

Consultant Physician in Respiratory Medicine

Job Description



10 PA Full Time

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SECTION 1 – About the Trust

North Middlesex University Hospital NHS Trust is a medium sized District General Hospital based in Edmonton in Enfield, North London. We serve a diverse multicultural population largely from the London boroughs of Enfield and Haringey. Many of our patients live in wards that are within the 5% most deprived in the UK and a large proportion of our patients were born abroad. This makes it both a fascinating and a challenging hospital to work in.

Over the last decade we have rebuilt almost all of the hospital and now have facilities that we are proud to work in. We employ just over 3,000 staff, more than half of whom live locally. We encourage apprenticeships from the local community and work closely with our local Health Watch.

The Edmonton Infirmary opened in 1910 and replaced the Union Workhouse that had been founded on the site in 1842. It was renamed as North Middlesex Hospital in 1920. In 2011 our new building opened placing all of the hospital under a single roof for the first time. In 2013 our new maternity and neonatal unit were added.

We are primarily an emergency led hospital with more than 90% of our bed days being used for patients admitted via our emergency and ambulatory units. As well as offering everything you would expect from a major acute hospital we have a number of tertiary services treating patients with HIV and Sickle Cell Disease and a large cancer and radiotherapy service. We also run our local community Sexual Health Clinics.

We are proud of our staff and want to ensure their training allows them to provide excellent clinical care. We are also a training unit for medical students from UCL and St George's University Grenada, and for nursing and midwifery students from Middlesex and City Universities.

In our most recent CQC report (2023) we are still found to 'require improvement', but the report noted some achievements since the previous report, with a positive shift in culture and quality. Our Trust vision and objectives show our aspirations to develop towards 'Good' and 'Outstanding'.



Each day, on average,
the trust cares for



Trust Strategy

The key objectives for the Trust are based on our vision to provide outstanding care for local people:

- Excellent outcomes for patients
- Excellent experience for patients and staff
- Excellent value for money.

The organisation will continue to work in developing and enhancing the skills of the staff it employs. This will be in line with the patient safety strategy to deliver improved quality in clinical practice and also through enhancing the clinical management and leadership skills within the organisation. The clinical strategy for the next 5-10 years is anchored on delivering high quality emergency clinical services and networked specialist care to our local population in partnership with our local CCGs and other healthcare providers.

Trust Values and Expected Behaviours

You are part of Team North Mid, a workforce over 3,500 strong. A big part of working here is having a culture and values that help us to achieve our vision of delivering outstanding care to local people.

We are caring:

What it means	Our behaviours
<ul style="list-style-type: none">• We are compassionate and take time out to check on colleagues and patients• We are understanding and recognise each other as individuals• We are committed to improving our community for colleagues, patients and carers	<ul style="list-style-type: none">• Showing empathy• Being curious• Showing humility• Listening to others

We are fair:

What it means	Our behaviours
<ul style="list-style-type: none">• We respect and understand each other's differences and backgrounds• We are consistent with providing realistic, clear expectations and constructive feedback• We are always looking for opportunities to develop all our staff and our services	<ul style="list-style-type: none">• Being consistent• Listening to others• Supporting each other

We are open:

What it means	Our behaviours
<ul style="list-style-type: none">• We embrace change and continuously challenge ourselves and colleagues to create meaningful improvement• We ask for help when we need it; we offer help when we see a colleague struggling and we are always open to challenge• We actively look for new ways of working and explore new partnerships across teams, divisions and organisations	<ul style="list-style-type: none">• Speaking up• Being curious• Learning from mistakes

These values are extremely important to us, and we expect everyone who works at the Trust in any capacity to share and uphold these values. Further information on the Trust's values is available on our website.

Management Structure

The Executive team are: -

Chief Executive Officer	Dr Nnenna Osuji
Medical Director	Dr Victoria Jones
Chief Nurse	Sarah Hayes
Chief Operating Officer	Shola Adegoroye
Director of Strategic Development	Richard Gourlay
Chief Finance Officer	Bimal Patel
Director of Human Resources	Mark Vaughan

The operational structure comprises three divisions:

- Medicine and Urgent Care Services
- Surgery and Cancer Associated Services
- Women's, Children's and Clinical Support Services

Each Division has a Divisional Clinical Director, a Divisional Director of Operations and a Divisional Head of Nursing. This team is supported by Clinical Directors, Service Managers and Matrons.

SECTION 2 – About the Department

The post is within the Medicine & Urgent Care Division

The Divisional Management Team

Divisional Clinical Director	Dr Jayne Lim
Divisional Director of Operations	Rosalyn Little
Divisional Director of Nursing	Pedro Silva

RESPIRATORY MEDICINE

The Respiratory Department is located adjacent to Outpatient area 1 on the ground floor. There is co-location of our secretarial office, consulting rooms, lung function laboratory and TB nurse room which enhances efficiency and patient experience. Radiology services including x-ray and CT are provided on the same floor.

There is a bronchoscopy / endoscopy suite on the first floor above the Respiratory department, and a dedicated office shared by the respiratory consultants is located close to this suite. Regular meetings of the respiratory group occur in the respiratory consultant office, or if appropriate in other rooms nearby.

Management team:

Service Manager:	Ivor Davies
Matron:	Binu Mani
Clinical Director:	Dr Michael Debney

Medical Staffing:

Our department consists of 8 (7.4 WTE including AMU work) substantive consultants.

Consultant	Special Interests
Dr Bhagy Jayaraman	Interstitial lung disease, post-COVID
Dr Stefan Lozewicz	Tuberculosis
Dr Zaheer Mangera	Lung cancer, Asthma
Dr Ian Moonsie	COPD, non-invasive ventilation
Dr Jessica Potter	Tuberculosis
Dr Chris Valerio	Oxygen, Clinical Lead

Grade	Numbers in post
Registrar (St 4+)	1
IMT 3	2
IMT 1-2	3
Foundation Year 1 doctors	2

Administration

Office accommodation with appropriate IT facilities will be made available within the department together with secretarial support. All consultants are required to check their emails on a regular basis.

The respiratory consultant body has a lunchtime meeting on Fridays. This includes periodic meetings for issues including service development, mortality data, and governance.

All consultants are expected to participate in the management of their own department and the hospital as a whole and will be encouraged to develop their management and leadership skills.

SECTION 3 – About the Post

Post Details

Job Title	Locum Consultant Physician in Respiratory Medicine
Division	Medicine and Urgent Care
Professionally Accountable to	Medical Director
Responsible to	Clinical Director & Divisional Director
Type of contract	Locum / Fixed Term Contract (FTC)
Number of PAs	10 PAs
Base	North Middlesex University Hospital

Background to the Post

This locum post has arisen due to one of our consultants retiring and is for a period of six to twelve months (tbc). The advertised post reflects the need to replace the retiree's outpatient provision and is proposed as a full time post with 10 PAs. The principal role of this post will be to support outpatient services, in particular sleep medicine and lung cancer services. There is opportunity for flexible working and for the post-holder to maintain interests outside the trust.

We are looking for consultant physicians with experience of working in: respiratory medicine, who are able to deliver excellent care to our patients and work with us to further develop our service to meet the needs of our population.

Duties of the Post

General Responsibilities as Consultant in Respiratory, General, and Acute Medicine The following is not an exhaustive or exclusive list of the duties of a consultant. The appointee is expected to:

- Deliver day-to-day clinical care and leadership in Respiratory outpatient clinic
- Provide training, supervision, and support to doctors in training, medical students, and other health professionals working in respiratory medicine.
- Lead in on-going development of clinical guidelines in respiratory medicine, audit and other key aspects of the clinical governance agenda.
- Work with consultant colleagues and nursing staff to ensure efficient use of Trust's resources and contribute actively to clinical governance in the department and to development of quality enhancement projects in the unit

- Show flexibility and undertake different appropriate clinical tasks at the request of the clinical manager, as the need arises.
- Actively participate in the department's teaching program and undertake supervision, teaching and training of medical trainees and other multi-professional staff, in line with guidance from the relevant Royal Colleges or specialty bodies.
- Actively participate in clinical guidelines development, audit and CPD.

SPA activity may additionally include:

- Educational supervision of junior doctors
- Lead quality and service roles within the department
- Any additional SPA activity will be agreed with the post holder and additional Quality & service SPA allocation will be given

Indicative Job Plan & Workload

An indicative job plan/timetable for this post with indicative Programmed Activities (10 PAs) is provided below.

For a whole-time contract (10 PAs) the basic DCC / SPA split is:

- Direct Clinical Care: 7.5 PAs on average per week
(*Clinical activity, clinically related activity, predictable & unpredictable emergency work*)
- Supporting Professional Activities: 1.5 core SPAs on average per week
(*to meet all aspects of the 4 General Medical Council Good Practice domains, CPD, audit, teaching & research*) and 1.0 Quality and Service SPAs to be agreed with appointee

Therefore, the indicative job plan described below is based on a DCC / SPA ratio of 3:1 PAs.

Job plans are reviewed annually, and applicants are encouraged to study the provisions of the Consultant Contract for England 2003 under which this post is offered. The indicated post is for 10 Programmed Activities however, there remains considerable flexibility within the department and the division therefore changes can be made subject to review.

Outpatients - General respiratory outpatient clinics follow a standard pattern of four new (30 minute) & eight follow up (fifteen minute) patient slots for a four-hour clinic. They are planned as face to face with allowance for telephone slots. Virtual clinics can be set up with five cases per hour.

Inpatients – the job plan is based on the post-holder working on S2 ward and providing care for fifteen patients (half of the ward) with an allocation of fourteen hours each week. Based on six consultants in post this will be for an expected 18 weeks (maximum of 26 weeks) of the year. Typically, this will be in blocks or two to three weeks at a time. Currently, the workload on S2 is predominantly respiratory but there are likely to be a proportion of general medicine inpatients.

Timetable A, below, is indicative of the workload when working on S2 ward. All consultants attend the radiology meeting and the lung cancer MDT. Indicative administration time is included for outpatient and inpatient activities. Based on a working pattern of 42 weeks of the year (this number being inclusive of the 6.5 weeks of TOIL after weekend), there will be eighteen weeks through the year when there is additional time for virtual clinic, vetting outpatient referrals and reviewing inpatient referrals with one of the registrar (Timetable B).

A	AM (0900-1300)	PM (1300-1700)	Work category
Monday	0900-1300 Ward Round	1300-1400 Admin 1400-1700 OP clinic	2.0 DCC
Tuesday	*0830-1000 Radiology meeting / Cancer MDT 1000-1300 Ward Time	1300-1400 SPA 1400-1630 OP clinic	1.75 DCC 0.25 SPA
Wednesday	0900-1100 Ward Time 1100-1300 Admin	1300-1700 SPA	1.0 DCC 1.0 SPA
Thursday	0900-1200 Ward Round 1200-1300 SPA	1300-1700 OP clinic	1.5 DCC 0.25 SPA
Friday	0900-1100 Ward Round 1100-1300 Admin	*1300-1400 Meeting 1400-1700 SPA	1.0 DCC 1.0 SPA
TOTAL			7.5 DCC 2.5 SPA

* Indicate fixed departmental activities.

Off ward weeks

B	AM (0900-1300)	PM (1300-1700)	Work category
Monday	0900-1100 IP Referrals 1100-1300 Vetting	1300-1400 Admin 1400-1700 OP clinic	2.0 DCC 0 SPA

Tuesday	*0830-1000 Radiology meeting / Cancer MDT 1000-1300 Admin	1300-1400 SPA 1400-1630 OP clinic	1.0 DCC 0.25 SPA
Wednesday	0900-1100 IP Referrals 1100-1300 Virtual Clinic	1300-1700 SPA	1.5 DCC 1.0 SPA
Thursday	0900-1200 Admin 1200-1300 SPA	1300-1700 OP clinic	1.75 DCC 0.25 SPA
Friday	0900-1100 IP Referrals 1100-1300 Admin	*1300-1400 Meeting 1400-1700 SPA	1 DCC 1 SPA
TOTAL			7.5 DCC 2.5 SPA

* Indicate fixed departmental activities.

Weekend working in Acute Medicine Unit (AMU)

At weekends the Respiratory consultants currently fulfil one of the AMU shifts with a current weekend frequency of one in eight including one or two evenings. The evening PTWR components for Friday & Sunday or Saturday alternate with each on call weekend so each has a frequency of one in 16. This involves leading one half of the acute medical unit and undertaking post-take ward rounds. There are typically 40-50 acute medical admissions per 24hrs who are managed jointly with the Acute Medicine team.

- Respiratory consultant AMU weekend:
 - Friday & Sunday OR Saturday evening Post-Take Ward Round 1700-2000 (1 DCC PA each PTWR)
 - Saturday 0800-1700 (3 DCC PAs)
 - Sunday 0800-1700 (3 DCC PAs)
 - Compensatory time off in lieu is typically included following a weekend

On Call Duties

On call duties for this post will be confirmed by the service upon appointment, but this post does not currently include participation in the overnight out of hours on-call rota.

Other Roles and Responsibilities

The post holder will work with colleagues and the Clinical Audit and Effectiveness department to ensure that relevant clinical audit is carried out.

Consultants have continuing responsibility for the care of patients in their charge and for the proper functioning of their department. They are expected to undertake administrative duties associated with the care of their patients and the running of their clinical departments. The appointee will be expected to take responsibility for maintaining their continuing medical education to the standard set by the relevant Royal College.

All consultants are expected to participate in the management of their own Department and the Hospital as a whole and will be encouraged to develop their management and leadership skills. Therefore, it is expected the post holder will make efforts to attend their care group's management meetings where possible.

Education and Training

The North Middlesex University Hospital has gained a reputation for teaching excellence in the region due to our dedicated consultant teachers and a rich variety of clinical cases. As a University hospital of the University of London, the hospital has a substantial commitment to training of medical students from the University College London (UCL) Medical School, and is one of the two centres outside the teaching hospitals for UCL Final MBBS examinations. Many consultants are recognised teachers of UCL. Medical students of St. George's University International School of Medicine in Grenada also attend for varying periods in different specialties. Formal teaching sessions are organised differently in various departments. The post-holder will be expected to teach junior doctors regularly as agreed with the Specialty lead. The hospital has recently redeveloped its education centre with modern facilities, including a dedicated simulation suite and a comprehensive medical library. The Hospital has an excellent reputation for its postgraduate medical education. There are regular FRCS, MRCP, DCH and MRCOG courses held and on-going MRCP training. ALS and other similar courses are conducted locally.

Flexible Job Planning

Job share arrangements and other adaptation of the job plan to the suitable candidate's needs may be accommodated if the evolving service needs can be met.

Other Requirements

Clinical Governance

This appointee is expected to contribute actively to developing clinical governance in our department. The GMC's Good Medical Practice guidelines form the basis of the responsibilities and standards expected of the Trust's consultants. All newly appointed consultants will be issued with an Induction Programme and mandatory training.

It is a condition of employment that all staff have a responsibility for Infection Control. The appointee will therefore be expected to attend mandatory Infection Control courses on

appointment and to participate actively in measures designed to reduce Health Care Associated Infections (HCAIs).

Quality Improvement, Clinical Audit and Guidelines

The Trust considers quality improvement an essential part of everybody's job, particularly for clinical leaders including all consultants. As we implement our new QI strategy, we will provide our leaders with training in QI methodology and adapt our clinical audit programme to fit into this. As a consultant you are expected to contribute actively to this activity.

You should audit your departmental and personal practice in keeping with national guidance such as NICE and keep local guidelines up to date. The Trust is currently redesigning its intranet to provide a single port of access to all guidelines.

Research

The post does not currently have any research commitments however there will be opportunity to develop a research agenda, particularly in the framework of the RFL Group, UCLP and the HSL partners.

Management

The Hospital Consultant body meets monthly as the Medical Staff Committee to discuss issues affecting the Medical Staff as a whole.

Revalidation

All consultants are expected to participate in timely revalidation with the support of the department and hospital. The post holder will be supported by a yearly appraisal process.

Mentoring

All consultants will be offered the opportunity to have an assigned mentor to support them in their role and development.

SECTION 4 – General Information/Conditions of Employment

Employees of the Trust are expected to maintain a safe working environment and observe obligations under organisational and departmental Health & Safety Policies, maintaining awareness of safe practices and assessment of risk.

Employees of the Trust are required and expected to acquaint themselves of all the Trust policies that are relevant to their area of work. The operative policies at any time are available on the Trust Intranet.

The Trust is committed to providing safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report, quickly and confidentially, concerns about the conduct, performance or health of medical colleagues. All medical staff practising in the Trust should ensure that they are familiar with the procedure and apply it.

All Consultants have a continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are required to undertake the administrative duties associated with the care of their patients and the running of their clinical departments. The Consultant will be expected to attend meetings of the appropriate department and CBU as required.

All Consultants are expected to assume responsibility, both singly and corporately, for the management of junior medical staff. In particular, they are expected to be responsible for approving and monitoring junior staff rotas and junior staff locum arrangements, where appropriate. They are also expected to concern themselves with the professional development, both clinical and personal, of their trainees.

Where you intend to undertake private professional services other than such work carried out under the terms of this contract, whether for the NHS, for the independent sector or for another party, the provisions in Schedule 6 of the Terms and Conditions apply.

Reference should be made to the “Code of Conduct for Private Practice” which sets out standards of best practice governing the relationship between NHS work, private practice and fee-paying sessions.

Candidates unable, for personal reasons, to work whole time are invited to apply and 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, the Clinical Lead and the Clinical Director.

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

This appointment is subject to the receipt of a satisfactory medical clearance from the Trust's occupational health department.

The appointee will be expected to provide cover for annual and study leave of their consultant colleagues.

Reimbursement of removal and associated expenses are discretionary and will be subject to agreement by the Trust. There is no guarantee that any reimbursement of expenses will be made.

Each successful applicant will share an office with fellow consultants and be supported by the secretarial pool based in the department.

A copy of the Terms and Conditions – Consultants (England) 2003 is available from Gerry Lambe, Recruitment Manager, Human Resources Department, North Middlesex University Hospital (020 8887 2914) or from www.doh.gov.uk/consultantframework.

Annual Leave

Annual leave is given in accordance with the Terms and Conditions of Service and the Trust Policy relating to Medical and Dental Staff. Whole-time Consultants are entitled to six weeks and two days' leave a year (32 working days) if within 7 years of service, or 6 weeks and 4 days (34 working days) after 7 completed years of service. Annual leave for part-time staff is pro rata this whole-time amount.

Consultants are expected to plan their annual leave well in advance so that their absence is not detrimental to the service. They should give no less than 6 weeks' notice of intention to take leave.

Study and Professional Leave

Study and professional leave are given in accordance with the Terms and Conditions of Service relating to Medical and Dental Staff. Consultants are currently entitled to assistance with expenses associated with approved study leave. It is the current policy of the Trust to assist consultants with reasonable fees and expenses associated with approved continuing medical education (currently up to approx. £500 per annum). Consultants are expected to plan Study Leave in advance so that their absence is not detrimental to the service.

SECTION 5 – Trust Standards and Additional Information

Equality, Diversity and Inclusion

The Trust is committed to fair and transparent recruitment and selection procedures and to providing a workplace where all staff are treated with respect and feel included. It is the aim of the Trust to ensure that no job applicant or employee receives less favourable treatment because of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, or sexual orientation.

Health & Safety

Employees must be aware of the responsibilities placed on them under the Health & Safety at Work Act 1974 to maintain a safe environment for both staff, patients and visitors, to observe obligations under organisational and departmental Health & Safety policies, maintaining awareness of safe practices and assessment of risk.

Data Protection and Caldicott

To obtain, process and use information (held on computer and manual filing systems) in affair and lawful way. To hold person identifiable information for specific registered purposes and not to use, disclose or transfer person identifiable information in any way that is incompatible with the law and Caldicott requirements. To disclose person identifiable information only to authorised persons or organisations as instructed. Email must not be used to transmit person identifiable information between Trust and other premises without advice concerning additional document protection.

Customer Care

The aim of the hospital is to provide patients and clients with the best possible care and services. In order to meet this aim, all our staff are required at all times to put the patient and client first and do their utmost to meet their requests and needs courteously and efficiently. In order that staff understand the principles of customer care and the effects on their particular post and service, full training will be given.

Infection Control

All healthcare workers have an overriding duty of care to patients and are expected to comply fully with best practice standards. You have a responsibility to comply with Trust policies for personal and patient safety and for prevention of healthcare associated infection (HCAI); this includes a requirement for rigorous and consistent compliance with Trust policies for hand hygiene, use of personal protective equipment and safe disposal of sharps. Knowledge, skills and behaviour in the workplace should reflect this; at annual appraisal you will be asked about application of practice measures known to be effective in reducing HCAI.

Confidentiality

Under no circumstances, either during or after the end of your employment (however it is terminated), may you divulge any unauthorised person confidential information relating to the Trust. This includes but is not limited to, information covering patients, individual staff records, industrial relations, financial affairs, contract terms and prices or business forecasts.

Clinical Governance

Staff are expected to provide patients with timely and effective care. Treatment and direct / indirect support must be based on best practice. Everyone is responsible for this and his/her job in the Trust is important in achieving this.

Safeguarding Vulnerable People

It is a basic human right of every child and adult to be protected from harm and NHS Trusts have a fundamental part to play in this. We expect all our staff to recognise signs of vulnerability and to report and act on any concerns in line with policy and guidance contained in 'Working Together - Every Child Matters' and 'No Secrets - guidance on developing multi-agency policies and procedures to protect vulnerable adults from abuse' on which our Trust Policies are based.

Rehabilitation of Offenders

Because of the nature of the work of this post, it is exempt from the Section 4(2) of the Rehabilitation of Offenders Act (1974) by virtue of the Rehabilitation of Offenders Act (Exemption Order 1975). Applicants are therefore not entitled to withhold information about convictions including those which for other purposes are “spent” under the provisions of the Act 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 application for positions to which the order applies.

Disclosure & Barring Service

Posts are offered subject to enhanced clearance from the Disclosure & Barring Service.

Personal Conduct

All staff within the Trust are expected to treat other members of hospital staff with courtesy and respect. The Trust's rules and policies including the disciplinary procedure apply to all staff without exception. The attention of consultant medical staff is drawn to the GMC document “Good Medical Practice”. The Trust will take this into account when considering the conduct of medical staff in relation to any incident.

Security

It is the responsibility of all employees to work within the security policies and procedures of the Trust to protect the patients, staff and visitors and the property of the Trust. This duty applies to the specific work area of the individual and the Hospital in general. All staff are required to wear official identification badges.

Data Protection

This post has a confidential aspect. If you are required to obtain, process and/or use information held on a computer or word processor you should do it in a fair and lawful way. You should hold data only for the specific registered purpose and not use or disclose it in any way incompatible with such a purpose and ought to disclose data only to authorised persons

or organisations as instructed. Breaches of confidence in relation to data will result in disciplinary action.

No Smoking

North Middlesex University Hospital NHS Trust operates a No Smoking Policy and all staff are advised that it is a disciplinary offence to smoke inside or outside Trust buildings or anywhere within the grounds of the hospital.

ADDITIONAL INFORMATION

Prospects of Change

National and local discussions, including sustainability and transformation plans (STPs) may result in changes to the configuration of services over time. This may require changes to work patterns, for example some consultants may future be expected to undertake some clinical sessions in a dedicated elective centre off-site. This may result in changes to the working arrangements for individual consultant staff, but staff will be consulted about specific proposals as it affects them.

Method of Payment

Payment of salary is made into bank account/building society account by direct bank system. Details of a bank account or building society account will be required on the first day at work. There are no facilities for any other form of payment.

Location

Situated in Edmonton, North London with a multi-cultural community, the area provides a wide range of facilities and is close to the heart of London. On-site we offer car parking and restaurant facilities. Central London is easily accessible, with Liverpool Street and Kings Cross approximately 30 minutes away by public transport.

Benefits

Cycle to Work Scheme, season ticket loans, subsidised restaurant facilities, and much more.

Road Access and Public Transport

Situated on the North Circular Road, the hospital is within very easy reach of the M25, M1, A1, A10 and A12. The hospital is situated close to the residential districts of North London including Enfield and Winchmore Hill. Silver Street main line railway station is a 5-minute walk away, with services direct to Liverpool Street Station and Seven Sisters underground Station.

Visits for applicants

Intending applicants are welcome to visit the hospitals (at their own expense). Please contact the department to arrange a visit at the North Middlesex University Hospital. Shortlisted candidates are encouraged to contact the team before being interviewed.

PERSON SPECIFICATION
Locum Consultant Physician in Respiratory & Acute (General) Medicine

<u>Requirements</u>	<u>Essential</u>	<u>Desirable</u>	<u>Method of Assessment</u>
Qualifications/Training	MRCP or Equivalent Full GMC registration with licence to practise	Post Graduate qualification	Application form
	CCST/CCT or equivalent in Respiratory & General (Internal) Medicine and on the specialist register, or within 6 months of CCT date at the time of interview, or evidence of working towards specialist registration via CESR Experience of working in respiratory & acute medicine	Experience in ambulatory emergency care Skills, experience, or qualifications in another specialty	Application form
	Ability to take full and independent responsibility for clinical care of patients		Application form
	Current ALS certification		Application form
Skills & Abilities	Ability to communicate effectively with staff, patients and relatives		Application form and interview
	Evidence of leadership and management experience	Training/qualification in leadership and management	Application form and interview
	Excellent interpersonal and organisational skills		Application form and interview
	Experience of service development and quality improvement initiatives	Posters/Presentations at Regional and National meetings Publications in peer-reviewed journals	Application form and interview
	Ability to work and lead teams in a pressurised clinical environment	Ability to support and motivate staff during periods of pressure	Application form and interview

Knowledge and teaching	Knowledge and participation of clinical audit	Posters/Presentations at Regional and National meetings Publications in peer-reviewed journals	Application form and interview
	Understanding of Clinical Governance		Application form and interview
	Experience on providing high quality training and education to undergraduates and postgraduates	Post graduate diploma in teaching	Application form and interview
Values	Demonstrable ability to meet Trust values		Interview
Other Requirements	Excellent communication skills, both oral and written, and an ability to relate to staff and patients.	Ability to support and motivate staff during periods of pressure	Application form/Interview
	Knowledge of resource management issues.		Application form/Interview
	Computer literate		Application form/Interview
	Willingness to work flexibly as part of a team		Application form/Interview