

Job Description

Role Title: Locum Consultant Transplant Nephrologist

Grade: Consultant (YC73)

Contract: Fixed Term 12 Months

Responsible to: Clinical Lead for Nephrology and Transplantation

Accountable to: Chief Medical Officer

Location: University Hospitals Coventry and Warwickshire

Our Vision, Values and Behaviours

At University Hospitals Coventry and Warwickshire (UHCW) NHS Trust our vision is to be a national and international leader in healthcare, rooted in our communities. Our Organisational Strategy *More than a Hospital* (2022-2030) was shaped by the views of our staff, patients and stakeholders and sets a clear plan for improvements in healthcare.

We aim to deliver the best care for our communities, being exceptional in everything we do. We do this by providing proactive, joined up support for local people and we deliver specialised services for those with the most complex health conditions. We set out to create the best experiences for our staff and work positively in partnership with other organisations to achieve the best healthcare outcomes.

Our vision and purpose are underpinned by a clear set of values that reflect the culture we want to create: *Compassion, Openness, Pride, Partnership, Improve, Learn and Respect*. Developed by our staff, our seven values guide what we do daily. Whatever our role or level, we commit to uphold these values as we work together to deliver world class care.



Net Zero and Sustainability

UHCW NHS Trust, by virtue of its Green Plan, is committed to ensuring that the way we provide services minimises the impact on the environment and the future health of the public e.g. zero waste to landfill, reducing our carbon footprint and increasing our recycling and reuse percentages.

Introduction

This post is to replace vacancy Consultant Nephrologist with a specialist interest in Transplantation.

Main Duties/Responsibilities

The appointee will be required to work with colleagues to deliver and develop Renal Services and Transplantation at the University Hospitals Coventry and Warwickshire NHS Trust.

- Take ongoing responsibility for patients under their care.
- Provide a consultation service and advisory service to other clinical colleagues in other specialties within the Trust and Primary Care. When consultant of the week, occasional visits to Warwick and George Eliot Hospital may be required to review emergency referrals to decide if transfer is clinically appropriate.
- Participate in the development of the renal service, treatment protocols and guidelines and the greater knowledge in the management of kidney failure and transplantation.
- Chair transplant MDT meetings as required.
- Participate in the further developments of Transplantation through collaborative research.
- Develop and maintain collaborative relationships with medical colleagues in other specialties and participate in regular clinical meetings and other post graduate activities.
- Participate in the on-call rota on an equal basis with consultant colleagues to ensure that appropriate emergency services are provided out-of-normal working hours.
- Take responsibility for the professional supervision and development of trainee doctors within the specialty. This will include the appraisal of Foundation Doctors, CMTs and SpRs, and the Certificates of Satisfaction in respect of Foundation Doctors.
- Develop and maintain good communications with General Practitioners and appropriate external agencies.
- Demonstrate a firm involvement in Clinical Governance, Risk Management and Clinical Audit – this will include the development and maintenance of appropriate systems and practices to ensure continued safe clinical practice.
- Ensure own practice is up-to-date; this will include taking responsibility for own Clinical Professional Development and participating in the Trust's Performance and Annual Review system.
- Share responsibility for data protection arising out of the use of computers.
- Comply with all relevant Trust Policies and Procedures.

University Hospitals Coventry and Warwickshire NHS Trust

The University Hospitals Coventry and Warwickshire NHS Trust were formed as a Third Wave of Trusts in April 1993 by the merger between the former Walsgrave Hospital Trust and Coventry and Warwickshire Hospital. In April 1998, the Hospital of St Cross, formerly part of Rugby NHS Trust became part of the University Hospitals Coventry and Warwickshire NHS Trust. These two hospitals provide a comprehensive range of complementary services to the population of Coventry and Warwickshire. In November 2000, the Trust adopted the name of "University Hospitals of Coventry and Warwickshire NHS Trust" to accommodate the formation of the Warwick Medical School. The Trust successfully operates a clinical directorate management structure, with clinicians heavily involved in the management of its services. Each of the directorates is headed by a Clinical Director supported by a General Manager and Modern Matron. The Trust is currently awaiting approval of its application for foundation status.

University Hospital Coventry

University Hospital is located on the eastern side of Coventry. It is a large modern complex, built in spacious grounds four miles from the City Centre and one mile from Junction 2 of the M6 Motorway. University Hospital consists of 1380 beds on site. It has an immediate catchment area of approximately 500,000 and in the sub-regional specialties the Trust serves a population of over 1 million.

All medical and surgical sub-specialties are provided at University Hospital campus: A&E, Acute Internal Medicine, Cardiology and Cardiac Surgery, Dermatology, Diabetes and Endocrinology, Gastroenterology, Upper GI and Colorectal Surgery, General Critical Unit, General Surgery, Breast Surgery, ENT, Plastic Surgery, Urology, Gerontology, Haematology and Oncology, Neurology, Neurosurgery and Neurorehabilitation, Respiratory Medicine and Thoracic Surgery, Rheumatology, Women and Children's Services, Reproductive Medicine.

There is a comprehensive radiology department including MRI, CT and PET scanning, Nuclear Medicine. There are 3 separate on call consultant rotas for General, Neurology and Interventional Radiology. The interventional Radiologists provide a Nephrostomy Service as well Angioplasty of Fistulas. There is an excellent Medical Physics Department that provide a Doppler surveillance service for fistulas.

All laboratory facilities are provided, including Haematology, Biochemistry, Histopathology and Microbiology.

There is on campus a Post-Graduate Medical Centre, Medical Library as well as a Doctors Residential Block.

Hospital of St Cross, Rugby

The Hospital of St Cross has 168 beds and provides healthcare to a population of around 110,000 people covering Rugby and surrounding villages and small areas of Leicestershire and Northamptonshire. Hospital services are provided by University Hospitals Coventry and Warwickshire NHS Trust. Close links are maintained between the Hospital of St Cross and the sub-regional specialties provided at University Hospital. The hospital possesses a CT and MRI scanner.

On the St Cross facility the following in patient services are provided: Clinical Gerontology, General Internal Medicine and Rehabilitation, Elective Orthopaedic Surgery and Short Stay General Surgery. The Trust has made extensive investment in recent years for the provision of Day Case Surgery, Endoscopy and a Dialysis unit.

There is a large outpatient facility with an average of 3500 attendances per month, covering a full range of specialties including Nephrology.

Warwick Medical School

The Universities of Leicester and Warwick developed a Joint Medical School which was one of the largest in the UK. The Warwick campus admitted the first cohort of students in October 2000. The University Medical Schools separated after 3 years. University Hospitals Coventry and Warwickshire NHS Trust and South Warwickshire Acute Trust provide the main teaching hospital environment for the Medical School. This combined with the excellent reputation of the University of Warwick's position near the top of the HEFCE research and training league tables have ensured recruitment of an excellent calibre of academic clinical and non-clinical staff in recent years.

Specialty Group Information

Currently the Trust clinical management structure is based on a Specialty Group system. Acute Medicine and Renal Services have recently been combined in Group 2, one of 17 Clinical Groups in the Trust. The Clinical Directors report directly to the Chief Operating Officer, Chief Finance Officer and the Medical Director.

Group Clinical Director:	TBC
Group Manager:	Mrs Paula Bennett
Renal Manager:	Mr. Joseph Greenacre
Clinical Lead for Renal Medicine:	Dr H Kanji
Clinical Lead for Transplant Medicine:	Professor Nithya Krishnan
Modern Matron (Renal)	Karen Timothy and Lynda Mott

Departmental Information for Renal Services and Transplantation

UHCW's Renal Unit provides a sub-regional service for Nephrology and Transplantation. The catchment population for Nephrology and Dialysis includes not only Coventry but also the neighbouring districts of North Warwickshire, Rugby and South Warwickshire, totalling approximately 900,000. In addition, the Transplantation Service extends to patients from Birmingham and the West Midlands increasing to over 2 million.

The Renal Department is located in the East Wing on the 5th floor at UHCW. It is a purpose built fully integrated facility with renal inpatient beds, a transplant unit, outpatient haemodialysis, an acute haemodialysis and plasma exchange unit, CAPD unit as well as a day case unit. There is office accommodation in the facility for the Consultants and their secretaries as well as for junior medical and nursing staff.

There has been a significant increase in the number of patients developing ESRF in the last 20 years. This has been accommodated in the expansion of the satellite haemodialysis programme, home therapies (both PD and home haemodialysis), pre-emptive transplantation and a conservative care programme. At UHCW we take on average 120 patients per year for dialysis, representing an annual take-on rate of over 150 patient's pmp. At present there are approximately 470 patients on renal replacement therapy, 360 hospital based haemodialysis, 17 on home haemodialysis, 95 on the CAPD, APD or assisted PD programme.

The Trust has developed the Haemodialysis programme on a Hub and Spoke Model of care. There are 30 dialysis stations based at the UHCW main site in Coventry, 18 stations at the Ash Dialysis Unit in the Hospital of St Cross in Rugby, 12 stations located in the Lucy Dean Unit at the George Eliot Hospital in Nuneaton. Fresenius Medical Care Ltd operates a 12 stations unit at a Primary Health Care Centre in the grounds of Stratford Hospital and there are 8 stations at the Whitnash Dialysis Unit located in the grounds of the Whitnash Rehabilitation Hospital in Leamington. We are currently planning for an additional satellite unit in Coventry.

Transplantation

Coventry became an independent transplant centre in 1985 with appointment of Mr Adam Juravitch and subsequently Mr FT Lam. Prior to this, patients from Coventry and Warwickshire had their transplants performed at Queen Elizabeth Hospital in Birmingham.

The Unit performs over 60 transplants per year with the majority being live related transplants. Prof Higgins successfully developed a desensitisation programme for Antibody Incompatible Transplantation, which is now internationally recognised as one of the world's leading AIT units. It has resulted in referrals from units within the UK and we currently have a contract with Ireland to provide

an antibody incompatible live transplant service. We expect the post holder in conjunction with Professor Krishnan to deliver and develop this service.

There are five consultant transplant surgeons. Prof Imray, Mr Roy, Mr O'Callghan, Mr Hunter, and Mr Mentor. Mr Fernando is an Associate Specialist who assists with transplantation and in conjunction with Mr Roberts he provides the access service. There are 4 Transplant Co-ordinators, Nick West, Pat Hart, Jane Reid and Yvonne Myers.

Patients admitted for a kidney transplant or donation are admitted to Surgical Enhanced Care Unit at UHCW. Patients are jointly managed between the Physicians and surgeons with twice daily ward rounds. Once discharged they are followed in a transplant clinic held on the 5th floor, thrice weekly. Subsequent admissions are then under the care of Nephrology unless there is a specific surgical issue.

There are 2 weekly multi-disciplinary transplant planning meetings, pre-transplant Monday and post-transplant Friday.

Renal On Call

The renal inpatients are based on Ward 50 which has 22 beds, 12 of which are side rooms with en suite facilities. The Department operates a consultant of the week model for inpatient care. The On Call consultant cancels clinics for the on call week and other commitments and will undertake a daily ward round with the transplant surgeons and transplant SpR, the inpatients on ward 50 with the ward based SpR and the outliers with the outlier SpR. The consultant of week is also responsible for managing inpatient referrals from Warwick Hospital and George Elliot Hospital in Nuneaton with either telephone advice to the referring clinician, travelling to the hospital to assess the patient or arranging for the patient to be transferred to UHCW.

The consultant of the week is not on for the night Monday- Friday, this is a separate rota but they are expected to give a handover to the consultant who is taking over that evening. We are currently trailing for 12 months splitting the week on call so the weekends are undertaken by another consultant. The consultant of the weekend is on for the Saturday and Sunday nights. Consultants on for the weekend are expected to handover to the consultant of the week and have a day in lieu having cancelled existing commitments on the Monday.

There is a weekly MDT meeting on a Tuesday morning which acts as the handover. There is a weekly renal biopsy meeting Tuesday lunchtime and a transplant MDT meeting on a Friday lunchtime which the on call consultant is expected to attend.

Approximately 140 patients with dialysis dependant acute renal failure from Coventry and Warwickshire are managed each year by the department. Facilities for CVVH are provided on the General Intensive Care Unit and the Cardiothoracic Intensive Care Unit. There are also CVVH facilities available on the Intensive Care Units in Warwick and Nuneaton.

Outpatient Clinics

Outpatient clinics are held in Coventry, Rugby, Nuneaton, Warwick and Stratford. Clinics are supported with a Renal Nurse Specialist and Dietician. The clinic Template for a dedicated new patient clinic would be 5 and for a dedicated follow up 12 patients.

Departmental Staffing Structure Nephrologists

Dr H Kanji	Clinical Lead for Renal Services
Dr R Hamer	Peritoneal Dialysis
Dr S Talwar	Vasculitis
Professor Nithya Krishnan	Clinical Lead for Transplant Medicine
Dr Daniel Ford	IT and Home Haemodialysis
Dr Waqar Ayub	Hospital Haemodialysis
Dr Andy Stein	CKD
Dr Krishna Appunu	Acute Kidney Injury, Governance Lead
Dr S Fletcher	Obstetric/renal
Dr G Banham	Nephrology
Dr Sentiru Baladurai	Acute Medicine/Nephrology joint post with RAF
Dr S Grieve	Undergraduate Education
Dr L Harrison	Simulation Lead

Junior Medical Staff

There are currently four Specialist Registrars and they are individually responsible on a rotational basis for the following areas: Ward 50, General Medical patients attached to transplantation. The main haemodialysis unit and day case unit are principally supervised by Dr Kanji. They attend outpatient clinics and rotate from the higher specialist training programme in the West Midlands. There are two research registrars and along with the SpR's provide the middle grade and emergency on-call cover for the Department out of normal working hours until 9pm at night. The on call consultants provide cover over night although there is a medical registrar to provide middle grade cover at UHCW overnight.

There are three CMTs in Renal Medicine as part of the UHCW medical rotation and there is a Foundation Year 1 Doctor.

The new appointment will have equal access to the junior medical staff, both on call and in clinics.

Support

An adequately equipped office, secretarial support and access to IT will be provided.

Support for Renal Services

Support facilities for the investigation of renal disease are excellent, including ultrasound, CT, MRI and radioisotope imaging. There is a separate on call rota for interventional radiology which provides a comprehensive service including angiography, stenting and the placement of percutaneous nephrostomies.

Renal biopsies are undertaken in the radiology department and there are 2 Consultant Histopathologists with a renal interest.

There is a large IT department with training and support facilities provided.

Management Structure for Renal Services

We have organised the renal department so that are clinical leads and lead nurses as appropriate for the following clinical areas:

Acute Kidney Injury
Chronic Kidney Disease
IT

Home Haemodialysis
Hospital and Satellite based Haemodialysis
Transplantation
Ward 50

There is a weekly operational meeting with the Clinical Director, Modern Matrons and General Manager. There is a monthly Business Planning at which consultants are asked to attend with Finance, Matron and General Manager. There is a monthly Governance and Quality meeting to which the consultants and nursing leads attend which is chaired jointly by the lead for Clinical Governance and the General Manager. There is also a monthly Clinical Forum to which all members of staff are encouraged to attend to participate in the development of the service.

There will be an alternate month Transplant Operational meeting held with the Surgeons, Physicians and Co-ordinators.

Mentoring

The Trust offers a mentoring scheme for new Consultants, and this will be available to the post.

Job Plan

A formal job plan will be agreed between the appointee and the Clinical Director for Nephrology on behalf of the Medical Director three months after the commencement date of the appointment.

The job plan will be reviewed annually with the CD and the General Managers. It will cover all aspects of the consultants' professional practice including clinical work, teaching, research, education and managerial responsibilities, including a clear schedule of commitments, both internal and external. It will include personal objectives, including details of their link to wider service objectives and details of the support required by the consultant to fulfil the job plan and the objectives.

This is a provisional job plan and will be mutually agreed with the Clinical Director as appropriate. It is, of necessity, flexible. This plan may also change over time to reflect new working practices. This will be done by mutual agreement between the Clinical Director and the Appointee.

It is the policy of UHCW NHS Trust that all new contracts should contain a total of 10 programmed activities (PA) in line with the BMA / Department of Health recommendations. Initially this post will be offered with 8.5 DCCs and 1.5 SPAs for personal CPD (including personal audit and appraisal preparation) and educational supervision and governance activity.

The appointee will participate fully within the renal on call consultant of the week, during which other clinical commitments are cancelled. This system has worked well for a number of years and allows continuity of care. The on call for Nephrology is 1:8 for these posts.

It is Trust policy that a minimum of 8 weeks' notice is given for annual and study leave.

Day	Time	Activity	Activity type	Number of PAs
Monday	08.30-12.30	admin	DCC	1
	12.30-13.30	Transplant listing MDT	DCC	0.25
	13.30-17.00	CKD clinic	DCC	0.875
Tuesday	09.00 – 11.30	Ward 50 round	DCC	0.625
	11.30-12.30	Transplant virology MDT	DCC	0.25

	12.30-13.00	Histology meeting	DCC	0.125
	13.00-14.00	Mortality meeting or education meeting	SPA	0.25
	14.00-17.00	Assessment for transplant clinic	DCC	0.67
Wednesday	09.00-13.00	Acute post-transplant clinic	DCC	1
	13.00-17.00	Failing transplant clinic	DCC	1
Thursday	09.00-14.00	Clinical admin	DCC	1.25
	14.00-17.00	Core SPA	SPA	0.67
Friday	09.00-11.00	Renal QIPS/clinical forum/audit meeting	SPA	0.5
	11.00-12.00	Meeting with transplant coordinators	DCC	0.25
	12.00-13.00	Clinical admin	DCC	0.25
	13.00-14.00	Grand round	SPA	0.14
	14.00-15.00	Acute post-transplant clinical review MDT	DCC	0.25
	15.00-17.00	Additional post-transplant meeting or clinical admin	DCC	0.5
Renal week on-call	08.30-18.00 1 in 9 weeks	Daily ward round onward 10ECU and ward 50, and also review of AKI or renal patients on other wards		
Saturday and Sunday	08.30 onwards 1 in 9 weekends	Inpatient transplant review on ward 10ECU and Ward 50 ward round 1 in 9 weekends, both Saturday and Sunday, becoming non-resident when completed		1.5
Evening on-calls	17.30-08.30 1 evening on alternate weeks	Non-resident on-call		

Clinical Governance and Audit

Everyone is expected to participate in all aspects of clinical governance. The post holder will ensure that all services are provided in an effective and efficient manner and that the principles of risk management and clinical governance are maintained at all times.

The post holder is expected to participate in the Trust Audits as well as developing and assisting with existing departmental audits.

Continuing Professional Development (CPD)

The Trust supports the requirements for Continuing Medical Education as laid down by the Royal College of Physicians and is committed to provide time and financial support for these activities.

The Trust has the required arrangements in place, as laid down by the Royal College of Physicians, to ensure that all doctors have an annual appraisal with a trained appraiser and supports doctors going through the revalidation process.

The appointee will have a reflective approach to their own practice and will agree a programme of continuing professional development which meets both their needs and the service provision requirements.

The appointee is required to complete a revalidation ready annual appraisal in addition to an annual job plan review. They will need to undertake 360 multisource feedback once every 5 years in order to meet with the requirements for revalidation. The Trust currently uses Equinity for revalidation and appraisal.

Teaching

The post holder will be required to participate fully in the education and training of medical students, trainee doctors, paramedical, nursing and other appropriate personnel. There is a weekly renal biopsy meeting. There are academic meetings in both departments each week and the Hospital Grand Round Friday 1-2 at which consultant colleagues are expected to attend and participate.

Management and Administration Responsibilities

Undertake administrative duties associated with the care of their patients and the running of clinical areas. Lead and manage the team through adaptable, visible and modest leadership to ensure a committed approach is achieved. Standards will need to be driven by improvements with clear and explicit direction, encouraging constructive feedback and challenge from those involved. Produce and support solution-focused decisions based on fact and not anecdote through recognising the value of involving different professional contributions, applying your knowledge appropriately. Demonstrate financial awareness and understand the impact of your and your team's decisions. Delegate tasks effectively and appropriately with realistic expectations of others. Comply with Health and safety policies and procedures.

Person Specification

Job Title: Locum Consultant Transplant Nephrologist

Supporting Evidence

In the supporting evidence of your application form, you must demonstrate your experiences by giving specific examples for the criteria within the person specification.

Factors	Essential	Desirable
Qualifications	<ul style="list-style-type: none"> • Full GMC Registration. • MRCP or equivalent. • European Community Rights. 	
Clinical Experience	<ul style="list-style-type: none"> • Clinical training and experience equivalent to that required for gaining UK CCT in Nephrology. • Broad clinical experience within Nephrology. • Clinical experience in Transplantation. 	<ul style="list-style-type: none"> • Experience in Transplant immunology.
Skills/ Knowledge	<ul style="list-style-type: none"> • Thorough and detailed knowledge of medical audit, medical education, current clinical and medical best practice. • Understanding of the Clinical Governance process. • Ability to lead, communicate, liaise and negotiate with others. • Ability to advise on efficient and smooth running of specialist service. • Ability to motivate, innovate and support staff of all disciplines. • Ability to organise and manage diagnostic work and laboratory priorities. • Ability to manage and lead clinical team. • Competent in basic information technology. • Further skills in information technology. • Ability to supervise, appraise, coach and mentor trainee and other doctors. • Awareness of health service reforms and issues across all healthcare economy. 	<ul style="list-style-type: none"> • Understanding of the concepts of management. • Experience of service development.
Teaching/ Education	<ul style="list-style-type: none"> • Ability to design and deliver talks/lectures/workshops effectively. • Experienced in demonstrating clinical procedures/techniques to other healthcare professionals. • Commitment to continuing medical education. • Ability to organise and participate in and evidence of teaching and training undergraduate and postgraduate students. 	

	<ul style="list-style-type: none"> Appraisal and assessment training skills. 	
Audit/Research/Publications	<ul style="list-style-type: none"> Undertaken complete audit cycle. Participated in completed clinical research projects. Ability to apply research outcomes to clinical practice. Knowledge of clinical governance issues. Interest and awareness of research methodology. 	<ul style="list-style-type: none"> Ability to demonstrate recent evidence of relevant and continued research. Published research in peer-reviewed journals. Higher degree by research.
Personal Qualities	<ul style="list-style-type: none"> Caring attitude to patients. Enquiring, critical approach to work. Excellent inter-personal qualities. Credible and persuasive presence both amongst clinical and management colleagues. Ability to listen and communicate effectively (written, public speaking and presentational). Ability to work collaboratively with the Executive Team. Ability to achieve objectives. Ability to work within a multiprofessional and multi-disciplinary framework. Good organisational skills. Ability to motivate and support staff of all disciplines. Excellent personal time and management skills. 	
Commitment to Trust Values and Behaviours	<ul style="list-style-type: none"> Must be able to demonstrate behaviours consistent with the Trust's values. (As detailed in UHCW's Values in Action document below). Applicants applying for job roles with managerial responsibility will be required to demonstrate evidence of promoting equal opportunities through work experience. 	

Contractual Responsibilities

- **Confidentiality:** The post holder must maintain confidentiality, security and integrity of information relating to patients, staff and other Health Services business.
- **Health and Safety:** All staff must be familiar with the Trust Health and Safety Policy, including a thorough understanding of personal responsibilities for maintaining own health and safety and others.
- **Risk Management:** All staff need a basic working knowledge of risk management to enable them to participate in identification and control of all business risks they encounter in their area of work.
- **Equality and Diversity:** Everyone has the opportunity to be treated with dignity and respect at work and has a clear responsibility to comply with the detail and the spirit of the Dignity at Work Policy.
- **Infection Control and Prevention:** The Trust is committed to minimising risks of healthcare associated infection to patients, visitors and staff. All employees are required to be familiar with and comply with Infection Prevention and Control policies relevant to their area of work.
- **Safeguarding Vulnerable Adults and Children:** The Trust is committed to ensuring the safeguarding of vulnerable adults and children in our care. All employees are required to be familiar with their responsibilities in this area and to raise any concerns as appropriate.
- **Conflict of Interest:** The Trust is responsible for ensuring that the service provided for patients in its care meets the highest possible standard. Equally, the Trust is responsible for ensuring that staff do not abuse their official position for personal gain or to benefit their family or friends. The Trust's Standing Financial Instructions require any officer to declare any interest, direct or indirect, with contract involving the Trust. Staff are not allowed to further their private interests in the course of their NHS duties.
- **Working Time Regulations:** The Working Time Regulations 1998 require that you should not work more than an average of 48 hours in each working week. For example, in a 26 week period you should work no more than 1,248 hours. Employees may choose to opt out by providing written notification as appropriate.

The above duties and responsibilities are intended to represent current priorities and are not meant to be an exhaustive list. The post holder may from time to time be asked to undertake other reasonable duties and responsibilities. Any changes will be made in discussion with the post holder according to service needs.

Our values in action

We live our values in action in our work with patients, visitors, and colleagues.

- ✓ Being polite and introducing ourselves to everyone we meet.
- ✓ Treating everybody as individuals and respecting their needs.
- ✓ Being approachable, caring and helpful at all times.
- ✓ Communicating with patients, visitors and colleagues, respecting confidentiality and privacy.
- ✓ Taking the time to actively listen and understand individual needs.
- ✓ Being open and honest.
- ✓ Acknowledging that we don't always get it right.
- ✓ Speaking out when we see things aren't right and supporting others to do the same.
- ✓ Giving praise and saying thank you for a job well done.
- ✓ Celebrating and recognising personal, team and organisational achievements.
- ✓ Using the skills, experience and diversity of staff to better deliver our objectives and services.
- ✓ Actively working with patients and visitors to improve services.
- ✓ Seeking and adopting best practice from colleagues and other teams within UHCW.
- ✓ Taking personal responsibility for our own learning.
- ✓ Keeping up-to-date with mandatory and professional development
- ✓ Developing ourselves and others, independent of our job role or profession
- ✓ Taking personal responsibility to make improvements by suggesting new ways of doing things
- ✓ Taking opportunities to learn with and from others
- ✓ Embracing change and supporting others through it
- ✓ Putting in place ways to receive feedback and acting to change things
- ✓ Seeking and adopting best practice from colleagues and other teams within UHCW
- ✓ Working across boundaries to improve the experience of patients, visitors and colleagues

