

Job Description

| Job Details | |
|--|--|
| Job Title: | Consultant Ophthalmologist – Glaucoma |
| Business Unit: | Surgery Critical Care & Clinical Support |
| Location: | Trustwide |
| Grade: | Consultant |
| <p>All staff are expected to work to the Trust Values:</p> <ul style="list-style-type: none"> Kindness – Kindness and compassion cost nothing, yet accomplish a great deal. Respect - We are respectful to everyone and are open, honest and fair – respect behaviours. Ambition – We set goals to achieve the best for our patients, teams, organisations and our partners. Collaboration – We are stronger and better working together with and for our patients. | |

Job Summary

We are looking for a dynamic and forward-thinking Consultant Ophthalmologist – specialising in Glaucoma - to complete a supportive team of specialists covering North Cumbria. The Directorate would equally welcome applications from existing and newly trained Consultants.

This replacement post is based in the Eye Department at the Cumberland Infirmary, Carlisle (CIC) and West Cumberland Hospital, Whitehaven (WCH). The Department consists of 8 WTE Consultant Ophthalmologists, 4 Specialty Doctors, 4 part time GPwSIs, 1 Specialty Trainee (ST2), 1 FY2 doctor, 1 GP trainee, 4 Orthoptists, 2 part time Optometrists, 2 Medical Photographers, 3 Nurse Specialists and ophthalmic trained nurses as well as general nurses and HCAs. All the consultants are required to work across site on a rotational basis at the Cumberland Infirmary and West Cumberland Hospital in Whitehaven (WCH). Clinics are also run at Workington, Penrith and Keswick.

Applicants will be encouraged to develop their subspecialty expertise and to support the development of a leading ophthalmic consultant team. The Ophthalmology service offers general ophthalmic care and a high volume cataract service as well as medical and surgical retina, oculoplastic surgery, glaucoma care, corneal surgery and paediatric and strabismus surgery.

The Ophthalmology team includes Mr Ainsworth, Mr Zaheen, Mr Hassan plus 3 WTE locum consultants, who work as a team across both sites.

There is provision for remote access to Trust IT systems and working from home can be arranged on occasions with agreement from the Clinical Director. The on-call commitment is on a 1:6 second on call basis for general ophthalmic cover. It is expected that the appointee will contribute equally to the out-of-hours-work and on-call rota.

Voted one of the best places to live in the UK, North Cumbria houses the Lake District, one of the country's most outstanding places of natural beauty and the region is an attractive, largely rural area with access to good road, rail and air communications. Housing is relatively inexpensive and there are excellent state and private education establishments.

North Cumbria University Hospitals NHS Trust is committed to assisting all employees to achieve a work-life balance, regardless of their personal circumstances. Any applicant who is unable, for personal reasons, to work full-time, will be eligible to be considered for the post. If such a person is appointed, modification of the job content will be discussed on a personal basis in consultation with consultant colleagues.

The Ophthalmology Service – the future

There is a clear vision for integrated eye health services in West, North & East Cumbria.

We are looking for candidates who are interested in developing innovative ophthalmic practice; helping to bridge the gap between acute hospital care, community and primary care. Our post offers an exciting opportunity for an ophthalmologist to help us develop a 'whole system' approach to delivering safe and effective modern eye care.

Local partners

Integrated Care Communities have been designed to deliver joined up care involving the NHS, social care providers and the voluntary sector. West, North and East Cumbria has been organised into eight areas – based upon natural communities of between 20,000 and 70,000 people – to start working in an integrated way at a local level. These are our Integrated Care Communities (ICCs).

The Ophthalmology Service – past and present

Introduction

The two ophthalmology departments of the West Cumberland Hospital and the Cumberland Infirmary united to form one unit when the North Cumbria Hospitals Trust formed in 2001. This allowed cross cover and further subspecialisation within the Eye Department.

Subspecialties currently offered include corneal surgery, oculoplastic surgery, glaucoma treatments plants, Medical Retina and strabismus surgery.

It is anticipated that the post holder will develop an area of interest which will complement the existing team within North Cumbria.

The Environment

Both main hospital sites have dedicated eye theatres with ceiling mounted microscopes and the vast majority of surgery is undertaken as day case procedures under local anaesthesia.

Satellite clinics take place as part of “Closer to Home” in Workington, Keswick and Penrith.

As with all North Cumbrian appointments, and in line with the Terms and Conditions of Consultant Medical Staff 2003, Consultants will be required to work Trust wide.

The main base for Ophthalmology is at the Cumberland Infirmary, Carlisle (CIC) which is the hub for all major emergency and elective ophthalmic surgery. A newly rebuilt hospital at the West Cumberland Hospital site, Whitehaven (WCH), has allowed us to have a self-contained eye unit built and it is crucial for ambulatory activity and short-stay surgery. The successful candidate will perform day case surgery and outpatients clinics at both the Cumberland Infirmary and the West Cumberland Hospital.

Both main sites have fundus fluorescein angiography (and ICG at CIC), OCT scanning and Humphrey field analysers. The Workington, Keswick and Penrith sites have Humphrey field analysis with OCT at Workington and GDX at Penrith.

The Cumberland Infirmary also boasts corneal topography, a Retcam and a Kowa 3D camera. The trust aims to move to electronic patient records for Ophthalmology in the near future.

The Post

The successful candidate will join a team of consultant ophthalmologists, with specialist interests, who provide general ophthalmic services across North Cumbria to serve a population of approx. 360,000 with some referrals also coming from part of South West Scotland and West Northumbria.

The current consultants are, Mr Ainsworth (corneal and glaucoma), Mr Hassan (Medical Retina), Mr Zaheen (oculoplastics), Mr Sharaawy (Vitreoretinal) and Mr Zia (Glaucoma, Medical Retina & Cataract)

The successful applicant will need to be competent in their subspecialty.

The Cumberland Infirmary, Carlisle and the West Cumberland Hospital, Whitehaven are one Trust with cross-site clinics occurring in all ophthalmic subspecialties. Clinics are also held in satellite centres at Workington, Penrith and Keswick with Humphrey Field Perimetry at all sites and GDX at Penrith and OCT at Workington. Both main hospital sites have OCT scanning, B scanners and fluorescein angiography facilities and experienced photographers.

A small number of in-patient beds are available at, and out of hours work is directed to, the Cumberland Infirmary site. We have a dedicated eye theatre on each main site both with ceiling mounted Zeiss microscopes and Infiniti phacoemulsification machines. Each hospital ophthalmic unit has a day case suite and purpose built out-patients.

Nurse-led clinics in glaucoma, YAG capsulotomy, SLT, botulinum toxin and minor ops run alongside the consultant led and emergency eye clinics. The AMD service is supported by nurse injectors at both main sites.

There is a full orthoptist service at Carlisle, Workington and Whitehaven. Peripheral clinics are held in Keswick, Penrith and Workington.

Tertiary referrals are made to the regional centres, with which the Department has close links.

The hospital has a fully comprehensive laboratory service providing histopathology, microbiology, haematology, biochemistry and radiotherapy plus a Medical Physics Department and radiology providing general ultra-sound and CT/MRI scanning.

The Department is supported by one Speciality Trainee (ST2 - rotating within the Northern Deanery), a GP Trainee and one Foundation Year 2 doctor. We are also supported by four General Practitioners with a special interest in Ophthalmology (GPwSIs) who work part-time within the department and run community clinics, 3 specialist nurses, one full time and two part time optometrists, 3 orthoptists, 2 photographers and enthusiastic, experienced nurses.

As part of the Success Regime our links with the community, in particular with GPwSIs and optometrists, are being strengthened and extended as we become part of the West, North and East Integrated Healthcare System. We also have a close working relationship with the Diabetic Eye Screening Programme (DESP), run by NHS England.

Teaching and Training and Clinical Audit and Research

The Department holds a once weekly Tuesday morning local teaching session and during term time there is regional teaching organised by the Northern Deanery on a weekly basis. There are monthly Business and Surgical Directorate meetings and 4 monthly all-day audit meetings for the Solway Eye Group, held in conjunction with Dumfries & Galloway Royal Infirmary, Furness General Hospital in Barrow and Lancaster Hospitals. Clinical Governance meetings are also held. The appointee will be expected to contribute to, and where appropriate take the initiative in, aspects of clinical audit, development and implementation of agreed clinical guidelines, within North Cumbria as a whole, in collaboration with relevant colleagues.

The successful applicant will be expected to take a major interest in the development of and supervision of postgraduate trainees, and will be expected to become an educational supervisor for one or more trainees which will be reflected in their job plan.

Senior clinical colleagues will provide mentorship.

The Trust has an active research and development department which can help set up projects and liaise with other local research networks.

Please see the Trust Corporate Brochure for more information.

Other Duties: Flexible Commitments

The remainder of the appointee's professional time will be deployed flexibly on other clinical duties, administration, liaison with relatives, teaching, research, clinical audit, grand rounds, special interests, continuing medical education and professional development. (Details of this part of the Job Plan arrangements will be agreed with the successful applicant).

All consultants participate in Consultant Appraisal and Job Plan Review on an annual basis and the revalidating process when necessary. The Trust will support revalidation.

Our organisation sees the mentoring and 'settling in' programme as delivering benefits for all involved and we are keen to develop it further

Secretarial Support

Secretarial support will be available to the successful candidate. Office accommodation and a personal computer with internet access will also be provided.

Team Structure

The following table outlines the Team Structure within the Eye Service.

| | Position held | Name |
|-----------------|---|---|
| Management Team | Collaborative Chair | Mr Raj Dharmarajan |
| | Collaborative Lead Nurse | Lisa Cairns |
| | General Manager | Paula McBride |
| | Interim Clinical Director for Ophthalmology | Jason Cram |
| | Service Manager | Amie Simmonds |
| | Consultant Colleagues | Mr Gerard Ainsworth Mr Ashraf Hassan Mr Mohammad Shaikh Mr Sherif Sharaaway Mr Mohammad Zaheen Mr Amer Zia |

Education, Qualifications, Knowledge and Experience

The following define the theoretical, practical, professional and specialist knowledge required for the post (see also Person Specification in appendix 3 and Competency Framework in appendix 4).

Essential

- Fellow of the Royal College of Ophthalmologists or equivalent.
- Accreditation in Ophthalmology
- Clinical training and experience equivalent to that required to gain entry to UK CCT.
- To be eligible for consideration for a Consultant appointment by an Appointments Committee, candidates must be fully registered on the UK General Medical Council's Specialist Register. Specialist Registrars may apply if within 6 months of CCT at date of the interview.
- The appointee will be required to maintain full GMC registration and revalidation and should follow the GMC Code of Good Medical Practice.

Desirable

- Post CCT fellowship in applicable sub-specialty
- Experience of Audit Management.
- Experience of teaching.
- Formal training in Clinical Supervision/train the trainers.

Main Duties

The appointee will, together with the existing consultant colleagues be responsible for the provision of a comprehensive, efficient, and cost-effective clinical Ophthalmic service to the Trust and other users of the service.

Proposed Job Plan

The post will be flexibly time-tabled to meet the demands of the service and the timing of sessions may change as the service develops.

The 1 WTE Job Plan will typically include an average of 7.5 Direct Clinical Care PAs, 1 Admin PA and 1.5 SPAs/Teaching time. A proposed job plan has been outlined in Appendix 1 and will be agreed on commencement of appointment.

Clinical liaison

The appointee will ensure liaison in a timely manner with all clinicians, hospital staff, medical microbiologists, general practitioners and public health consultants concerning the diagnosis, and management of patients. The appointee will take a leadership role within the Trust/hospital in matters relating to their subspecialty.

Clinical duties

All consultants will be expected to contribute to the following:

- Day to day running of the eye department
- authorisation and interpretation of results
- involvement in policy and Standard Operating Procedure (SOP) preparation
- responsibility for quality assurance performance within the department, including taking part in all relevant national external quality assurance (NEQAS) programmes
- responsibility for achieving and maintaining full accreditation with Clinical Accreditation (UK) Ltd, or an equivalent agency
- business planning, including the assessment and introduction of new methods, and forward planning for staff and equipment requirements.

The appointee will be expected to comply with health and safety and security requirements and with agreed SOPs and investigational algorithms.

The appointee will be expected to provide advice on emergency eye problems to juniors, nursing staff and General Practitioners.

The appointee will be expected to participate in the relevant hospital committees to achieve the outcomes identified above.

Service Provision and Development

The post holder will be jointly responsible for the provision of Clinical Ophthalmic services to the population of North Cumbria.

They will manage their personal workload in such a way to ensure where possible service contract levels are achieved. They will participate in the provision of cover on a shared basis with colleagues for periods of annual, sickness and study leave, except for prolonged absence where locum cover may be necessary.

They will provide continuing clinical responsibility for patients under their care and assume responsibility for and facilitate contact with members of staff with delegated duties for personally accountable patient care.

Main Terms and Conditions of Service

This post is a Trust appointment and will be subject to the new Terms and Conditions – Consultants (England) 2003 as amended from time to time. The Trust has established a Joint Negotiating Consulting Committee for negotiating changes to terms and conditions of service, which will then be incorporated into the handbooks and become part of your employment contract.

Candidates appointed to an NHS Consultant for the first time will be offered a salary on the minimum scales except where a higher salary is justified by taking into account any previous consultant level experience recognised by the Trust for this purpose.

Any offer of employment with the Trust will be subject to satisfactory pre-employment checks as defined in Health Service Circular 2002/008

- references
- qualification/registration verification
- occupational health clearance
- DBS clearance
- identity verification
- eligibility to work in the U.K

and in accordance with Department of Health guidelines relating to 'Health Clearance for Tuberculosis, Hepatitis B, Hepatitis C and HIV: New Healthcare Workers'.

Your private residence shall be maintained in contact with the public telephone service and shall be not more than 30 minutes or 10 miles by road from the base unit (Cumberland Infirmary, Carlisle) unless specific approval is otherwise given by the Trust.

Your principal hospital, for the purposes of reimbursement of travelling expenses, will be Cumberland Infirmary, Carlisle.

Professional Registration

It is the responsibility of individual doctors to hold current GMC Registration with a current licence to practise.

Professional Code of Practice

As a Registered professional, you are required to abide by the GMC's 'Good Medical Practice' (Regulating doctors, ensuring good medical practice). Disreputable behaviour, even if it is not directly connected to your professional practice, or failure to abide by the principles outlined by your code of practice mentioned above could put your registration as well as your continuing employment at risk. You should be aware that any breaches of your code of practice will be investigated in line with Trust policy, and action taken where appropriate, including reporting the misconduct to the GMC/NCAS.

Health & Safety Management Responsibilities

The Trust recognises it's duties under the Health and Safety at Work Act 1974 to ensure as far as reasonably practicable, the health, safety and welfare at work of all employees. In addition, the business of the Trust shall be conducted so far as to ensure that patients, their relatives, contractors, voluntary workers, visitors and members of the public having access to Trust premises and facilities are not exposed to risk to their health and safety.

Managers have a duty to ensure that safe systems of work are used within their areas of responsibility and must investigate accidents and incidents, arrange annual risk assessments and ensure all staff attend appropriate health and safety training.

All employees have a duty to take reasonable care for their own health and safety, and that of others who may be affected by their activities; to co-operate with the Trust by complying with all health and safety rules and safe systems of work; and to inform their line manager of any work situation, or practice which may be considered a danger to health and safety.

Travel and Subsistence

Travel and subsistence expenses will be reimbursed for preliminary visits in addition to interview expenses only to those candidates selected for interview. Reimbursement is restricted to two such visits, whether they are made before or after the constitution of the short list is known. In the case of candidates traveling from abroad, traveling expenses are normally payable only from point of entry to the United Kingdom

Freedom to Act

- To maintain ones own high professional standards and discuss opportunities to develop clinical practice with the line manager
- Alert the line manager or on call management team of any untoward situation
- To take charge of the management of a group of patients on a regular basis, acting as named nurse / primary nurse and after a period of training and development regularly take charge of the ward

Communications and Relationships

Providing and receiving routine day to day information to work colleagues patients and relatives e.g. notifying staff and changes in patient condition.

Required to use basic tact or persuasive skills with patients or clients as necessary

Required to provide and receive complex or sensitive information. e.g. providing contentious care related information to patients and relatives

Internal

Ward Team
Senior Nurses
Doctors
AHP
Managers/Directors
Clinical Directors
Administration

External

District Nurses
Social Services
Relatives and Carers

Work Setting and Review

Work unsupervised to tasks as set by the Nurse in Charge. The Sister / Charge Nurse will review performance and undertake appraisal.

Individual Responsibilities

The post holder is expected to:

- adhere to Trust policies and procedures and relevant legislation including the requirements of any professional bodies;
- attend and complete mandatory training as identified by the Trust.

Confidentiality

All Trust staff and contractors working for the Trust have both a common law duty and a statutory duty of confidentiality to protect patient (and indeed any personally identifiable) information and only use it for the purposes for which it was intended. The disclosure and use of confidential patient information needs to be both lawful and ethical.

Information Governance

Trust staff must keep up-to-date with the requirements of information governance and must follow Trust policies and procedures to ensure that Trust information is dealt with legally, securely, efficiently and effectively. It is important that the trust processes personally identifiable data (PID) only in accordance with its notification to the information commissioner (accessible via the website www.ico.gov.uk) Staff creating new systems (e.g. databases or spreadsheets) to process PID therefore need to check with the data protection officer that this is permissible. Staff must appropriately manage the records they create or hold during the course of their employment with the Trust, making the records available for sharing in a controlled manner, subject to statutory requirements and agreed security and confidentiality policies, procedures and guidelines (e.g. Freedom of Information Act 2000, Caldicott guidelines). If you are required to make entries into health records, you must ensure these entries are legible and attributable, and that record keeping is contemporaneous.

Health and Safety

All managers have a general accountability for ensuring, so far as is reasonably practicable, the health, safety and welfare of the employees under their direction at work.

- Each employee is responsible to take reasonable care for their own acts or omissions and the effect that these may have upon the safety of themselves or any other person.
- Every employee must use safety equipment or clothing in a proper manner and for the purpose intended.
- Any employee who intentionally or recklessly misuses anything supplied in the interests of health and safety will be subject to disciplinary procedures.
- Every employee must work in accordance with any health and safety procedures, instructions or training that has been given.
- No employee may undertake any task for which they have not been authorised and for which they are not adequately trained.
- Every employee is required to bring to the attention of a responsible person any perceived shortcoming in safety arrangements or any defects in work equipment.
- All employees are under a duty to familiarise themselves with the risk management and fire, health & safety policies.

The Trust provides an annual update on governance and health & safety issues to staff.

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| <p>Risk Management</p> |
| <p>You are responsible for ensuring that you become familiar with the requirements stated within the Trust’s risk management strategy and that you comply with the Trust’s risk management policies and procedures. Your specific responsibility for risk management will be clarified to you by your head of department at your local induction.</p> |
| <p>Equal Opportunities</p> |
| <p>The Trust has adopted an equal opportunities policy and all employees must be aware of their obligations to abide by the spirit and nature of the policy to avoid direct and indirect discrimination. You are required to attend equality & diversity training, and where appropriate equality impact assessment training, and cascade best practice to your team.</p> |
| <p>Safeguarding</p> |
| <p>All employees have a duty for safeguarding and promoting the welfare of children and adults at risk. Staff must be familiar with the Trust’s Safeguarding Policy and the process for raising concerns about the welfare of anyone with whom they have contact. Staff must also ensure they receive the appropriate level of safeguarding children and adult training depending on their role in the Trust.</p> |
| <p>Induction</p> |
| <p>All new members of staff must attend corporate induction. Details are sent with the letter of appointment. Line managers are responsible for checking attendance at corporate induction, and for ensuring that local induction commences on the first day of employment on the ward / department.</p> |
| <p>Corporate Governance Arrangements</p> |
| <p>You will be expected to familiarise yourself with the Trust’s governance strategy which outlines the management and committee structures and procedures for the governance of the Trust’s activities. You will have a duty to familiarise yourself with the relevant policies and procedures, i.e.</p> <ul style="list-style-type: none"> health & safety policies. risk management policies. infection control policies. data protection and confidentiality policies. <p>These must be complied with by staff at all times.</p> |

Appendix 1

Example Job Plan - Consultant Ophthalmologist

The Full-time working week will consist of 10 Programmed Activities (PA's), separated into:

7.5 Direct Clinical Care PAs

1.0 Direct Clinical Care /Admin

1.5 Teaching / Supporting Professional Activities

Example weekly timetable of fixed commitments: The agreed number of SPA's will be delivered flexibly.

| | MON | TUES | WED | THURS | FRI |
|----|--------|--------|------------------|--------|---------|
| AM | Clinic | Clinic | Theatre | Clinic | Clinic |
| PM | SPA | Admin | Teaching/SP A | Clinic | Theatre |

The job plan is subject to review once a year with the Consultant and Clinical Director.

Note: This is **an example of a weekly timetable**, which will be discussed further with the successful appointee. Although some rotation of weekly sessions and travel between hospitals will be necessary, the final job plan will be agreed after appointment.

On-call for emergencies: The Consultant will participate in the Category B on-call rota, which attracts an availability supplement. It should be noted under the Terms and Conditions Consultants (England) 2003, schedule 2, paragraph 1, it states that a Hospital Consultant has continuing clinical and professional responsibility for any patient admitted under his or her care.

This job description may change in the future to take account of further changes in light of Service Development and the consultant contract.

The successful candidate will be encouraged to develop any particular interest she or he has and a timetable will be agreed in advance, to reflect the particular interests of the applicant, the specialist interests of the existing Consultants, and the needs of the Trust.

The remainder of the appointee's professional time will be deployed flexibly on other clinical duties, administration, teaching, research, clinical audit, continuing medical education and professional development. (Details of this part of the Job Plan arrangements will be agreed with the successful applicant).

The job plan is subject to review once a year by the Consultant and Divisional Management in accordance with Schedule 3 of the Terms and Conditions Consultants (2003). Either may propose amendment of the Job Plan to help ensure through participating in Job Plan reviews that the Job Plan meets the criteria set out in the Terms and Conditions and that it contributes to the efficient and effective use of NHS resources.

For this purpose, those involved, should have a copy of the current job plan including up to date work programmes and relevant departmental statistical information, together with notes provided by either side of any new or proposed service or other developments.

All doctors should be familiar with the GMC requirements governing good medical practice, which is supported by the Trust.

Appendix 2

Person Specification – Medical Retina Consultant

| REQUIREMENT | ESSENTIAL | DESIRABLE |
|---|--|--|
| Education & Qualifications | <ul style="list-style-type: none"> • FRCOphth or equivalent • Full GMC registration • Inclusion on the Specialist Registrar in Ophthalmology (or within six months of inclusion on GMC specialist register) • Holder of Certificate of Completion of Training (CCT) or within six months of award of CCT or equivalent by date of interview. | Post CCT fellowship in applicable sub-specialty |
| Experience & Knowledge | <ul style="list-style-type: none"> • High standard of clinical skill and expertise in clinical Ophthalmology • Clinical Governance • Ability to offer expert clinical opinion on range of clinical Ophthalmology problems both emergency and elective and in primary care. • Ability to take full and independent responsibility for liaising with clinical staff for the clinical care of patients. | Experience in High Volume Cataract surgery |
| Management & Administrative | <ul style="list-style-type: none"> • Ability to advise on efficient and smooth running of their chosen subspecialty service. • Ability to cover on call. | <ul style="list-style-type: none"> • Experience of audit management |
| Teaching | <ul style="list-style-type: none"> • Experience of and commitment to teaching undergraduate and postgraduate medical staff. • Ability to teach clinical and personal skills required for Ophthalmic care | <ul style="list-style-type: none"> • Experience of teaching basic clinical skills to undergraduates • Teaching of non-medical health professionals. • Educational Qualification |
| Research, Audit and Clinical Governance | <ul style="list-style-type: none"> • Experience of, and commitment to, medical audit. | <ul style="list-style-type: none"> • Ability to supervise postgraduate research • Publications in referred journals |

| | | |
|---|---|--|
| Communication skills and abilities | <ul style="list-style-type: none"> • Empathetic and sensitive approach to patient needs • Approachable and effective multi-disciplinary team member with excellent interpersonal skills • Team loyalty • Positive approach to lessons learnt • Confident approach without being arrogant | <ul style="list-style-type: none"> • IT Skills • Presentation skills |
| Continued Professional / Personal Development | <ul style="list-style-type: none"> • Demonstrable evidence of lifelong learning. • Reflective approach to personal development with an ability to acknowledge and effectively manage poor performance. • Participation in appropriate peer review processes. | |
| Personal Attributes | <ul style="list-style-type: none"> • See Consultant Competency Framework (appendix 4) • Participation in on call and emergency cover. | |

| Job Description Agreement | |
|----------------------------------|-------|
| Post holder's signature | _____ |
| Date | _____ |
| Line Manager's signature | _____ |
| Date | _____ |