA service for South Wales commenced in March 2019. UHL was one of the sites undertaking and demonstrating live endoscopy procedures at BSG Endolive 2015. UHL hosts training and assessment/accreditation for Bowel Screeners and has three 'scope guide' image enhancers. Other equipment includes magnification scopes, Digital imaging (NBI & BLI etc).

### UHL

The endoscopy unit has been redeveloped to provide a JAG compliant environment and has two endoscopy rooms. There is a high inpatient demand due to the presence of a busy surgical intake as well as interventional and other on-site tertiary services. 19 endoscopy lists take place per week including two EUS lists and daily inpatient lists. In addition to this, five ERCP lists take place in the radiology department.

### Departmental meetings

#### **UHL**

|                            |  |
|----------------------------|--|
| Monday lunchtime           | GI Radiology meeting                                       |
| Monday 5-6 pm              | Bowel cancer screening complex polyp MDT (alternate weeks) |
| Tuesday lunchtime (weekly) | Endotherapy MDT meeting                                    |
|                            | UGI cancer MDT   |
| Wednesday lunchtime        | IBD MDT  |
| Thursday lunchtime         | Biologics MDT  |
| Friday lunchtime           | Departmental meeting                                       |

#### **UHW**

|                         |  |
|-------------------------|--|
| Monday lunchtime        | Nutrition and Intestinal Failure MDT                   |
| Tuesday lunchtime       | Departmental business meeting & clinical presentations |
|                         | Local & regional UGI cancer MDT                        |
| Wednesday morning       | Colorectal Cancer multidisciplinary meeting            |
| Thursday lunchtime      | GI and general radiology meeting                       |
| Tuesday/ Friday morning | Intestinal Failure MDT ward round                      |
| Friday lunchtime        | Hepatobiliary multidisciplinary meeting                |

There is also a medical and surgical Grand Round on Wednesday lunchtime at UHW and a Medical Unit Round on Friday mornings at UHW in term time. The appointee will be expected to attend the monthly directorate Quality, Safety and Experience meetings.

### On-call

The gastroenterology and hepatology consultants provide a 7-day inpatient cover service, with Saturday and Sunday morning working (on a 1 in 15 rota with the new post), covering GI and hepatology specialty retrieval, review of unstable and new hepatology and gastroenterology in-patients. There is a 24-hour 7-day on-call GI bleeding endoscopy service (1 in 16 rota with this new post) that will coincide with weekends on call. These ratios are subject to change with new colleague appointments or departures.

### Academic commitments

Members of the Directorate are encouraged to pursue their own research programmes commensurate with what is expected of Consultant Physicians within a major teaching Hospital. The Directorate also has a commitment to undergraduate and postgraduate medical education, which the post-holder will contribute towards.

### Gastroenterology / Hepatology Consultants

There are 16 Gastroenterology and Hepatology consultants in the Health Board, all of whom perform endoscopy. The Gastroenterology Department will consist of 17 consultants with this post: nine on the UHW site (eight NHS Consultants, one University Professor) and 7 on the UHL site (six NHS Consultants and one University Reader). Many hold leadership roles locally and nationally, together with Gastroenterology and Endoscopy specific interests.

| Name                       | Position  | Endoscopy related position(s)   | Gastroenterology / Endoscopy interest   |
|----------------------------|---|---|---|
| <b>Based mainly at UHL</b> |   |   |   |
| Professor Sunil Dolwani    | Consultant Gastroenterologist & Professor of Gastroenterology, Cardiff University | QA Lead Bowel screening Wales.<br>Bowel cancer screening colonoscopist.<br>Local lead screening colonoscopist.<br>Pathways lead – National Endoscopy Program, Wales.<br>R&D lead – Gastroenterology and Endoscopy directorate | Advanced upper & lower GI tract therapeutic endoscopy, including complex EMR and ESD.<br>Detection and management of advanced polyps & early cancers.<br>Bowel Cancer screening.<br>Endoscopy Screening and Early detection in cancer research. |
| Dr John Green              | Consultant Gastroenterologist & Clinical Reader                                   | Bowel cancer screening colonoscopist.<br>Endoscopy trainer<br>Reader in Medical Education, Cardiff University   | Late GI effects post radiotherapy.<br>Bowel cancer screening.<br>Lower GI endotherapy.<br>Endoscopy QA.<br>Teaching and training.   |
| Dr Jeff Turner             | Consultant Gastroenterologist   | Capsule endoscopy lead.<br>Endoscopy trainer.   | Capsule endoscopy.<br>Upper and lower GI endoscopy.<br>Teaching and training.   |
| Dr Phil Harbourne          | Consultant Gastroenterologist   | Endoscopy training lead UHL<br>Endoscopy trainer  | BSW<br>Complex endoscopy  |
| Dr Clare Tibbatts          | Consultant Gastroenterologist   | Endoscopy trainer   | Upper and lower GI endoscopy procedures including GI bleeding and stents.<br>IBD Clinical Lead  |

|                            |  |  |   |
|----------------------------|--|--|---|
| Dr Raji Ramaraj            | Consultant Gastroenterologist  | Advanced endoscopist<br>Bowel cancer Screening | Advanced upper & lower GI tract therapeutic endoscopy, including complex EMR's.<br>FIT implementation lead<br>Endoscopy research. |
| Dr Hasan Haboubi           | Consultant Gastroenterologist  | Endoscopy trainer<br>RFA clinical lead         | Barrett's oesophagus and upper GI therapeutics including RFA/EMR.<br>Endoscopy/Barrett's research.                                |
| <b>Based mainly at UHW</b> |  |  |   |
| Prof Andrew Godkin         | Consultant Hepatologist  | Endoscopist                                    | Hepatology<br>Research – viral hepatitis, cancer<br>ERCP<br>Upper GI endoscopy including varices management.                      |
| Dr Dhamaraj Durai          | Consultant Gastroenterologist  | Endoscopy Trainer                              | IBD (lead)<br>Upper & lower GI endoscopy.<br>Teaching & training.   |
| Dr Lawrence Sunderraj      | Consultant Gastroenterologist / Hepatology                             | Endoscopy Trainer                              | Hepatology<br>Upper & lower GI endoscopy including varices.<br>Teaching & training.   |
| Dr Brijesh Srivastava      | Consultant Gastroenterologist / Hepatology<br>Deputy Clinical Director | Endoscopy Trainer                              | Hepatology (lead)<br>Varices management,<br>Upper & lower GI tract endoscopy  |
| Dr Tom Pembroke            | Consultant Hepatologist  | Endoscopist                                    | Hepatology<br>Varices management,<br>Upper & lower GI tract endoscopy   |
| Dr Kate Edwards            | Consultant Gastroenterologist  | Endoscopist                                    | Acute medicine<br>Nutrition / IF  |
| Dr Achini Withanachchi     | Locum Consultant Gastroenterologist                                    | Endoscopist                                    | IBD<br>General gastroenterology   |
| Dr Alex Kokrashvili        | Consultants Gastroenterologist   | Endoscopist                                    | IBD<br>General Gastroenterology   |

In addition, there are 12 surgeons who undertake endoscopy lists in the two units:

Colorectal surgeons - Prof J Torkington (Bowel Cancer Screening), Mr M Davies, Mr S Phillips, Mr C Morris, Lt Col L Davies, Mr J Horwood, Mrs J Cornish, Mr J Ansell

Upper GI Surgeons – Mr G Blackshaw, Mr A Foliaki, Miss J Witherspoon, Mr T Abdelrahman



## **MAIN DUTIES AND RESPONSIBILITIES**

### **Clinical:**

- To provide with Consultant colleagues (as appropriate) a service in the speciality to the hospitals so designated, with responsibility for the prevention, diagnosis and treatment of illness and promotion of health.
- To have continuing responsibility for the care of patients in your charge (as appropriate) in liaison with Consultant colleagues and for the proper functioning of the department in line with the Operational Policy and Strategic Plan (as amended from time to time).
- To be responsible for the professional supervision and management of junior medical staff. If appropriate the post holder will be named in the contracts of junior staff as the person responsible for overseeing their training and as an initial source of advice to such doctors regarding their careers.
- To participate in continuing medical education in ways which are acceptable to the Chief Executive. The UHB supports the requirements for continuing professional development and is committed to providing time and financial support for these activities in line with the UHB Policy.
- To participate in and contribute to Clinical Audit in line with the Health Board's policy on the implementation of Clinical Governance.
- Domiciliary consultations (as appropriate) to Cardiff and Vale residents in accordance with the Health Board Policy.
- Out-of-hours duties: Saturday and Sunday morning rounds cover emergency gastroenterology and hepatology, and the successful candidate will contribute to this. This will be coordinated so that endoscopy on-call at weekends (Fri/Sat/Sun) will coincide with emergency ward rounds, but for one third of weekends on emergency rounds, another consultant will do the emergency endoscopy duties. Weekday endoscopy on call will be at 1 in 16, but these ratios are subject to change.
- Any other duties with other agencies that have been agreed with the employing Health Board.

### **Teaching:**

- To be responsible for carrying out teaching, examination and accreditation duties as required and for contributing to and participating in postgraduate and continuing medical education activity and audit activities, locally and nationally.
- All Consultants teach and train at all levels of undergraduate and postgraduate education. There is a very active postgraduate training department, which organises medical and dental education led by the Dean of Postgraduate Medical & Dental Education.
- The successful candidate will be expected to assist in organisation and delivery of undergraduate gastroenterology teaching.

**Research:**

- Consultants are encouraged to participate fully in current research projects and to initiate projects of their own. Excellent research facilities are available on site.

**Management:**

- To co-operate with local management in the efficient running of services and expected to share with consultant colleagues in the medical contribution to management within your supporting professional activities. In addition, it should be noted that a system of Clinical Directorship is in operation and close liaison with appropriate colleagues will be required.
- To work within the financial and other restraints decided upon by the Health Board. Additional expenses of any kind will not be committed without the approval of the appropriate manager/budget holder. All changes in clinical practice, workload or development requiring additional resources must have prior agreement with the Health Board.
- Subject to the Terms and Conditions of Service you will be expected to observe policies and procedures of the Health Board, drawn up in consultation with the profession where they involve clinical matters.
- To pursue local and national employment and personnel policies and procedures in the management of employees of the Health Board.
- To ensure that arrangements are in place for adequate medical staff to be available in relation to the treatment and care of patients.
- To conform to best management practice in respect of patient activity and waiting lists.

**PROVISIONAL WORK PROGRAMME**

(as required under paragraph 30A of the Terms and Conditions of Service)

**PROPOSED WEEKLY TIMETABLE OF PROGRAMMED DUTIES** (i.e. regular scheduled NHS activities in accordance with the criteria detailed under the Amendment of the National Consultant Contract in Wales). The duties described here are provisional and will be the subject of annual review and will form a composite part of the JOB PLAN which will be agreed between the post holder and the Chief Executive or a nominated deputy.

The standard Consultant contract in Wales is based upon a 10-session job plan, but there is opportunity to take on further sessions and roles pending discussion. which will be subject to annual review at job planning meetings. All sessions are annualised (42 lists/clinics etc per year = 1 DCC session, to account for annual and study leave).

The successful candidate will be expected to work with a team approach to maximise productivity within endoscopy. Like existing consultants, there will be some flexibility from week to week with scheduling of sessions.

**Potential timetables** (based on a 10 session job plan, with further endoscopy lists being available by mutual agreement):



### Ward week

|                           | MON       | TUE                       | WED | THURS                  | FRI                       |
|---------------------------|-----------|---------------------------|-----|------------------------|---------------------------|
| <b>MORNING</b>            | Retrieval | Consultant led ward round | OPC |                        | Consultant led ward round |
| <b>AFTERNOON</b>          | OPC       |                           | MDT | MDT<br>OP<br>Endoscopy |                           |
|                           |           |                           |     |                        |                           |
| On call 1:16, wards 1:5.5 |           |                           |     |                        |                           |

Overall (based on a 10-session job plan with a further endoscopy list being available by mutual agreement):

| Activity                                 | Number of sessions |
|--|--------------------|
| <b>DCC's</b>                             | <b>8.65</b>        |
| Endoscopy lists                          | 1.5                |
| Clinic (news/follow ups/virtual reviews) | 2                  |
| Patient Related Administration           | 0.75               |
| MDT meetings                             | 0.6                |
| On call Duties                           | 1.1                |
| Vetting/retrieval                        | 1                  |
| IBD Clinical queries                     | 1                  |
| Ward round                               | 0.7                |
| <b>SPA's</b>                             | <b>2.0</b>         |
| CPA                                      | 1.5                |
| ES/CS                                    | 0.5                |
| <b>Total</b>                             | <b>10.65</b>       |

### Notes:

1½ sessions will be allocated within the job plan for Core Supporting Professional Activities. Additional SPA time will be arranged by mutual agreement between the Consultant appointee and Directorate where additional SPA time / activity can be identified and evidenced in specific SPA roles. The notional split of DCC/SPA time will be subject to Job Plan Review and agreement. If sufficient outcomes from SPA time cannot be evidenced, SPA sessions may be reallocated to DCC sessions by agreement. A full session is normally 3¾ hours duration.

Mentoring arrangements are available in the Directorate and a senior clinician may be provided to the successful candidate if desired. The UHB also runs a Corporate Consultant Induction Programme for new Consultant appointees.



Direct clinical care (DCC) covers:-

- Emergency duties (including emergency work carried out during or arising from on-call)
- Operating sessions including pre and post-operative care
- Ward rounds
- Outpatient clinics
- Clinical diagnostic work
- Other patient treatment
- Public health duties
- Multi-disciplinary meetings about direct patient care
- Administration directly related to patient care e.g. referrals, notes etc.

Supporting professional activities (SPA) covers:-

- Training
- Continuing professional development
- Teaching
- Audit
- Job planning
- Appraisal
- Research
- Clinical management
- Local clinical governance activities





### **Date when Post is Vacant**

Immediately.

### **CONTACT DETAILS FOR ENQUIRIES**

Candidates who may wish to see the Department(s) involved are invited to contact:-

Dr Clare Tibbatts, Consultant Gastroenterologist

☎ (029) 2182 5583

E-mail: [Clare.Tibbatts@wales.nhs.uk](mailto:Clare.Tibbatts@wales.nhs.uk)

Dr Dharmaraj Durai, Consultant Gastroenterologist

☎ (029) 2182 4572

E-mail: [Dharmaraj.Durai@wales.nhs.uk](mailto:Dharmaraj.Durai@wales.nhs.uk)

Dr Brijesh Srivastava, Deputy Clinical Director for Gastroenterology

E-mail: [Brijesh.Srivastava@wales.nhs.uk](mailto:Brijesh.Srivastava@wales.nhs.uk)

Shortlisted candidates are also encouraged to contact :-

Mr Alun Tomkinson, Clinical Board Director for Medicine

E-mail: [Alun.Tomkinson@wales.nhs.uk](mailto:Alun.Tomkinson@wales.nhs.uk)

and any other senior official deemed appropriate.

**CON1455-Gastro IBD**





## PERSON SPECIFICATION

| Criteria            | Essential   | Desirable   | Measured by                           |
|---------------------|---|---|---------------------------------------|
| Qualifications      | <ul style="list-style-type: none"> <li>Full GMC registration with a licence to practise</li> <li>On Specialist Register for specialty / Specialty Registrar with CCT / CESR (Combined Programme) due within 6 months of interview date</li> <li>MRCP or equivalent</li> </ul>   | <ul style="list-style-type: none"> <li>MD or PhD thesis</li> </ul>      | Application and pre-employment checks |
| Experience          | <ul style="list-style-type: none"> <li>Broad training and experience in Gastroenterology</li> <li>JAG accreditation or equivalent in diagnostic upper and lower GI endoscopy</li> </ul>   | <ul style="list-style-type: none"> <li>Dye spray colonoscopy</li> </ul> | Application & interview               |
| Skills              | <ul style="list-style-type: none"> <li>Evidence of effective team and multidisciplinary working</li> <li>Effective and demonstrable communication skills in written and spoken English adequate to enable effective communication about medical topics with patients and colleagues</li> <li>Effective IT (computer) skills</li> <li>Self-motivated and flexible approach to work</li> <li>Values aligned to those of the Health Board</li> </ul> |   | Application & interview               |
| Clinical Governance | <ul style="list-style-type: none"> <li>Evidence of participation in clinical audit and understanding role of audit in improving medical practice</li> <li>Understanding of clinical risk management and clinical governance</li> <li>Evidence of proactive engagement with appraisal and revalidation (or equivalent)</li> </ul>  |   | Application & interview               |



| Criteria           | Essential   | Desirable   | Measured by                           |
|--------------------|---|---|---------------------------------------|
| Research           | <ul style="list-style-type: none"><li>• Evidence of active research interests with evidence of initiating, progressing and concluding research projects with publication</li><li>• Ability to critically appraise research</li></ul>  |   | Application & interview               |
| Teaching           | <ul style="list-style-type: none"><li>• Evidence of teaching medical students and junior doctors</li></ul>  | <ul style="list-style-type: none"><li>• Organisation of (undergraduate and / or postgraduate) teaching programmes</li></ul> | Application & interview               |
| Management         | <ul style="list-style-type: none"><li>• Commitment to participating in and understanding of the management process</li><li>• Evidence of effective leadership skills</li></ul>  | <ul style="list-style-type: none"><li>• Evidence of management training</li></ul>   | Application & interview               |
| Other requirements | <ul style="list-style-type: none"><li>• Satisfactory immigration / right to work status</li><li>• Satisfactory Occupational Health clearance</li><li>• Satisfactory Disclosure (DBS) check or equivalent</li><li>• Travel to other locations to fulfil requirements of the job plan</li></ul> |   | Application and pre-employment checks |

## PART B – THE HEALTH BOARD AND ITS VALUES

Cardiff and Vale University Health Board was established in October 2009 and is one of the largest NHS organisations in the UK. We have a responsibility for the promotion of health and well-being of around 535,000 people living in Cardiff and the Vale of Glamorgan, the provision of local primary care services, running of health centres, community health teams, hospitals – providing treatment and care when health and well-being isn't the best it could be.

We are increasingly focusing the planning and delivery of our care based on neighbourhoods and localities to help ensure people receive care as close to home as possible where it is safe and effective to do so. We also provide specialist services for people across South Wales and in some cases the whole of Wales.

The Health Board also serves a wider population of 2.5 million people across South and Mid Wales and manages a number of services of a regional and sub-regional nature namely cardiology, cardiac surgery, PICU, neurology, neurosurgery, medical genetics, bone marrow transplantation, renal transplant and toxicology. On-site services include 24/7 PCI, stroke thrombolysis, ophthalmology, maxillo-facial, trauma, general medicine, general surgery, urology and paediatrics. From September 2020, University Hospital of Wales was designated as the first Major Trauma Centre to launch in Wales. In 2022-23, the Health Board's total turnover was £1.86 billion and it employs over 16,000 staff.

Phase II of the Children's Hospital for Wales was completed in 2015 and has seen re-development and consolidation of all paediatric specialities into a dedicated Children's hospital with five theatres, PICU, Medical and Surgical Wards OPD, Radiology and an admission and assessment unit.

We are also a teaching Health Board with close links to Cardiff University which boasts a high-profile teaching, research and development role within the UK and abroad; and enjoy strengthened links with the University of South Wales and Cardiff Metropolitan University. Together, we are training the next generation of clinical professionals.

### Living Well, Caring Well, Working Together

Cardiff and Vale University Health Board has an important job to do. We all want to do this to the best of our abilities – but we know that good intentions are not always enough.

At Cardiff and Vale University Health Board our values and example behaviours are:

|  |   |
|--|---|
| <b>We care about the people we serve and the people we work with</b> | Treat people as you would like to be treated and always with <b>compassion</b>                              |
| <b>We trust and respect one another</b>                              | Look for <b>feedback</b> from others on how you are doing and strive for <b>better</b> ways of doing things |
| <b>We take personal responsibility</b>                               | Be <b>enthusiastic</b> and take responsibility for what you do.   |
| <b>We treat people with kindness</b>                                 | <b>Thank</b> people, celebrate success and when things go wrong ask 'what can I learn'?                     |
| <b>We act with integrity</b>   | Never let structures get in the way of doing the <b>right thing</b> .                                       |

Our values guide the way we work and the way we behave with others. Post holders will be expected at all times to behave in accordance with our values demonstrating commitment to the delivery of high-quality services to patients. These can also be closely aligned with the principles of 'Good Medical Practice' standards as published by the General Medical Council.

The Health Board is committed to ensuring that the staff they employ have values and behaviours which are aligned with those of the organisation, thereby ensuring that appointees will be able to make an ongoing contribution to the positive culture of the organisation and meet the required standards of behaviour to patients, carers and the public and to one another.

As part of the UHB's commitment to Values Based Recruitment, interview candidates can expect to be asked questions which encourage them to talk about themselves and provide insight into their personal values and behaviours.

### **NHS Wales Core Principles**

The NHS is about people, working with people, to care for people. NHS Wales values all its staff – from Wales, the UK, EU and non-EU foreign nationals. As part of NHS Wales' ongoing commitment to strengthen the values and behaviours of Health Boards and Trusts, the following Core Principles have been developed which further help staff respond better to the demands for its services:-

- ✓ We put our patients and users of our services first
- ✓ We seek to improve our care
- ✓ We focus on wellbeing and prevention
- ✓ We reflect on our experiences and learn
- ✓ We work in partnership and as a team
- ✓ We value all who work for the NHS

These Core Principles describe how everyone within NHS Wales is expected to behave and help us all to achieve the highest quality in everything we do.

## The Cardiff and Vale UHB Structure

Chief Executive: Suzanne Rankin

Executive Medical Director & Responsible Officer: Professor Meriel Jenney  
Deputy Medical Director: Dr Richard Skone

Medical & Dental services are delivered via 7 main Clinical Boards and the All Wales Medical Genomics Service as listed below:

|                             |  |
|-----------------------------|--|
| Medicine                    | Surgery                                |
| Specialist Services         | Clinical Diagnostics & Therapeutics    |
| Children & Women's Services | Primary, Community & Intermediate Care |
| Mental Health               | All Wales Medical Genomics Service     |

***Cardiff and Vale University Health Board - A Great Place to Work and Learn***





## **PART C – SUPPORTING INFORMATION**

### **REVIEW OF THIS JOB DESCRIPTION IN RELATION TO JOB PLANS**

This job description will form a composite part of a Job Plan which will include your main duties, responsibilities and expected outcomes. The Job Plan will be agreed on an annual basis between you and your Clinical Director and confirmed by the Clinical Board Director. In cases where it is not possible to agree a Job Plan, either initially or at an annual review, the appeal mechanism will be as laid out in the Amendment of the National Contract in Wales.

Annual job plan reviews will also be supported by the Consultant appraisal system which reviews a Consultant's work and performance and identifies development needs as subsequently reflected in a personal development plan.

### **MAIN CONDITIONS OF SERVICE**

- This post is covered by the terms and conditions of service, including pay and leave entitlement, which apply to medical and dental staff employed in Wales as amended from time to time. Details of these may be obtained from the Medical Workforce Department.
- The post is pensionable unless the appointee opts out of the scheme or is ineligible to join. Remuneration will be subject to deduction of pension contributions in accordance with the Department of Health regulations.
- Candidates unable for personal reasons to work full-time will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis, in consultation with consultant colleagues and the Medical Director.
- The salary applicable is on the Consultant pay scale (Wales) and will be specified in the contract. Consultants in Wales paid on one of the first three points of the substantive Consultant pay scale also receive a Wales recruitment incentive payment.
- The Consultant appointed will be required to live in a location which is within reasonable travelling time from the place of work as agreed with the Clinical Director.
- The post holder is required to travel as necessary between hospitals / clinics. A planned and cost-effective approach is expected.
- The post holder is required to comply with the appropriate Health and Safety Policies as may be in force including commitment to an effective risk management process. As part of this, all staff are required to adhere to the Health Board's Infection Prevention & Control policies and procedures to make every effort to maintain high standards of infection control at all times thereby reducing the burden of Healthcare Associated Infections including MRSA. The post holder is therefore required to attend mandatory infection control training provided for them by the Health Board and to take active steps to prevent and reduce hospital acquired infections.



- Reimbursement of removal and associated expenses will only be offered in exceptional circumstances following consideration and agreement by the Medical Director and in accordance with the criteria as laid out in the Health Board Policy.
- The Consultant will be required to maintain their private residence in contact with the public telephone service.
- There must be no conflict of interest between NHS work and private work. All Consultants undertaking private practice must therefore demonstrate that they are fulfilling their NHS commitments.
- You must provide us with evidence which is acceptable to the Occupational Health Department, that you are not a carrier of Hepatitis B. This would normally be a pathology report from a laboratory in the UK or alternatively a report from another NHS Occupational Health Department within the UK. It will not be possible to confirm this appointment unless this condition is met. Before starting work you may therefore need to attend the Occupational Health Department for assessment. If this is not possible, then you must attend on the day you start work.
- The Health Board will require the successful candidate to have and maintain full registration with a licence to practise with the General Medical Council / General Dental Council and to abide by professional codes of conduct.
- As you will only be indemnified for duties undertaken on behalf of the Cardiff and Vale University Health Board, you are strongly advised to ensure that you have appropriate Professional Defence Organisation Cover for duties outside the scope of the Health Board, and for private activity within the Health Board.
- The Consultant appointed will be required to possess an appropriate Certificate of Completion of Training / Certificate Confirming Eligibility for Specialist Registration.
- So far as is practicable the Consultant appointed will be expected to provide cover for annual and study leave of Consultant colleagues.
- When first appointed, the Health Board has discretion to fix the starting salary at any of the two next incremental points above the minimum of the scale by reasons of special experience, service in HM Forces or in a developing country, and qualifications.
- Under the provisions of the General Data Protection Regulation (GDPR), it is the responsibility of each member of staff to ensure that all personal data (information that is capable of identifying a living individual) relating to patients, staff and others to which they have access to in the course of employment is regarded as strictly confidential. Staff must refer to the Health Board's Data Protection Policy (available via the Health Board intranet) regarding their responsibilities.



- **Appraisal / Revalidation**

All licensed doctors / dentists who are registered with the General Medical Council are required to 'revalidate' every five years in order to maintain their licence to practise. To inform this process, it is important that GMC licensed doctors / dentists participate in the UHB's annual appraisal reviews which are based on the General Medical Council's 'Good Medical Practice' principles and include a Patient and Peer Multi-Source Feedback process. The post holder will be expected to use the Medical Appraisal & Revalidation System (MARS).

- **The Ionising Radiation (Medical Exposure) Regulations 2017**

The Ionising Radiation (Medical Exposure) Regulations 2017 impose a legal responsibility on Health Boards for all staff who refer patients for medical radiation exposures such as diagnostic x-rays to supply sufficient data to enable those considering the request to decide whether the procedure is justified.

- **Disclosure of Criminal Background of Those with Access to Patients**

It is the policy of the Health Board that in accordance with the appropriate legislation, pre-employment Disclosure Checks are undertaken on all newly appointed Doctors and Dentists. The Disclosure & Barring Service is authorised to disclose in confidence to the Health Board details of any criminal record including unspent and spent convictions, cautions, reprimands and final warnings. Applicants being considered for this post must provide this information on the application form before they can be considered. Any information disclosed will be treated in the strictest confidence and all circumstances will be considered before any decision is reached. The successful applicant will be required to complete a DBS Disclosure Check application form and to provide the appropriate documentation. Applicants should be aware that a refusal to comply with this procedure may prevent further consideration for the post.

- **Equality and Diversity**

All staff have a personal responsibility under the Equality Act 2010 to ensure they do not discriminate, harass, or bully or contribute to the discrimination, harassment or bullying of any colleague(s) or visitors or condone discrimination or bullying because of someone's 'protected characteristics'. These protected characteristics are: age, religion, sexual orientation, belief or non-belief, sex, disability, race, gender identity, pregnancy and maternity, marriage and civil partnerships. The line manager and post holder will be responsible for promoting diversity and equity of opportunity across all areas of your work. This applies to service delivery as an employee and for anyone who you may be working with, whether they are patients, family/carer, visitors or colleague. You will be made aware of your responsibilities to uphold organisational policies and principles on the promotion of equality valuing diversity and respecting people's human rights as part of your everyday practice.

- **Dignity at Work**

The UHB condemns all forms of bullying and harassment and is actively seeking to promote a workplace where employees are treated fairly and with dignity and respect. All staff are requested to report any form of bullying and harassment to their Line Manager or to any Director of the organisation. Any inappropriate behaviour inside the workplace will not be tolerated and will be treated as a serious matter under the UHB Disciplinary Policy.



- **Welsh Language**

All employees must perform their duties in strict compliance with the requirements of the current UHB Welsh Language Scheme and take every opportunity to promote the Welsh language in their dealings with the public. The UHB also encourages employees to use their available Welsh language skills.

- **No Smoking**

To give all patients, visitors and staff the best chance to be healthy, all UHB sites including buildings and grounds are smoke-free. Staff are encouraged to promote and actively support our No Smoking Policy. Advice and support on quitting smoking is available for all staff and patients.

## **GENERAL INFORMATION FOR APPLICANTS**

- Applicants who are related to any member or senior office holder of the Cardiff and Vale University Health Board should clearly indicate in their application the name of the member or officer to whom related, and indicate the nature of the relationship. A candidate deliberately concealing such a relationship would be disqualified.
- Candidates are asked to note that canvassing of any member of the Advisory Appointments Committee or the Employing Health Board will disqualify them. This should, however, not deter candidates from approaching any person for further information about the post.
- Any offer of appointment will be subject to the receipt of three satisfactory references. Note that applicants who are already in a substantive Consultant / Honorary Consultant post or in a Locum Consultant post for more than 12 months will be required to provide the details of their current / most recent Medical Director (or equivalent) as an additional referee.
- The nature of the work of this post is exempt from the provisions of Section 4 (2) of the Rehabilitation of the Offenders Act 1974 (Exemption Order 1975). Applicants are, therefore, not entitled to withhold information about convictions under the Act and, in the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Health Board. Any information given will be completely confidential and will be considered only in relation to an application for positions to which the Order applies.
- Travelling expenses will be reimbursed for only one pre-interview visit, and only then to those candidates selected for interview. Shortlisted candidates who visit the District on a second occasion, say on the evening prior to interview, or at the specific request of management, will be granted travel and appropriate subsistence expenses on that occasion also. In the case of candidates travelling from abroad, travelling expenses are payable only from the point of entry to the United Kingdom. Reimbursement of expenses shall not be made to a candidate who withdraws their application or refuses an offer of an appointment.

For further information about our Health Board and its surrounding area, please refer to the '[Welcome to Cardiff and University Health Board](#)' document.