



## Job Description

<b>Senior Clinical Fellow</b> <b>In</b> <b>Vascular Surgery</b>	
<b>Location</b>	This post is based at Bedford Hospital, which is part of Bedfordshire Hospitals NHS Foundation Trust. The post-holder may be required to work in other outreach clinics and establishments used in the course of Trust business (if necessary for the role).
<b>Post</b>	Full Shift 48 hour rota
<b>Clinical Director</b>	Mr Nadim Noor
<b>General Manager</b>	Ben Gainsford
<b>Service Manager</b>	Kayleigh Spackman

### OUR VALUES:





## Contents:

1. Job Outline
2. Duties & Responsibilities
3. On Call duties
4. Staffing in department
5. Bedfordshire Hospitals NHS Foundation Trust
6. General Information
7. Person Specification



## 1. Job Outline

These vacancies have arisen because of restructuring of the surgical department at the Trust to establish vascular surgery as a distinct specialty. This invitation is to fill two of the 5 new posts which together with a Deanery appointed vascular trainee, will provide a 1:6 OOH non-resident on call rota for vascular emergencies, in addition to supporting a consultant team delivering a safe, effective, responsive but efficient service. The core purpose of the vascular team is to save lives and limbs. We do this by continually working to improve quality of care and patient experience and find innovative solutions to common problems.

The Trust is part of the Bedfordshire, Luton and Milton Keynes Health and Care Partnership (Integrated Care System) and within this the Bedfordshire Care Alliance. As a result of this, the successful candidate may be required to adapt their job plan in the future to work across more than one site within the area; this may also include delivering aspects of care in community settings which supports the Trust's vertical integration strategy.

This post will be suitable for doctors who have:

- completed early years of training in general surgery and are seeking further experience in vascular or
- wish to pursue a career in vascular surgery or
- looking for an opportunity to consolidate their skills and experience to complete the requirement for CESR (Certificate of Eligibility for Specialist Registration).

## 2. Duties and Responsibilities

The aim is to appoint people of varying experiences, at different stages of their careers to maximise the training opportunities. The post holder will perform their clinical duties at the level of a registrar but within the limits of their competence. Their duties may include, leading the ward rounds of inpatients, taking responsibility of all aspects of the care of in patients including the safe, timely discharges and discharge-communication. They will provide leadership and supervision to the junior members of the team and support consultants in outpatient clinics and operating theatres. They will take part in regular MDT and Vascular Grand Rounds, Audit and Clinical Governance Meetings. They will provide an emergency on-call cover (1:6 non-resident OOH).

They must keep accurate record of emergency admissions and referrals and formally handover at the end of their shift. Handover must be formal, should follow the SBAR pattern (Situation, Background, Assessment and Recommendation). Similarly, they must make sure that they have understood the patient's problems and needs when receiving handover from somebody else. They will supervise juniors in writing comprehensive but succinct discharge letters and summaries.

They will be expected to practice within the normal working practices of the unit, follow the care pathways adopted by the vascular team, and work collaboratively for the benefit of patients and be prepared to be accountable for the quality of their work, behaviour and conduct. The appointee will work in accordance with the values of the Trust and Standard Operating Procedures of the vascular team.



The consultants have the overall responsibility for the care of the patients and the postholders will support them in service delivery, engage in formal and informal discussions around the care of the patients. They will provide prompt help and/or opinion on request from another colleague, whether vascular or from other specialty. The post holder will subscribe to, and live the Trust Values of Teamwork, Honesty and Openness, Respect, Inclusivity, Valuing People and Excellence in all communications and conduct.

The postholders will be expected to contribute to the activities of the department and take on other roles and responsibilities as required. They will submit to Trust's yearly appraisal programme as part of the revalidation process.

There is a responsibility for teaching, training, and supervision of junior medical and nursing staff. The Trust is committed to developing new roles and involvement in teaching of undergraduates, nurses and allied health professionals is desirable.

An outline timetable will be provided at the beginning of the appointment which will cover various elements of clinical practice (emergency cover, operating theatre, Endovascular suit, Vascular lab, outpatients and wards). The post-holder will be expected to cover for absent colleagues in an emergency situation (e.g. sickness, injury, instances where an arranged locum does not arrive at short notice and similar situations).

The GMC's Good Medical Practice ([Good medical practice - professional standards - GMC \(gmc-uk.org\)](http://www.gmc-uk.org)) would provides a benchmark for our conduct and medical practice.

### 3. On Call Duties

As outlined above.



## 4. Department of Vascular Surgery

### Staffing in the department:

Consultant	Post	Sub-Specialty interest
Mr N Noor	Clinical Director	Open, Endo
Mr A Chaudhuri	Consultant	Endo, Open
Mr T Mehta	Consultant	Open, Endo
Mr S Ray-Chaudhuri	Consultant	Open
Miss L Fiengo	Consultant	Endo, Deep veins
Mr J Kuriakose	Consultant (locum)	Open
Vacant	Consultant	Open, Endo
Mr V Zymvragoudakis	Consultant	Endo, Open

### Other

Mr P Tisi	Medical Director
Mr A Badawy	Associate Specialist
Nadine Lawrence	Vascular Nurse
Laura Russell	Vascular Nurse
Amit Patel	Vascular Scientist

### Associated Staff:

Kayleigh Spackman	Service Manager
Ben Gainsford	General Manager (Vascular, Urology, T&O)
Sue Brown	Pathway coordinator and PA to Mr Noor, Miss Fiengo and Mr Zymvragoudakis
Lisa Hawkes	PA to Mr Chaudhuri and this post
Sharon Birkin	PA to Mr Mehta, Mr Ray-Chaudhuri and Mr Tisi
Magdalena Szymanska	Secretarial Assistant (Luton & Dunstable Hospital)

**Current Junior Vascular Team:** 2 Specialty Trainees (general surgery), 1 Vascular Trainee, 1 Core Trainee, 4 Foundation Trainees and 1 Trainee Surgical Care Practitioner. The junior doctors participate in general surgery rota and out of hour vascular cover is provided by the on-call team. However, we have been funded to establish a **vascular-specific registrar level rota** in the coming months. These posts would contribute to this establishment. We envisage that the Foundation and Core Trainee level cover would continue to be provided in rotation with the general surgery in the foreseeable future.



## THE WORK OF THE DEPARTMENT

### Vascular Surgery

Based at Bedford Hospital, BLMK Vascular Unit provides a supra district vascular service to Bedford Hospital, Milton Keynes and Luton & Dunstable Hospital catchment areas and is a designated centre for complex arterial interventions (one of the seven in EOE). The department provides the full spectrum of elective and emergency surgery, including endovascular aneurysm repair, urgent carotid endarterectomy, distal bypass and hybrid open/endovascular procedures for peripheral arterial disease, and endo-venous treatment for superficial venous disease.

At present interventional support is provided by a dedicated vascular interventional radiologist; nonvascular interventions are provided by another radiologist. In addition, there are two interventional radiologists at Milton Keynes with vascular and nonvascular practice. The Trust is keen to establish an active interventional radiology department providing a wide range of vascular interventions. We are hoping that an integrated vascular unit and state of the art hybrid interventional facilities may attract appropriate individuals in the future. Over the years, the centre has attracted vascular surgeons with interest in interventional radiology and despite challenges, the centre provides a range of open, endovascular and hybrid treatment for aneurysmal and occlusive vascular disease. The centre also provides, endovascular treatment for complex aortic disease including thoracic aorta and abdominal aorta requiring debranching (chimneys etc.) procedures in addition to routine endovascular aneurysm repair (infrarenal EVAR). There is a desire to extend the programme to include fEVAR procedures pending the development of infrastructure. We are also in the process of starting a deep venous service. The OOH vascular interventions including endovascular repair of the aneurysms are carried out by the vascular surgeons. It is recognised that the newly qualified consultants may not be fully trained in the endovascular and hybrid techniques. Therefore, we would commit to providing mentoring, training and help with targeted fellowship opportunities to support further development.

**On-call Arrangements:** The Clinical Fellows and the Specialty Registrars will provide 1:6 first on call emergency on call rota for vascular surgery only. The OOH component will be on non-resident basis. A free accommodation for overnight stay can be arranged for the candidates who live more than 30 minutes away from the hospital. The vascular surgery is a primarily a consultant delivered discipline, and, though the fellows will be given autonomy according to their abilities, close consultant support and supervision will be given without prejudice. The firm operates as one team; the on-call surgeons are freed of all elective commitments; instead, assuming the responsibilities for the care of all vascular in-patients including elective post-op and new vascular emergencies, when on call. Our use of NCEPOD list has declined significantly over the last two years by shifting almost all of the urgent vascular work to the planned lists. The vascular emergencies like bleeding, acutely ischaemic legs and ruptured aneurysms are still treated on the NCEPOD list. Diagnostic (CT) angiograms are available 24/7 for aortic and peripheral emergencies and vascular laboratory services within the normal working time, five days a week. There are 3 MRI scanners available for urgent scans within



working hours. In addition, there is provision of urgent slots (hot) in the clinics for patients with critical limb ischaemia and stroke/TIA. The on-call team will be required to work with the pathway coordinator and the clinical director to arrange timely operative and IR treatment slots for urgent cases (for example, carotids, critical limb threatening ischaemia).

**Elective** operating lists are staffed by dedicated scrub team who are skilled in endovascular interventions. A stock of commonly used wires, catheters, sheaths and closure devices is kept in theatres. A consignment of EVAR (Medtronic and Cook) devices is available on site. There are five anaesthetists with major interest in vascular anaesthesia; they are closely involved in pre-operative assessment, optimisation and decision making. Vascular Clinical Director is responsible for maintaining standards and quality of the service, supported by weekly vascular MDT and a monthly business meeting. The team follows Vascular Society's QIF for all major vascular interventions.

The other hospitals in the network provide outpatient clinics, diagnostic imaging, and day case venous interventions. Milton Keynes Hospital employs two interventional radiologists who undertake peripheral angioplasties locally. There are no vascular in-patients at either of the two spoke hospitals.

**Endovascular and Interventional Radiology:** There is one interventional radiologist at the hub (Bedford) who provide complex lower limb angioplasty service. The two IR at Milton Keynes have a limited lower limb interventional service, but no formal network arrangements are in place for interventional radiology. Currently out of hour vascular interventional service is provided by the on call vascular surgeon or rarely by referral to one of the tertiary centres in London. The medium to long term vision for the interventional radiology within the BLMK is to establish a 1:6 rota to comply with VSGBI guidance (POVS 2021) and develop an IR strategy to plug several gaps in service provision for example, gastrointestinal haemorrhage, postpartum haemorrhage and out of hours support for complex vascular procedures. However, at present, five of the current vascular surgeons have advanced endovascular skills and undertake their own EVARs and hybrid procedures, including complex lower limb radiological revascularisation. The workload allows for the surgeons to keep their endovascular skills current. Opportunities (mentoring, training and support for targeted fellowships) may be available for candidates who wish to practice and enhance their endovascular skills. For those who are interested, a dedicated peripheral interventional session can be included in the job plan.

**VMDT (MS Teams):** There is a weekly vascular MDT meeting. All cases for surgical and radiological interventions including infra-renal aneurysms are discussed. The consultant in charge of the case is responsible to keep a record of the discussion and treatment plan as well as for the implementation of the plan (Thursday 8AM).

**TMDT (MS Teams):** Thoracic aortic MDT is held once in 6 weeks in collaboration with the Royal Papworth Hospital cardiac surgeons (Thursday 8AM).

**VGR (MS Teams):** There is a weekly vascular grand round to discuss inpatients (Tuesday 1PM).



**AAA Screening Programme:** Bedford Hospital hosts the Bedfordshire, Luton and Milton Keynes AAA Screening Programme and provides treatment to patients with screen detected aortic aneurysms within the quality assured parameters of the national screening programme and vascular society's QIF. Timed pathways exist to assure timely treatment of **all** infra-renal aneurysms within eight weeks of diagnosis (screening) or decision to treat (new/surveillance).

**Critical Care Complex:** Intensive care facilities are available for patients after open aneurysm repair (elective and emergency) in our critical care complex. It has 12 flexible (level 2 / 3) beds staffed by 8 intensivists (1:8 on call). In addition, there is an active consultant led outreach service for patients on the ward. Four-hour extended recovery is available for EVAR and carotid endarterectomy patients.

**DfMDT:** Vascular surgeons work closely with the medical teams in the three hospitals to provide a comprehensive **diabetes foot service**. There is a weekly diabetes foot round / MDT clinic at the three sites attended by one of the vascular surgeons and a vascular nurse.

**Cardiology:** The department is housed in a purpose-built building with facilities for cardiac catheterisation and 9 to 5 emergency PCI. In addition, there are facilities for temporary or permanent pacing. There are 6 cardiologists who offer excellent support to our patients both before and after the procedure. A range of non-invasive diagnostic tests are available. We use resting ECHO as a routine risk-assessment test (along with CPEXT) but stress ECHO is available at all three sites (MK or Luton) if required.

**Stroke:** Hyper-acute stroke unit is located at Luton and Dunstable Hospital. Stroke physicians provide outreach services to patients in Bedford and Milton Keynes. There is a 7-day TIA clinic at Luton and 5-day clinics at Bedford and Milton Keynes. Urgent carotid scan service is available locally in all three hospitals and patients requiring carotid endarterectomy are referred to vascular surgeons immediately.

**Nephrology:** Renal and dialysis services are located at Lister Hospital Stevenage which provide outreach clinics, and review of patients on the ward/CCC; telephone advice and support is available 24/7. Hemofiltration facilities are available in the CCC as required.



### **Future of Vascular Surgery:**

The merger of Bedford and Luton Dunstable Hospitals in 2020 and substantial investment to build new acute services facilities at Luton offered a great opportunity to design and build state of the art infrastructure for vascular surgery with two new hybrid theatres (Philips Azurion 7 Flex Arm with Maquet Magnus table). This will allow us to use our in-house expertise to develop complex aortic work to include fEVAR, complex aortic dissection and debranching procedures. We have already started a limited deep vein service with a view to eventually establish a full deep vein service in the coming months. The current vascular team are committed to developing a modern, high performing vascular centre and actively involved in designing the clinical pathways and the estate requirements for the inpatient and outpatient facilities including the office space. The move to Luton will bring us in the centre of a large, acute hospital co located with other services like HASU, spinal service and head and neck surgery.

## **5. Bedfordshire Hospitals NHS Foundation Trust**

### **Management Structure**

The Trust's Clinical Services are managed by Clinical Service Lines and Care Units which are led by a Clinical Director, General Manager and Head of Nursing.

Trust Executive Management:

- David Carter, Chief Executive
- Cathy Jones, Deputy Chief Executive
- Mr Paul Tisi, Medical Director
- Liz Lees, Chief Nurse
- Matt Gibbons, Director of Finance
- Angela Doak, Director of Human Resources
- Catherine Thorne, Director of Quality and Safety Governance

The Trust Board has seven non-executive directors and is chaired by Richard Sumray.

### **The Trust**

It is an exciting time to be joining Bedfordshire Hospitals NHS Foundation Trust which resulted from the merger of Luton and Dunstable University Hospital and Bedford Hospital NHS Trusts in April 2020. Both hospitals have retained their identity with individual hospital names and key services remaining on both sites and be managed as single teams across the whole Bedfordshire catchment area.

A merger was the logical next step in collaborative working after the two hospitals worked closely together for a number of years in various clinical services such as:

- Neonatal Intensive Care
- Vascular surgery
- Oral and Maxillofacial (OMF)



- Ear Nose and Throat (ENT) and
- Stroke services
- Pathology services since June 2020.

Our Trust has a strong portfolio of complementary specialist services: bariatric surgery, vascular, head and neck, OMFS, NICU, HASU

In 2022, the Trust was rated GOOD by CQC.

### **A year at our hospitals:**

- We employ **9,000** staff
- We have **1,057** General and Acute beds
- We provide care for a diverse population of approximately **657,000**
- **700,000** patients attend the Outpatients and A&E departments
- We treat approx. **153,000** inpatients
- We deliver **711,000** outpatient appointments
- **8,100** babies are born

### **Innovation and technology:**

We have state-of-the art facilities placing us at the heart of cutting edge health care. The Trust continues to be committed to delivering the best patient care using the best clinical knowledge and technology available.

We have embraced the latest in Robotic Assisted Surgery with the arrival of two da Vinci Xi robots, one at Bedford Hospital and one at Luton & Dunstable University Hospital (L&D), which will bring considerable benefits for both patients and staff.

Unlike in many other hospitals in the UK, the two robots will be used across a range of different specialties, treating patients with conditions ranging from bowel and renal cancer to endometriosis, gynaecology, bariatric and biliary surgery, and complex head and neck conditions.

### **Redevelopment projects:**

Both sites have been undergoing a range of redevelopment projects.

#### **Bedford:**

We have completed one of our major redevelopment projects at Bedford hospital, to expand our Outpatients facilities within Cauldwell Centre. The expansion included an additional 34 rooms, which increased the overall number of Outpatients rooms from 19 to 53.

Within the Emergency Department work has been carried out to deliver nine additional beds, two extra paediatric cubicles, a two-storey extension, two larger adult waiting areas and new reception. The previous space was converted to provide an isolation room, treatment rooms, mental health room and dedicated secure paediatric ED.

In addition, a brand new state of the art CT scanner has been installed within the Emergency Department to allow for rapid diagnostics and improvement to patient experience and care.



To allow the Trust to further develop and improve the Bedford site, we have also upgraded our electrical infrastructure to provide additional capacity and resilience across the site.

**L&D:**

Work to create an acute services block and new ward block is currently underway to house maternity, neonatology, theatres and critical care services. This work is planned to complete towards the end of 2024, with services moving in the following year.

Within the Emergency Department work has been carried out to deliver a brand new entrance and waiting area, a dedicated paediatric area and 15 new major cubicles. The final phase of works will see the expansion of the department where there will be a further increase in capacity, including assessment and triage rooms and sensitively designed mental health care rooms.

In addition, a brand new state of the art CT scanner has been installed within the Emergency Department to allow for rapid diagnostics and improvement to patient experience and care.

An Energy Centre has also been built on site to deliver a substantial reduction in energy consumption, supporting the Trust's drive to Net Zero Carbon, and will increase resilience across the site.

This will support with the further expansion of works and developments for the future.

## About Bedfordshire

Bedfordshire is the perfect mix between city living and stunning countryside views. Our towns and villages have a lively mix of traditional pubs, bars, restaurants, modern nightclubs, shops, culture, heritage and first-class sports facilities.

Bedford is a market town and unparished area in Bedfordshire. Bedford is 46 miles north-northwest of London, 65 miles southeast of Birmingham, 25 miles west of Cambridge and 19 miles east-southeast of Northampton.

Luton is a town situated 28 miles north of London and 39 miles southwest of Cambridge. Dunstable is a market town and civil parish located west of Luton.

Bedfordshire has three major airports within close proximity, including London Luton Airport. There are also regular trains to and from London with train stations located in both Bedford and Luton; Thameslink also provides services to London Gatwick Airport.

## 6. General Information

### Medical Education

Medical education is led by the Director of Medical Education, Dr Nisha Nathwani, who works across both sites, supported by Dr Tejal Shah, Deputy Director for the Bedford site



and Professor Ritwik Banerjee, Deputy Director for the Luton site. They are supported by a cross site Medical Education Manager and a site-specific team of administrators.

Medical Education centres are based at both Luton & Dunstable and Bedford Hospital sites and offer a comprehensive range of education and training events for undergraduates, postgraduate professionals and support staff to help drive forward and encourage life-long learning in the NHS. Both sites offer good library and study facilities, including PC/internet support for staff and students, as well as classrooms, lecture theatres and high tech simulation facilities.

The Danielle Freedman Library at the Luton site and The Bevan Library at the Bedford site offer access to a range of printed and electronic materials, including books, articles, journals, and research publications. The Library staff can help you with evidence searching to support your decision making and offer training to help you develop your own searching skills.

We are committed to developing our teaching and academic activities across the Trust and encourage all our staff to participate in teaching and training at both undergraduate and postgraduate levels. We welcome discussion with you regarding opportunities to progress your interest in teaching and training roles at the Trust.

On commencement of the post, the job plan is clinical only and includes just teaching and training on the wards and in outpatients, referred to as on the Job teaching and training.

## Revalidation – Annual Appraisal review

The Responsible Officer (RO) for medical revalidation is Mr Paul Tisi, Medical Director who is fully supported by two Associate Medical Directors for Revalidation and Appraisal (Dr Penny McNamara and Miss Neela Mukhopadhaya), a team of appraisers (including three Senior Appraisers) and a Revalidation Support Officer, with systems in place to ensure and support annual appraisal and 360<sup>o</sup> MSF in line with GMC and NHS-England requirements. The RO and CEO are required to confirm to NHS-England annually that Medical Appraisal and Revalidation are adequately supported.

## References

We will require 3 references; one must be relating to your present or most recent appointment.

## Terms and Conditions

The post will be subject to the Terms and Conditions – Junior Doctors (England) 2002.

If the consultant appointed chooses to contract on a whole-time basis and wishes to undertake private practice, this private work must be carried out in accordance with the Code of Conduct for Private Practice.



All Consultants have a continuing responsibility for the care of patients in their charge and for the proper functioning of their department, and are required to undertake the administrative duties associated with that responsibility.

## Pension

Employees will automatically be enrolled within the NHS pension scheme and will be required to opt out on appointment if they do not wish to pay into this scheme.

## Smoke Free

The Trust implements a Smoke Free policy that applies to all staff. Staff are not allowed to smoke while wearing a recognisable Trust uniform or visible trust identification badge, and not allowed to smoke anywhere on hospital grounds. Staff are not allowed to take additional breaks in order to smoke. They may smoke during designated breaks but only out of uniform and off site. Staff contravening this policy may be subject to disciplinary procedures.

## Safeguarding Children and Vulnerable Adults

All employees and volunteers working within the Trust have a responsibility for safeguarding and promoting the welfare of children and vulnerable adults.

## Information Governance

(This includes Patient Confidentiality, IT Security, Data Protection and Freedom of Information)

You are required to respect the confidentiality of all patients, carers and staff, by not sharing any information (including data) obtained during the course of your duties. You have an obligation to report any non-compliance through the Trusts Incident Reporting process.

All staff must comply with the legal obligations and statutory requirements of the General Data Protection Act 2018, the Trusts IT Security and Information Governance Policies, Codes of Conduct and Best Practice Guidelines which are available on the staff Intranet site.

## Data quality

The information that you record as part of your duties at the Trust must be 'fit for purpose', reliable and easily accessed by appropriate/authorised personnel. To achieve this standard the information must be: accurate, legible (if hand written), recorded in a timely manner, kept up-to-date, appropriately filed.

All staff must monitor and take responsibility for data quality throughout the areas of the system used locally, all users maintain timely input, and ensuring that data is checked with



the patient, and staff (in relation to their staff record), whenever possible, and to support initiatives to improve data quality.

Recorded information includes: patient information entered in case notes and entered on any computerised care records system, financial information, health and safety information e.g. incident reporting and investigation, personnel information recorded in personnel files etc.

Failure to adhere to these principles will be regarded as a performance issue and will result in disciplinary action.

## Privacy Statement

The Trust is committed to protecting the privacy and security of your personal information. Information about you will be kept by the Trust for purposes relating to your employment. In accordance with the Trust's Privacy Notice for employees, the Trust will hold computer records and personnel files relating to you which contain personal and special category data.

The Trust will comply with its obligations under the General Data Protection Regulations and all other data protection legislation. The data the Trust holds will include employment application details, references, bank details, performance appraisals, holiday and sickness records, salary reviews and remuneration details and other records; which may, where necessary include special category data relating to your health, identity, data held for equality monitoring purposes, criminal offence data and data regarding DBS checks. The Trust requires such data for personnel administration and management purposes for the performance of your contract of employment and to comply with its legal obligations. The majority of information that you provide us with is mandatory to enable us to perform the contract of employment; where information is requested from you on voluntary basis, you will be advised of this and will be properly advised of your rights in respect of consent and the withdrawal of that consent.

The Trust will take all reasonable steps to ensure that the personal information held about you is complete, accurate, up-to-date and not held for longer than necessary for the purposes for which it was collected. However, you are responsible for informing us promptly of any changes to your personal information either in writing or by updating your information on MyESR.

The Trust's Privacy Notice sets out the legal basis for processing your personal data and your rights to access this data are prescribed by law.

The Trust requires you to familiarise yourself with the Trust's Information Governance (data protection) Policy which set out its obligations under the General Data Protection Regulation and all other data protection legislation. You must comply with the Trust's Data Protection Policy at all times and you agree that you will only access the systems, databases or networks to which you have been given authorisation. The Trust will consider a breach of its Data Protection Policy by you to be a disciplinary matter which may lead to disciplinary action, up to and including dismissal. You should also be aware that you could be criminally



liable if you disclose personal data outside the Trust's Policies and Procedures. If you have any queries about your responsibilities in respect of data protection, you should contact the Trust's Data Protection Officer.

A copy of the full Privacy Notice for Employees can be downloaded from the Trust's Intranet.

## Promoting Equality

The Trust is committed to promoting an environment that values diversity. All staff are responsible for ensuring that all patients and their carers are treated equally and fairly and not discriminated against on the grounds of race, sex, disability, religion, age, sexual orientation or any other unjustifiable reason in the application of this policy and recognising the need to work in partnership with and seek guidance from other agencies and services to ensure that special needs are met.

## Infection Control

You are required to comply with the Trust's strategy regarding infection control and be aware of, and comply with, all Trust infection and prevention and control policies, to include hand hygiene, personal hygiene, environmental and food hygiene. Effective prevention and control of healthcare associated infections has to be embedded into every day practice and applied consistently by everyone. Failure to do so may result in disciplinary actions.

## Disclosure Requirements

A risk assessment has indicated that a DBS disclosure is both proportionate and relevant to this position. Any person who is conditionally offered this post will be required to undertake a DBS check in this respect.

The Trust guarantees that this information will only be seen by those who need to see it as part of the recruitment process.

The Trust ensures that an open and measured discussion will take place on the subject of any offences or other matter that might be relevant to the position sought could lead to a withdrawal of an offer of employment.

We undertake to discuss any matter revealed in a Disclosure with the subject of that Disclosure before withdrawing a conditional offer of employment. Having a criminal record will not necessarily bar you from working with us. This will depend on the nature of the position or circumstances and background of your offence. Please be aware that the Trust has a Policy containing a more detailed Code of Practice that meets the standards specified by the Disclosure and Barring Service relating to the fair use of criminal record information and the appointment of persons having a criminal record.

**Note:** Failure by an applicant to provide accurate and truthful information is considered to be a serious matter. Where it is found that a person has recklessly provided inaccurate information or withheld information relevant to their position, this may disqualify them from



appointment. It may also result in dismissal or disciplinary action and referral to the appropriate professional registration body.

If you would like to discuss what effect any criminal record or fitness to practise proceeding might have on your application, you may telephone the Recruitment Manager at the Trust, in confidence, for advice.

## Health & Safety

It is the general duty of every employee to take reasonable care for the health and safety of themselves and others who may be affected by their acts or omissions at work, including the use of necessary safety devices and protective clothing and co-operate with management in meeting its responsibilities under the Health and Safety at Work etc., Act 1974. Any failure to take such care or any contravention of safety policy or managerial instructions may result in disciplinary action being taken.

All employees are required to participate in the Trust's accident/incident reporting system and to comply with the Trust's procedures and techniques for managing risks.

## Confidentiality

All matters relating to patients' health and personal affairs and matters of commercial interest to the Trust are strictly confidential. You must not divulge or act on a way that is likely to cause to be divulged to be divulged to any unauthorized person.

If in doubt, please refer to your manager for guidance. Disciplinary action including dismissal will be taken against any employee contravening this regulation. All staff are obliged to respect the requirements under the Data Protection Act 1998 and observe the Trust's policies on IM&T security.

## Other Useful Information

The Trust has a number of Human Resources Policies and Procedures, which have been discussed and agreed with the Local Negotiating Committee (Joint Medical & Dental Negotiating Committee). They are available on the Trust Intranet.

The duties and responsibilities of the post will be undertaken in accordance with the policies, procedures and practices of The Bedfordshire Hospitals NHS Foundation Trust may amend from time to time.

## Payment of Salary

Salary is paid direct into your Bank or Building Society on the 26<sup>th</sup> (Bedford) and 27<sup>th</sup> (Luton) of each month.



## Variation

This job description will be subject to review from time to time. Any amendments will be made in consultation with the post holder.



## Bedfordshire Hospitals Foundation NHS Trust Person Specification

	<b>ESSENTIAL</b>	<b>DESIRABLE</b>
GMC Registration	Full GMC Registration and license to practice	
Qualifications: Higher Qualification	MB BS, MRCS or equivalent	Higher degree
Knowledge and Clinical skills:	<ul style="list-style-type: none"> <li>• Completion of FY competences</li> <li>• Completion of Core Surgical Training</li> <li>• Command of English Language</li> <li>• Understand and commit to GMC's Good Medical Practice Guidance in all aspects of personal and professional behaviour</li> </ul>	<ul style="list-style-type: none"> <li>• Additional experience in Vascular</li> </ul>
Management and Leadership	<p>High degree of personal leadership and interpersonal skills to include:</p> <ul style="list-style-type: none"> <li>• accepting accountability for own actions</li> <li>• ability to disagree politely and to accept a disagreement</li> <li>• Able to articulate a point concisely</li> <li>• Open to change Surgical</li> <li>• Open to challenge</li> <li>• Ability to work in a cohesive team</li> </ul>	<ul style="list-style-type: none"> <li>• Desire to develop personal and professional skills and be able to lead others</li> </ul>
Teaching Research/Publications	<ul style="list-style-type: none"> <li>• Able to understand levels of evidence and how it may impact on practice</li> <li>• Able to supervise, teach and train healthcare professionals in a wide range of situations</li> </ul>	<ul style="list-style-type: none"> <li>• Research experience</li> </ul>
Personal skills	<ul style="list-style-type: none"> <li>• Able to manage personal needs</li> </ul>	



	<ul style="list-style-type: none"><li>• Able to self-motivate</li><li>• Adaptable</li><li>• Social and political awareness</li><li>• Ability to communicate effectively</li><li>• Good time management</li><li>• Leadership skills</li></ul>	
Personal circumstances	Reside within 20 miles of hospital or a 30-minute drive from the hospital (when on call OOH)  Physically and mentally fit to undertake the role	