

# Recruitment information pack



## FAST FORWARD YOUR CAREER

BE PART OF A SUPPORTIVE TEAM

WORK ALONGSIDE WORLD LEADING EXPERTS



## RESEARCH OPPORTUNITIES

SUPPORTIVE AND COMMITTED SUPERVISORS

EXPERIENCE LATEST TECHNOLOGIES AND THERAPIES

# WHO WE ARE

Join Imperial College Healthcare and become part of a community of 12,000 staff working with a wide range of partners to offer 'better health, for life'.

Formed in 2007, we are one of the largest NHS trusts in the country – providing acute and specialist care to over a million patients each year in central and north London and beyond.

With a global reputation for ground-breaking research and innovation as well as excellence in education, we offer huge expertise across a wide range of clinical specialities.

Alongside our five hospitals – Charing Cross, Hammersmith, Queen Charlotte's & Chelsea, St Mary's and the Western Eye – we have a growing number of community and digital services, reflecting our commitment to developing more integrated care with our partners. We also provide private healthcare at all of our hospitals (in dedicated facilities).

Together with Imperial College London and two other NHS trusts, we form one of six academic health science centres in the UK – focussed on translating research into better patient care. We also host one of 20 National Institute for Health Research biomedical research centres in partnership with Imperial College London.

Our mission is to be a key partner in our local health system and to drive health and healthcare innovation, delivering outstanding care, education and research with local, national and worldwide impact.

## Imperial College Academic Health Science Centre (AHSC)

The Imperial College Academic Health Science Centre (AHSC) is a partnership between our Trust, Imperial College London, The Institute of Cancer Research (ICR), Royal Brompton & Harefield NHS Foundation Trust and The Royal Marsden NHS Foundation Trust. The partnership aims to improve the health and wellbeing of patients and populations by translating research discoveries into new therapies and techniques as rapidly as possible.

Our AHSC is focussed on preventing disease wherever possible, detecting and diagnosing diseases earlier, and developing targeted treatments for all diagnosed conditions. By working together as partners, we capitalise on the academic strengths of Imperial College London, combined with the clinical capabilities and critical mass of the NHS.

As an AHSC, all of our staff are actively encouraged to become involved with education and research alongside their clinical role. We review job plans every year and there is the potential to build in dedicated programmed activities (PAs) for education, training or research.

## Imperial College London

Imperial College London is one of the world's leading universities. The College's 17,000 students and 8,000 staff are expanding the frontiers of knowledge in science, medicine, engineering and business, and translating their discoveries into benefits for our society.

Founded in 1907, Imperial builds on a distinguished past – having pioneered penicillin, holography and fibre optics – to shape the future. Imperial researchers work across disciplines to improve health and wellbeing, understand the natural world, engineer novel solutions and lead the data revolution. This blend of academic excellence and its real-world

application feeds into Imperial's exceptional learning environment, where students participate in research to push the limits of their degrees.

## OUR VALUES AND BEHAVIOURS

With our staff and partners, we have developed a clear and ambitious vision as well as a set of core values that shape everything we do. Together they guide our organisational strategy and our behaviours framework:

- **Kind:** we are considerate and thoughtful so everyone feels valued, respected and included
- **Collaborative:** We actively seek others' views and ideas so we can achieve more together
- **Expert:** We draw on diverse skills, knowledge and experience so we provide the best possible care
- **Aspirational:** We are receptive and responsive to new thinking, so we never stop learning, discovering and improving

## OUR HOSPITALS

### Our hospitals and services

We have five hospitals on four sites, as well as a growing number of community and digital services across central and west London:

#### **Charing Cross Hospital, Hammersmith**

Charing Cross Hospital offers outstanding day surgery and cancer care, award-winning dementia services and medicine for the elderly, and is a renowned tertiary centre for neurosurgery with a hyper-acute stroke unit. It is also a hub for integrated care in partnership with local GPs and community providers.

#### **Hammersmith Hospital, Acton**

Hammersmith Hospital is a specialist hospital renowned for its strong research connections and haematology service. It is home to a dedicated heart attack centre and Europe's largest renal transplant centre.

#### **Queen Charlotte's & Chelsea Hospital, Acton**

Queen Charlotte's & Chelsea Hospital is a maternity, women's and neonatal care hospital. It is a tertiary referral centre and looks after women with high-risk, complicated pregnancies, as providing a midwife-led birth centre.

#### **St Mary's Hospital, Paddington**

St Mary's Hospital is a large, acute hospital and hosts one of the four major trauma centres in London, alongside a 24-hour A&E department. With one of the most renowned paediatric services in the country, St Mary's is also home to Imperial Private Healthcare's Lindo Wing.

#### **Western Eye, Marylebone**

The Western Eye Hospital is a specialist hub for ophthalmic services in West London with a 24/7 eye A&E – providing emergency treatment for both adults and children. Facilities include: outpatients, inpatients, day case and emergency services.

**Reach your potential in hospitals that make history**

Charing Cross | Hammersmith | St Mary's |  
Queen Charlotte's & Chelsea | Western Eye

# WHY JOIN US?

## Reach your potential through outstanding learning and development opportunities

Every year we welcome hundreds of doctors, nurses and other healthcare professionals to train with us. We support staff to pursue formal education, conduct research and take part in courses, seminars and training programmes – including giving study leave. Wherever you are in your career, we offer opportunities for continuing professional development (CPD). If you are starting in an entry-level role, we also offer NVQ level two and level three qualifications. We also have a number of leadership development programmes to support you as you progress, alongside cross-specialty and cross-profession clinical education.

## Experience the rich heritage of hospitals that have made history

Some of our clinicians' achievements continue to transform healthcare practice and make a lasting impact on the world. In 1928, Alexander Fleming discovered the antibiotic penicillin at St Mary's revolutionising medicine and earning himself a Nobel prize – this is just one in a long line of many discoveries and developments that have put us on the map as at the forefront of innovation.

## Draw on huge expertise as part of a strong international community

Get ready to work with colleagues from all over the world with a sense of community, wellbeing and shared endeavour. We look after children, adolescents and adults – caring for tiny babies through to patients who need end of life care. We have a global reputation for our expertise in areas like: cardiology, haematology, renal and transplantation, infectious diseases, neurology and trauma care – to name just a few. We are part of the prestigious [Shelford Group](#) – the top ten NHS multi-specialty academic healthcare organisations dedicated to excellence in research, education and patient care.

## Feel supported by a positive culture

You can expect leadership and the chance to do your best in an open, respectful working environment supported by a shared set of values. Our leadership team ensure they are accessible – meeting staff at monthly CEO sessions and on ward walk rounds. Every employee has an annual personal development review to discuss their progress and development needs. We have a number of thriving staff networks at the Trust for you to join including: the leadership network; the women's network, the LGBT+ network and the nursing and midwifery BAME network.

## Recognition and career progression

We value our staff and recognise the unique contributions they make to their patients and colleagues with our Make a Difference recognition scheme and annual awards ceremony. We encourage patients, members of the public, visitors, carers as well as colleagues to nominate our staff when they go the extra mile and celebrate the dedication of long-serving staff. Every year you'll have a personal development review where you'll identify objectives and development needs for the next year. Together you and your manager will establish a plan to help you fast-forward your career and gain the experience and skill you need to progress to the next level.

## **Conduct research here**

Our clinicians work alongside biomedical scientists, chemists, physicists and engineers from Imperial College London to develop new ways of diagnosing, treating and preventing disease. As part of an academic health science centre, we aim to apply research discoveries to healthcare as quickly as possible so we can improve the lives of NHS patients and populations around the world. Our culture is about identifying research opportunities and supporting our staff to pursue them. One of our goals is to encourage many more healthcare professionals outside of medicine to pursue academic careers by providing research skills training sessions, grant-writing support and access to fellowship opportunities. As of 2018/19 we have 600 active research projects.

## **Access brilliant benefits and enjoy a new social life**

Join the NHS pension scheme – one of the most generous schemes in the UK. Have the opportunity to work flexibly. Benefit from on-site accommodation and employee travel. Voluntary benefits include: season ticket loan, on-site nurseries, childcare vouchers, cycle to work scheme, fitness facilities and well-being initiatives including yoga and meditation classes. Join the Trust's choir or orchestra, running club or football club, or become a member of the Charity's Arts Club to receive exclusive access to free exhibitions at the Tate Modern and shows. You can even enter the Royal Albert Hall ballot and win tickets to music events! Experience the best that London can offer on your doorstep – benefit from generous London weighting supplements that will help you make the most of it!



# JOB DESCRIPTION

Job title	Locum Consultant in Respiratory and Acute Medicine with interest in Pleural and Sleep and Ventilation
Directorate/ department	Charing cross acute and specialist medicine
Division	Medicine
Main site of activity	Charing Cross Hospital
Responsible to	Heads of Specialty in Respiratory Medicine & Acute Medicine and Clinical Directors of Respiratory Medicine and Acute Medicine
Accountable to	Divisional Director, Medicine

## 1. Background to the post

### The Sleep and Ventilation Service

The Imperial Sleep and Ventilation Service is based at The Charing Cross Hospital. The refurbished diagnostic centre re-opened in 2019 and includes a purpose-built sleep laboratory with access to the following tests: respiratory polygraphy, transcutaneous CO2 measurement, capillary and arterial blood gas analysis, actigraphy, polysomnography, and multiple sleep latency tests. We carry out 160 outpatient sleep studies and 52 inpatient sleep studies per month. We issue at least 16 CPAP devices per week and follow up at least 90 CPAP patients per week. We liaise closely with community and inpatient respiratory and oxygen teams and attend monthly regional oxygen MDT meetings to discuss type 2 respiratory failure cases. The service is currently supported by 2 respiratory consultants, one consultant clinical scientist, and three physiologists (one band 7, one band 6 and one band 5). We currently run 8 sleep clinics per week as well as a weekly home NIV clinic. The sleep service lead is Consultant Clinical Scientist Dr Gill Twigg.

### The Pleural and Intervention Service

There are bronchoscopy lists weekly at CXH, twice weekly at Hammersmith Hospital (HH) and 4 days a week at St Mary's Hospital (SMH). There is a pleural fellow and healthcare assistant to support the pleural service with an ambition to recruit a CNS in the near future. The team have a weekly pleural MDT (cross-site) attended by the respiratory team, radiology and thoracic surgery. There is an ambulatory pneumothorax pathway and weekly pleural clinics on each site. We also have a new medical thoracoscopy service as well as an established EBUS service at SMH (performing over 300 cases per year). Candidates with appropriate skills would be very welcome to join these services and travel time will be included in their job plan. The clinical lead for the pleural and intervention service is Dr Clare Ross.

## 2. Job purpose

This is a locum post, following the retirement of a consultant colleague, creating a vacancy. The post-holder will contribute to the Sleep and Ventilation Service, based at The Charing Cross Hospital (CXH) at Imperial College Healthcare NHS Trust. Candidates with other subspecialty interests, including but not limited to respiratory infection and airways disease are encouraged to apply.

The post-holder will also contribute to the acute medical take at CXH and participate in the respiratory ward consultant rota, which includes the care of patients with acute primary respiratory failure requiring non-invasive ventilation on the recently refurbished Acute Respiratory Unit at CXH.

This post, therefore, represents an opportunity to deliver excellent care to patients with respiratory disease, including sleep and ventilation and pleural disorders, in a specialist centre, supported by a well-established multi-disciplinary team. It would be suitable for both a post-CCT candidate looking to develop as a consultant in a supportive team or for a more established consultant looking to move to a larger organisation.

## 3. Key stakeholders

### 3.1 An Overview

The Division of Medicine and Integrated Care, led by Professor Frances Bowen, Divisional Director, is the largest of three Divisions within ICHT. The Division is based over three sites (St Mary's Hospital, Charing Cross Hospital and Hammersmith Hospital) and strives to provide excellent, patient-focused healthcare.

The Division is committed to the Academic Health Sciences Centre vision: to deliver advances in research directly to our patients and to provide world-class clinical care and patient experience. There are numerous examples within the Division of clinical excellence, delivered within a financially sound environment, complemented by a range of high-quality research activities, extensive teaching programs and highly regarded training posts. Our challenge is to harness our talents and partnerships for the benefit of our patients.

The Division of Medicine and Integrated Care is composed of the following directorates: Urgent & Emergency Medicine; Integrated Care; Renal; Neurosciences; Acute & Specialist Medicine SMH (Acute medicine SMH, Gastroenterology, and Hepatology); Acute & Specialist Medicine at CXH (Acute medicine CXH, Dermatology, Respiratory, Medicine for the Elderly) and Specialist Medicine HH (ID, Rheumatology, Endocrinology & Diabetes, Endoscopy).

Dr Brendan Mallia Milanes is the Head of Specialty for Respiratory Medicine, reporting to Dr Sarah Brice, Clinical director for Acute and Specialist Medicine, CXH; but also working with Dr Sarah Elkin Clinical Director for Integrated Care, Dr William Howson, the clinical director for Acute and specialist Medicine SMH and Dr Chris Wadsworth, Clinical Director for Specialist Medicine, Hammersmith. Dr George Tharakan is the Head of Specialty for Acute Medicine at Charing Cross.

### 3.2 General / Acute Medicine Services

There are Emergency Departments on the St. Mary's and Charing Cross Hospital sites, with the provision of high quality acute medical services. Specialist inpatient and day case services operate on the Hammersmith Hospital site, but there are no unselected medical admissions there.

This post-holder will support acute medicine on the Charing Cross site, which delivers a consultant-led service for all patients admitted under Acute Medicine 24 hours a day, 7 days a week, meeting the national standards for the provision of acute medical services and the 2013 London Quality standards. All commitments other than the acute take are cancelled during acute medicine commitments.

The ward areas covered by Acute Medicine/Acute Take are the Acute Medicine Unit (AMU) on the Marjory Warren Ward and the Acute Assessment Unit (AAU). There are 32 beds on AMU, 20 of which have cardiac monitors. The Acute Assessment Unit has 20 beds and accepts both medical and surgical patients.

We have adopted a biddable rota within Acute Medicine at Charing Cross hospital. This enables the holder of the post to bid for shifts. This reduces the need to swap shifts in the future and the need to cancel specialty clinics. It also supports part time and flexible working within the department. In the two years that we have used the bidding rota, all of the shifts requested are honoured. Any weekend work selected on the bidding rota will automatically reduce their commitment to weekday working. The holder of the post will be able to bid for the following roles in each week:

1. Long day AMU consultant 0800-1600 – There are two consultants who do long days
2. Short day AMU consultant 0800-1200- There are two consultants who do short days
3. Take consultant 1200-2100 – There is one consultant covering the take who will post take all patients. Should there be a sick patient requiring urgent review before 1200, one of the AMU consultants will review. The take consultant will be paid the on call supplement for covering on calls out of hours from 2100 to 0800. Consultants are rarely called during this period.

1 PA for acute medicine has been allocated in the job plan (also see job plan time-table, Table 1).

The Acute Respiratory Unit (ARU) is embedded within the 4 South Respiratory Ward and has 5 beds including one side room. Patients are seen by a Respiratory consultant daily to provide expert Respiratory consultant led care for patients admitted with acute respiratory failure or step downs from critical care areas needing ongoing respiratory support. The Unit has the facility to deliver Non-Invasive Ventilation and is consultant-led with a two to one nursing ratio for those patients on non-invasive ventilation.

The Acute Medicine service at Charing Cross Hospital works closely with the Emergency Department and with Specialty Medicine services. The AMU has a fast turnover of patients; our current length of stay is around 1.5 days. This is due to the effective delivery of consultant-led care with twice daily consultant input into patient care, great support from imaging and diagnostics, multidisciplinary approach to patient care (delivered by the OPAL team) and an excellent pharmacy team across Acute Medicine. In addition there is daily input from a consultant led cardiology team and in reach from other specialties (respiratory, gastroenterology, neurology, infectious diseases, endocrinology, psychiatry, etc.) for patients who require specialist input. Medical patients requiring more intensive nursing and medical input are managed in enhanced level 1 beds located within AMU. This will include patients with diabetic ketoacidosis and patients requiring regular neurology observations. Specialist input is sought on a case-by-case basis.



### 3.3 Respiratory Medicine

The Respiratory department aims to provide a comprehensive service for patients with pulmonary problems whilst being fully committed to developing, teaching, training and research at all levels. There are outpatient clinics and bronchoscopy units on each site and inpatient wards at St Mary's and Charing Cross, with a day case planned investigation unit at Hammersmith. Services are provided for patients from diverse social, cultural and ethnic backgrounds and from a wide geographical area.

The department has a mixture of clinicians, academics, nurse specialists, specialist physiotherapists, Respiratory physiologists and administrative staff who work closely together. The department also includes the Allergy Service, including a specialist regional drug allergy service and an expanding food allergy service. There are close links with the Infectious disease / HIV teams, Oncology departments and Thoracic surgeons and with the radiology, microbiology, histopathology and cytology departments. The department is actively involved in integrated respiratory care with Community clinics and MDTs.

All three sites have fully equipped lung function laboratories and in addition there is an exercise physiology laboratory at Hammersmith Hospital and a Sleep Centre at Charing Cross Hospital. Community services are integrated with secondary care respiratory services: there is an integrated community cardiorespiratory service for Westminster & Kensington & Chelsea and Hammersmith and Fulham, both run by Imperial with a rotational acute/ community physiotherapy and nursing posts.

The Trust is currently a nationally commissioned specialist centre for Allergy, Immunology, Interstitial lung disease and Pulmonary Hypertension/Pulmonary Vascular disease and provides a National Pulmonary AVM service.

The TB service at St Mary's is a recognized MDR TB centre and receives tertiary referrals from other units for complex and drug resistant TB.

The department provides comprehensive range of both in- and out-patient services.

#### Respiratory out-patient services

- General Respiratory out-patient clinics
- Interstitial lung disease outpatient clinics
- Tuberculosis outpatient clinics, equipped with negative pressure and upper room UV facility at SMH.
- COPD outpatient clinics including community COPD clinics and MDT
- Pulmonary rehabilitation
- Oxygen assessment clinics
- Pulmonary embolism follow-up clinics
- Lung cancer clinics
- Respiratory Infection and Bronchiectasis clinics
- Pulmonary Vasculitis clinics
- Asthma clinics
- Cough clinics
- Pulmonary hypertension clinics (under Cardiology department)
- Sleep and Ventilation clinics
- Domiciliary NIV/Respiratory failure clinics
- Day case bronchoscopy including EBUS-TBNA, endobronchial stenting
- Pleural day-case, including IPC service and medical thoracoscopy (starting soon)
- Cardiopulmonary exercise testing

- Sleep studies
- Domiciliary NIV set up
- Full lung function testing

The community respiratory service is supported by a full multi-disciplinary team of specialist nurses, physiologists, physiotherapists and a psychologist and operates clinics and diagnostic sessions alongside pulmonary rehabilitation in a number of locations.

#### Respiratory in-patient services

Respiratory at St Mary's looks after 33 beds on Manvers ward, 8 of which form the ARU, with a mix of Respiratory and Medical inpatients. Consultants do 20-day blocks on a 1 in 8 basis. 8 of the 33 beds on Manvers and 4 beds on the short stay ward are covered by the respiratory consultant working their acute days. There is a weekly combined radiology meeting with the HIV/ infection teams. There is a weekly educational meeting. There is currently no 7-day working.

Respiratory at Charing Cross looks after 19 beds on 4 South ward, 5 of which form the Acute Respiratory Unit, covered by The Respiratory Consultants on a 1 in 5 rota, rotating every three weeks. There is a weekly radiology meeting and educational meeting. There is currently no 7-day working.

Respiratory at Hammersmith provides specialist outpatient services and a respiratory review service, principally to the tertiary renal, haematology and cardiology patients and to respiratory patients admitted to the planned investigation unit for day case or short admissions. There is a weekly educational meeting and a weekly radiology meeting.

There are fortnightly regional ILD MDTs, a weekly community COPD MDT at SMH and at CXH, a weekly TB MDT, monthly TB unit meetings and quarterly TB cohort review; weekly cross-site lung cancer MDTs and nodule MDTs, the latter two held on video conferencing, and a weekly pleural MDT.

#### Research and education

ICHNT is one of the largest education, training and research centres nationally; it is the clinical partner of the Imperial Academic Health Science Centre. All of our staff are actively encouraged to become involved with education and/or research, in addition to their clinical role. There is an annual review of job plans, with potential educational or research PAs available for dedicated education, training or research time.

There is a very active respiratory research program, with a strong focus in asthma and COPD and the effects of respiratory infection. The postholder may join this or other research work streams.

Equally, Imperial has an active undergraduate and postgraduate education program, including lead provider status for the majority of NW Thames training programs. Applicants with an educational background will be encouraged to contribute to the educational program.

#### Professional Development, Revalidation, Appraisal and Job planning

At interview, the successful candidate will be given a nominated mentor to support them as a newly appointed consultant.

The trust is committed to and actively supports appraisal and revalidation, with a Deputy Medical Director responsible for Professional Development overseeing this process, an established training program for appraisers and a software system (currently L2P) used for preparing and recording appraisals, which also tracks progress and sends reminders.

Job plans are recorded electronically on L2P and reviewed at least annually, more frequently if there are significant changes. Formal meetings are held with all Consultants and the Head of Specialty, and then all plans are reviewed with the Senior Leadership team (Clinical and Divisional Directors). All job plans are annualized to allow for varying commitments. Consideration will be given during job planning for arrangements for flexible working, including lieu days where appropriate.

## Clinical Staffing

### Consultant Physicians

Clinical	Academic
<b><u>Respiratory</u></b> Dr Susannah Bloch – SMH (0.9WTE) Professor Frances Bowen – CXH Dr Joanna Brown – CXH (0.8 WTE) Professor Robina Coker – HH Dr Margaret Coleman –HH/ SMH Dr Sarah Elkin – SMH/ Community Cardiorespiratory Services Dr Hugo Farne -SMH Prof Onn Min Kon – SMH Dr Vincent Mak – HH/CXH/Community Cardiorespiratory services Dr Brendan Mallia Milanes CXH Dr Laura Martin – SMH/HH (0.7 WTE) Dr Mirae Park CXH/SMH Dr Carl Reynolds CXH Locum Consultant Dr Clare Ross – SMH/ CXH Dr Katie Ward – HH/ CXH Dr Melissa Wickremasinghe –SMH Dr Ernie Wong – SMH Dr Richard Morton- SMH Locum Consultant  <b><u>Employed by other Departments contributing to Respiratory:</u></b>	Prof. Ajit Lalvani – SMH Prof. Seb Johnston – SMH Prof. Claire Shovlin – HH Prof. Salman Siddiqui-SMH Prof. Omar Usmani –SMH Dr Chloe Bloom- Community cardiorespiratory service Dr Saira Ghafur Community CardioRespiratory service  Dr Lydia Finney-SMH/HH Dr Jamilah Meghji SMH/HH Dr Katharine Lodge (CXH/HH)

<p>Dr Rachel Davies – HH (Pulm hypertension/Cardiology)</p> <p>Dr Gulam Haji – HH (Pulm hypertension/Cardiology)</p> <p>Professor Luke Howard – HH (Pulm hypertension/Cardiology)</p> <p><b><u>Shared appointments/ visiting consultants:</u></b></p> <p>Dr Raminder Aul – Cons St George's, ILD</p> <p>Dr David Woods (HH)</p> <p>Dr Sunil Patel (HH)</p>	
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#### Trainees (Respiratory)

Post	Number posts
Specialist Registrar / Academic Clinical Fellow Training post	4 (SMH); 3 (CXH); 3 (HH)
CT1/2	2 (SMH); 1 (CXH)
FY2	2 (SMH); 2 (CXH)
FY1	4 (SMH); 2 (CXH)

#### Specialist Nursing/AHP

Post	Number of posts
Allergy CNS	3 ( 2 B7, 1 B6)
Respiratory Physiotherapists/ Practitioners	2 (1 B8b, 1 B6)
Respiratory CNS (CXH/ HH)	2 (2 B7)
Respiratory CNS ( SMH)	3 (1 B8a, 1 B7, 1 B6)
ILD CNS (SMH/ HH)	1 B8a
Respiratory outpatient nurses (SMH)	4 (1 B7, 2 B5, 1 B3)
Pleural nurse	1 B7
TB	9 (2 B8a, 4 B7, 2 B6, 1 B4)
Virtual Ward Resp CNS	2 ( 2 B7)

#### Physiologists

Post	Number of posts
Respiratory Physiologists/ Clinical Scientists/ Assistant Physiologists	1 B8b Willesden CDC ( 1B7, 2 B6, 2 B5, 1B3 SMH: 4 (1 B8a, 2.6 B6, 1B5); HH/CX: 5 (1 B7, 2.4 B6, 1 B5); Sleep: 5 (1 B8b, 1 B7, 1.87 B6, 1 B5, 1 B4, 2 B3)
Physiology administrators	1 B3 (CXH/HH), 1 B3 (SMH), 1 B3 and 1 B2 (Sleep CXH)

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#### Administrative staff

Post	Number of posts
ILD administrator	1
TB administrator	2.6
Lung cancer MDT coordinator	1
Respiratory Secretaries	2 SMH, 3 CXH, 2 HH, 1 cross site (0.8 WTE)
Allergy Secretary	1
Allergy pathway coordinator	1

#### Teaching Activities

There is an ongoing programme of clinic-based teaching, teaching ward rounds and formal lecturing for undergraduate medical students, post graduate medical staff, nurses and other professional staff groups. There is currently a vacancy for Respiratory unit training lead (postgraduate) at SMH.

The department is involved in several teaching programmes:

- For MBBS and BSc students at Imperial College London
- Within the Trust including Grand Rounds
- For Primary Care
- For regional postgraduate training days

In conjunction with the other members of the consultant team, the post holder will be responsible for providing support and training to junior medical staff and other members of the multidisciplinary team. The post holder will be expected to take an active part in teaching, in-house educational activities (CPD), clinical and educational supervision, assessment and appraisal of staff including competency based assessments. One (1) PA has been allocated to medical student teaching. 0.25PA for educational supervision of each trainee.

#### 4. Key areas of responsibilities

The post holder will work closely with other members of the team to ensure high quality acute and general medical and respiratory services within the strategic framework agreed by the team. They will work closely with the appropriate clinical management teams.

Ward responsibilities, and acute take responsibilities, will be as described above.

##### 4.1 Provide High Quality Care to Patients in Acute & General Medicine and Respiratory medicine

- The post holder must be medically qualified and maintain GMC specialist registration.
- They maintain the competencies required to carry out the duties of the post.
- They must ensure prompt attendance at agreed direct clinical care Programmed Activities.
- They must ensure patients are involved in decisions about their care and to respond to their views.
- The Trust supports the requirements of CME as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities.



## **4.2 Research, Teaching and Training**

Within the restrictions of a locum post the post holder will be encouraged to participate in or develop research within the department.

## **4.3 Performance Management**

The post holder will work with medical, nursing and managerial colleagues to ensure high performance in the following areas:

- Clinical efficiency e.g. length of stay reductions, reducing cancelled procedures and DNA rates.
- Quality of outcomes e.g. infection control targets, reducing re-admission rates.
- Financial management e.g. identification, implementation and achievement of cost improvement programmes and participating in efforts to ensure services are provided cost effectively e.g. managing locum agency spend, monitoring and managing the drug budget to target, ensuring accuracy of clinical data for the team.
- Operational efficiency e.g. day-case rates, waiting list activity and demand management.

## **4.4 Medical Staff Management**

The post holder will:

- Work with colleagues to ensure junior doctors' hours are compliant with EWTD and New Deal;
- Ensure that adequate systems and procedures are in place to control and monitor leave for junior medical staff and to ensure that there is appropriate cover within the clinical areas, including on-call commitments;
- Participate in the recruitment of junior medical staff as delegated by the Divisional management team;
- Participate in team objective setting as part of the annual job planning cycle;
- Be responsible for the ongoing appraisal of all doctors in training, Trust doctors and non-consultant grades as delegated by the Divisional management team.

## **4.5 Governance**

The post holder will:

- Review clinical outcomes in designated clinical areas using external benchmarking data where appropriate, to identify and advise variances to the Divisional management team.
- Participate in clinical audit, incident reporting and analysis and ensure resulting actions are implemented.
- Work closely with the Directorate, Patient and Public Involvement panels in relation to clinical and services developments as delegated by the Divisional management team.
- Ensure NICE clinical requirements are reviewed, implemented and monitored.
- Ensure clinical guidelines and protocols are adhered to by junior medical staff and updated on a regular basis.
- Keep fully informed about best clinical practice and ensure implications for practice changes are discussed with the Divisional management team.
- Role model good practice for infection control to all members of the multidisciplinary team.

## 4.6 Strategy and Business Planning

The post holder will:

- Participate in business planning and objective setting processes where appropriate.
- Represent the Trust at appropriate clinical networks/other external clinical meetings, as delegated by the Divisional management team.

## 4.7 Leadership and Team Working

The post holder will be expected:

- To demonstrate excellent leadership skills with regard to individual performance, clinical teams, the Trust and when participating in national initiatives.
- To work collaboratively with all members of the multi-disciplinary team and Imperial College London as required.
- To chair meetings as necessary.
- To resolve conflict and difficult situations through negotiation and discussion, involving appropriate parties.
- To adhere to Trust/Departmental guidelines on leave including reporting absence.

## 4.8 Administrative duties

The postholder will be expected to undertake the administrative duties associated with the care of individual patients, and to contribute to the proper functioning of the clinical department, including involvement in audit and clinical governance.

## 5. Job Plan

On appointment, the candidate will have a formal job plan meeting with the clinical director when the candidate will have the opportunity to make changes to the time-table to suit the candidate's needs.

During acute medicine, all other clinical commitments are cancelled. Respiratory ward commitments never overlap with acute medicine commitments.

Similar to general respiratory clinics, in sleep clinics new patients are allocated 30 minutes per slot and follow ups 15 minutes per slot. A typical clinic includes 5 new cases and 2 follow ups, but this will vary with demand on the service. These slots may be used flexibly for new or follow up patients as needed.

Table 1 Detailed Draft Individual Annualized Job Plan (EPA = Educational PA) Ta  
(This is also detailed in 2 other tables below to highlight activities when Consultant is on the respiratory ward and when Consultant is off the respiratory ward)

## SPA2, DCC 8

Day	Description of activity	Time	Occurrence	Location	DCC	No. of PAs*
Mon	Board Round	0900-1000	1 in 6	CXH	DCC	0.04
	Sleep clinic	0900-1300	5 in 6	CXH	DCC	0.8
	Lunchtime Resp. dept. education meeting	1300-1400	Weekly	CXH	SPA	0.25
	Seep and Ventilation MDT	1400-1500	Weekly	CXH	DCC	0.25
	Admin	1500-1700	weekly	CXH	DCC	0.5
Tues	Board Round	0900-1000	1 in 6	CXH	DCC	0.04
	Ward round	1000-1400	1 in 6	CXH	DCC	0.2
	Admin	0900-1300	5 in 6	CXH	DCC	0.8
	CXH X-Ray Meeting	1300-1400	Weekly	CXH	DCC	0.25
	Sleep Clinic/General Resp Clinic	1400-1700	Weekly	CXH	DCC	0.75
Wed	Board Round	0900-1000	1 in 6	CXH	DCC	0.04
	Joint Physiology+Consultant NIV clinic/MDT	10-00-1200	5 in 6	CXH/HH	DCC	0.4
	Sleep vetting CXH	1200-1300	Weekly	CXH	DCC	0.25
	Sleep clinic	13.00-17.00	Weekly	CXH	DCC	1
Thur	Board Round	0900-1000	1 in 6	CXH	DCC	0.04
	Education	1000-1300	2 trainee	CXH	EPA	0.5
	Undergraduate teaching	1300-1400	Weekly	CXH	SPA	0.25
	Bronchoscopy	1400-1700	1 in 4	CXH	DCC	0.2
	Sleep reporting (decision on starting CPAP)	1400-1700	3 in 4	CXH	DCC	0.6
Fri	Board Round	0900-1000	1 in 6	CXH	DCC	0.04
	Ward Round	1000-1400	1 in 6	CXH	DCC	0.2
	Sleep Reporting (decision on starting CPAP)	09:00-12:00	5 in 6	CXH	DCC	0.63
	CPD/Appraisal/revalidation	1200-1700	5 in 6	CXH	SPA	1
	Acute Medical Take**			CXH	DCC	1
Total	Total					10

**\*1 hour admin for every 4 hours of clinical care; administration time is included in vetting and MDT preparation**

**\*\*All clinical commitments cancelled during acute medical work**

### 5.2 Regular meetings

- Departmental meeting (weekly)
- quarterly cross-site Lung cancer meeting; quarterly cross-site Pleural Service meeting annual cross-site departmental meeting
- Acute medical consultants' meeting (monthly).

### 5.3 On call

See above.

### 5.4 Administrative/Secretarial Support

The Post holder will be supported by the Respiratory Secretaries at CXH.

### 5.5 Office Facilities

The post holder will have office space allocated to them with computer access at SMH. The Trust provides comprehensive Internet access and IT support.

#### PERSON SPECIFICATION

<b>Post:</b>	<b>Consultant in Respiratory &amp; Acute Medicine</b>
<b>Divisional Director:</b>	Professor Frances Bowen
<b>Clinical Directors:</b>	
<i>SMH Acute and Specialist Medicine</i>	Dr William Howson
<b>Heads of Specialty:</b>	
<i>Respiratory Medicine</i>	Dr Brendan Mallia Milanes
<i>Acute Medicine</i>	Dr Azara Janmohamed

Attributes/skills	Essential	Desirable	Measurement
Qualifications	GMC registered Medical Practitioner  MRCP(UK) or an equivalent qualification.  Entry on the General Medical Council (GMC) Specialist Register via one of the following: a. Certificate of Completion of Training (CCT) (the proposed CCT date must be within 6 months of the interview) b. Certificate of Eligibility for Specialist Registration (CESR) c. European Community Rights	Higher qualifications MD, PhD	Application form
Knowledge/Skills  Clinical expertise in specialty/sub specialty	CCT in Respiratory and general internal medicine  Independent practice in bronchoscopy	Pleural ultrasound level 2  IT skills/experience with Cerner electronic health records and e-prescribing	Application form / interview

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	<p>Pleural ultrasound level 1</p> <p>Experience of working in a sleep and ventilation clinic</p> <p>IT Skills and computer literacy</p> <p>Competency in NIV/management of acute respiratory failure</p> <p>Experience of leading acute unselected medical take</p>		
Leadership/ Management skills	<p>Able to take responsibility, show leadership, make decisions, exert appropriate authority.</p> <p>Have proven skills in leading, motivating, developing and managing the performance of colleagues.</p> <p>Knowledge of finance/budgets</p> <p>Management of staff</p>		Application form / interview
Teaching & Training	<p>Experience of teaching and training undergraduates / postgraduates and junior medical staff</p>	<p>Formal educational role or qualification; accredited trainer meeting GMC standards under professional development framework</p>	Application form / interview
Audit	<p>Understanding of principles of clinical audit</p> <p>Leading audits</p> <p>Experience of submitting and reviewing data for national lung cancer clinical audit</p>		Application form / interview



Academic achievements including research/publications	Evidence of achievement appropriate to appointment at consultant level at ICHT	Experience of lung cancer or pleural research Experience of commercial and NIHR funded studies	Application form / interview
Language	Able to speak and write English to the appropriate standard necessary to fulfill the job requirements		Application form/ interview
Interpersonal Skills	Excellent written and spoken communication, ability to build rapport, work with others  Persuade, negotiate  Empathy, understanding, listening skills, patience, social skills appropriate to different individuals  Able to change and adapt, respond to changing circumstances and to cope with setbacks or pressure Able to work as part of a team		Interview
Probity	Honesty, integrity, appreciation of ethical dilemmas. Must be able to demonstrate and model the key Trust values of respect, care, innovation, pride and achievement		
Physical requirements	Occupational health clearance for the role specified		Occupational health Interview

## Additional information

### 1. Health and safety

All staff are required to make positive efforts to maintain their own personal safety and that of others by taking reasonable care, carrying out requirements of the law while following recognised codes of practice and Trust policies on health and safety.

## **2. Medical examinations**

All appointments are conditional upon prior health clearance. Failure to provide continuing satisfactory evidence if required, e.g. of immunization, will be regarded as a breach of contract.

## **3. Equal opportunities**

The Trust aims to promote equal opportunities. A copy of our Equality Opportunities Policy is available from the Human Resources department. Members of staff must ensure that they treat other members of staff, patients and visitors with dignity and respect at all times and report any breaches of this to the appropriate manager.

## **4. Safeguarding children and vulnerable adults**

Post holders have a general responsibility for safeguarding children and vulnerable adults in the course of their daily duties and for ensuring that they are aware of specific duties relating to their role.

## **5. Disclosure & Barring Service/safeguarding children and vulnerable adults**

Applicants for many posts in the NHS are exempt from the Rehabilitation of Offenders Act 1974. Applicants who are offered employment for such posts will be subject to a criminal record check from the Disclosure & Barring Service before appointment is confirmed. This includes details of cautions, reprimands and final warnings, as well as convictions. [Find out more about the Disclosure & Barring Service](#). Post holders have a general responsibility for safeguarding children and vulnerable adults in the course of their daily duties and for ensuring that they are aware of specific duties relating to their role. Staff are obliged to disclose to the Trust during employment any pending criminal convictions, including cautions, and any other information relevant to the safeguarding of children or vulnerable adults.

## **6. Professional registration**

Staff undertaking work which requires professional registration are responsible for ensuring that they are so registered and that they comply with any codes of conduct applicable to that profession. Proof of registration must be produced on appointment and at any time subsequently on request.

## **7. Work visa/ permits/Leave to remain**

If you are a non-resident of the UK or EEA you are required to have a valid work visa and leave to remain in the UK, which is renewed as required. The Trust is unable to employ or continue to employ you if you require but do not have a valid work visa and/or leave to remain in the UK.

## **8. Conflict of interests**

You may not, without the consent of the Trust, engage in any outside employment and in particular you are disqualified from an appointment as a chair or Non-Executive Director of another NHS Trust while you are employed by this Trust. In accordance with the Trust's Conflict of Interest Policy you must declare to your manager all private interests which could potentially result in personal gain as a consequence of your employment position in the Trust. The NHS Code of Conduct and Standards of Business Conduct for NHS Staff require

you to declare all situations where you or a close relative or associate has a controlling interest in a business or in any activity which may compete for any NHS contracts to supply goods or services to the Trust. You must therefore register such interests with the Trust, either on appointment or subsequently.

## **9. Infection control**

It is the responsibility of all staff, whether clinical or non-clinical, to familiarise themselves with, and adhere to, current policy in relation to the prevention of the spread of infection and the wearing of uniforms.

**Clinical staff** – on entering and leaving clinical areas, and between contacts with patients, staff should ensure that they apply alcohol gel to their hands and wash their hands frequently with soap and water. In addition, staff should ensure the appropriate use of personal protective clothing and the appropriate administration of antibiotic therapy. Staff are required to communicate any infection risks to the infection control team and, upon receipt of their advice, report hospital-acquired infections in line with the Trust's Incident Reporting Policy.

**Non clinical staff and sub-contracted staff** – on entering and leaving clinical areas and between contacts with patients all staff should ensure they apply alcohol gel to their hands and be guided by clinical staff as to further preventative measures required. It is also essential for staff to wash their hands frequently with soap and water.

**Flu vaccination** – All patient-facing staff are required to have the flu vaccination on an annual basis, provided free of charge by the Trust. Staff have a responsibility to encourage adherence with policy amongst colleagues, visitors and patients and should challenge those who do not comply. You are also required to keep up to date with the latest infection control guidance via the documents' library section on the intranet.

## **10. No smoking**

The Trust operates a smoke free policy.

## **11. Professional association/trade union membership**

The Trust is committed to working in partnership with trades unions and actively encourages staff to join any trade union of their choice, subject to any rules for membership that the Trade Union may apply.