

# Job title

Consultant Paediatrician with a special interest in Neurology



# Welcome from the Chief Medical Officer

Dear Candidate,

I am delighted that you are interested in a medical career at Barking, Havering, and Redbridge University Hospitals NHS Trust (BHRUT). We are a large teaching Trust located in Northeast London. Our vision is to provide outstanding healthcare to our community, delivered with pride. It is driven by our PRIDE values and behaviours which were developed together with our staff.

Our major sites – King George Hospital in Ilford and Queen’s Hospital in Romford – are in excellent locations, less than 30 minutes from Central London, easily accessible to the coast, and the Essex countryside. We operate two emergency departments and offer a full range of acute services. We have a neuroscience centre, a cancer centre, and a hyper acute stroke unit to provide specialist care.

Our hospitals offer a range of exciting opportunities, and we have a huge range of services where you will get amazing clinical exposure. We provide care for the residents of three of the most diverse London boroughs.

We have a strong commitment to the delivery of high-quality education and training across all grades of doctors. We tailor the education and training programme to the needs, skills, experience and competence of each doctor and their specialty.

We have a clear clinically led strategy to transform secondary care in Northeast London. This includes our close working relationship with Barts Health, to tackle our waiting lists, improve our urgent and emergency care. Our doctors are fundamental to achieving this and we want to ensure that all our patients have the best experience and outcome in our care.

I wish you every success with your application.



A handwritten signature in black ink that reads "Mamta" with a small flourish underneath.

Mamta Vaidya

## About us

With a dedicated workforce of more than 7,500 staff and volunteers and an income of £570m, we are one of the larger acute trusts in the country.

We provide care for a population of around 750,000 people across northeast London (NEL) and that number is predicted to increase by 15 per cent over the next ten years. We serve three London boroughs with diverse populations, and more than half of our workforce identify as Black, Asian, or Minority Ethnic. In addition, eight out of every ten employees are women, and most of our workforce lives within the host boroughs of Barking and Dagenham, Havering, and Redbridge.

We also provide healthcare services to people in southwest Essex, and specialist neurosciences services to the whole of the county.

Our services include all the major specialties of large acute hospitals, operating from two main sites - King George Hospital in Goodmayes and Queen's Hospital in Romford. We also provide outpatient services at Brentwood Community Hospital, Barking Hospital, Loxford Polyclinic and Harold Wood Polyclinic. We have two of the busiest emergency departments in London - in 2019/20, emergency and urgent attendances (Type 1 & 2) were 189,518 and there were nearly 65,000 ambulance arrivals at both sites.

Over recent years, our Trust has made significant improvements to the quality of care we provide patients. Four years ago, following a re-inspection of services by the Care Quality Commission, we were taken out of quality special measures, and have improved our overall rating from 'Inadequate' to 'Requires Improvement'. Since then, ongoing improvements in the quality of care have been recognised by various external partners and organisations. In early 2018, the Trust entered Financial Special Measures. A Financial Recovery Plan is in place to deliver the financial savings required over the coming years.

Like other trusts across the country, Covid-19 meant we had to transform, overnight, the way we cared for patients and delivered services. Collaborative working with system colleagues ensured we were one of the first to set up a long Covid clinic that is proving invaluable in supporting the ongoing needs of residents. During the vaccine rollout, King George Hospital was designated a vaccination centre and was established and launched in just seven days.

We have been making good progress as we respond to the needs of those people whose treatment was delayed by the virus. Our teams have been finding innovative new ways to tackle waiting lists and get patients the care they need as quickly as possible. And they've come up with equally inventive names, from super clinics such as Bones R Us through to the Scalpel Project and Gastronaughts!

We know that we have much work to do to improve waiting times for urgent and emergency care, and performance against the four-hour emergency access standard remains challenged, in

## OUR PRIDE VALUES

PASSION

RESPONSIBILITY

INNOVATION

DRIVE

EMPOWERMENT

comparison to most other London trusts. This aspect of the organisation's work will be one of the many benefits of closer collaboration with Barts Health. Working with them and with all partners across NEL, we will find a sustainable solution that will enhance patient care.

We are particularly proud of our regional Neurosciences Centre; Radiotherapy Centre; Hyper Acute Stroke Unit; and dedicated breast care service at King George Hospital. We're also pleased to be part of the NEL Cancer Alliance.

As well as having a Hyper Acute Stroke Unit at Queen's Hospital, the stroke service has transformed from being 'D' rated to the highest possible 'A' rating. The improvements that have taken place have included changing stroke consultants' working patterns to match demand and introducing a virtual ward that allows patients, where appropriate, to receive care and support in their own homes.

In 2017, the Trust unveiled one of the UK's first Halcyon radiotherapy machines, which is just one example of the cutting-edge treatment we now offer patients. We also provide Ethos therapy, which uses artificial intelligence to tailor treatment to patients' changing daily anatomy (in terms of their tumour's shape and position) and are improving our diagnostics equipment and space at King George Hospital.

Other investments include £11.5m being spent to expand and enhance critical care at both sites, as well as improvements to our Emergency Departments.

We offer staff the opportunity to train to become nurses, while continuing to work full-time in our hospitals. This pioneering Registered Degree Nursing Apprenticeship is transforming lives - and helping to reduce shortages - by supporting staff who wish to progress to become nurses and were unable to undertake the usual degree route after leaving school. Growing our own nursing workforce through this route is just one of the ways we have reduced our nursing vacancies and improved retention rates.

Patient experience is hugely important to us as a Trust and has been recognised at the national Patient Experience Awards, particularly for the support we provide to bereaved families. We are also developing our staff networks and we are determined to continually improve our culture for the benefit of our workforce and our patients. We have appointed a Director for Equality, Diversity and Inclusion who is leading the work to foster a culture that is fair, equitable and inclusive and where every voice counts.

With such continuous improvement always at the forefront of our thinking, we are proud to have partnered with the Virginia Mason Institute, along with four other trusts in the country. Now, with the five-year collaboration at an end, we are continuing to embed The PRIDE Way as our methodology for quality improvement.

## Our Trust values

We take PRIDE in everything we do, our five core values reflect that PRIDE. These values were developed together with our staff. We work hard to provide outstanding care to our community, delivered with PRIDE.

Our PRIDE values of Passion; Responsibility; Innovation; Drive and Empowerment inspire us and keep our patients at the heart of everything we do.

## WOMEN & CHILDREN'S CARE GROUP

The Division includes the following departments:

- Paediatric Service
- Neonatal Service
- Maternity Service
- Gynaecology Service
- Integrated Sexual Health Service

The services work cohesively to deliver the best care for women, children and families. There is an over-arching senior leadership team comprising the Divisional Director, Divisional Manager, Director of Midwifery and Director of Nursing for Children and Young People. Each service and specialty has its own leadership team including a Specialty Lead, Specialty Manager, Matrons and Service Manager. The Division also has a Trust wide remit for the professional leadership of children's nursing and as an advocate for children and young people.

The Divisional Director, who is a Consultant Obstetrician and Gynaecologist, takes the responsibility as a member of the Trust's Senior Management Team for the provision of a safe and effective delivery of maternity services. The Director of Midwifery ensures that safe and effective delivery of low risk normal midwifery care. The Divisional Director is also responsible for informing the Division of the Trust's strategic objectives and ensuring the multidisciplinary team has the strategic clinical leadership in developing and planning clinical services.

### Paediatrics

The Paediatric service delivers care at both Queen's and King George Hospitals.

Queen's hospital has a 30 bedded inpatient ward called Tropical Lagoon and a 9-bedded CYP AU adjacent to the Emergency Department which also sees GP referrals, jaundiced babies from the community and certain other acute referrals.

Tropical Lagoon has fully funded 6 HDU beds.

Tropical Bay, day care facility, also on the Queen's site, is a 12 bedded which opens Monday to Friday providing a variety of services - day surgery, ward attenders, paediatric oncology shared care service, haematology transfusions, endocrine tests and MRI under sedation.

The Children's Community Team facilitates early discharges from the ward by attending the daily handover and supporting and caring for children in the community to avoid unnecessary admissions.

Children's Outpatient Department is situated at both Queens Hospital and King George Hospital. Queen's Children's Outpatient Department provides a Paediatric Phlebotomy service for children up to aged 7 years and for any children with special needs or learning disability. This service is by appointment only and runs Monday to Friday.

King George Hospital has a 9 bedded children’s ward - Dahlia ward - which cares for children from 0-16 years. Children requiring a short stay admission and not requiring HDU care are admitted there.

**Neonatology**

The Neonatal Service at BHRUT is based at Queen’s Hospital. The Local neonatal unit has 32 cots (seven Intensive Care, four high dependency, and 21 special care - two of which are cubicles). Additionally, there are 2 more rooms/facilities for parents to room-in with their baby prior to discharge home.

Approximately 8-10% of all babies delivered are admitted to the unit, which is fully equipped with state of the art equipment. A Community Neonatal Nursing team operates seven days per week to support families after discharge.

All of the services are led by a team of Consultant Neonatologists, Matrons, Divisional team, Specialty Manager and Service Manager.

**Maternity Services**

Barking, Havering and Redbridge University Hospitals Trust (BHRUT) Maternity Services is the largest single site provider of maternity services in London and comprises of both midwifery and obstetric elements. Inpatient maternity services are delivered at the Queen’s Hospital at Romford. Both Queen’s Hospital and King George Hospital, based at Ilford, have antenatal services. We deliver circa 7500 women per year.

Our Labour Ward has 16 delivery rooms including one bereavement suite, one pool room/delivery room and two theatres. There is a separate triage, HDU and Obstetric Assessment Unit (OAU). We have a co-located midwifery led birth unit, Queen’s Birth Centre (QBC) which has 8 individual delivery rooms, two with birthing pools and a four bedded post-natal bay. There is a 16 bedded Antenatal ward and two postnatal wards comprising 46 beds.

**Trust Leadership Team**

Chair	Jacqui Smith
Chief Executive	Matthew Trainer
Medical Director	Mamta Vaidya
Chief Operating Officer	Fiona Wheeler
Chief Nurse	Kathryn Halford
Director of Finance (interim)	Nick Swift
Director of Communications and Engagement	Peter Hunt
Chief People Officer	Janine La Rosa

**Divisional Directors**

Women & Child Health	Miss Kathryn Tompsett
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Frailty and Geriatrics	Dr Khalid Haque / Dr Donna Walker
Emergency Department	Dr Karim Ahmad
Cancer & Clinical Support	Miss Jo Howard
Surgery	Mr Thangadorai Amalesh
Anaesthetics	Dr Rajesh Jain
Specialist Medicine	Dr Fahad Farooqi

### Consultant/Senior Members of Child Health Team

<b>Consultants</b>	<b>Main Interest</b>
Dr A Das	Neonatologist; College Tutor, Clinical lead for Neonatology
Dr R Bagtharia	Paediatrician & Neonatologist with Cardiology interest
Dr G Vasileiadis	Neonatologist
Dr K Mannan	Neonatologist
Dr D Nicholls	Neonatologist
Dr R Khan	Neonatologist
Dr D Robinson	Paediatrician
Dr A Shirsalkar	Paediatrician & Neonatologist with Infectious disease and Rheumatology interests
Dr M Ahmed	Paediatrician with Neurology interest
Dr G Subramanian	Paediatrician with Gastroenterology interest
Dr M Keane	Paediatrician with Diabetes and Endocrinology interest
Dr J Rawal	Paediatrician with Respiratory interest
Dr J Solebo	Paediatrician with Renal interest; Named Doctor for Safeguarding
Dr K Banerjee	Paediatrician with Diabetes and Endocrinology interest
Dr S Rao	Paediatrician with HDU and Allergy interest
Dr R Kotian	Paediatrician with Respiratory interest
Dr M Kumarasamy	Paediatrician with Diabetes and Endocrinology interest
Dr A Momoh-Ojewuyi	Paediatrician with Haematology interest (Haemoglobinopathy), Joint College Tutor
Dr R Joseph	Paediatrician and POSCU lead, Clinical Lead for Child Health
Dr D Sigdel	Paediatrician with Urgent Care/Ambulatory/Emergency, Allergy and Respiratory interest. Joint College Tutor
Dr W Toohey	Paediatrician with Urgent Care/Ambulatory/ Emergency interest. PAU lead
Dr A Salem	Paediatrician with Urgent Care/Ambulatory/ Emergency interest
Dr A Chowdhury	Paediatrician with Urgent Care/Ambulatory/ Emergency interest. Joint College Tutor
Dr R Mensah	Paediatrician with Urgent Care/Ambulatory/ Emergency interest
Dr S Santhalingam	Paediatrician with Urgent Care/Ambulatory/ Emergency interest
Dr K Ruck	Paediatrician with Urgent Care/Ambulatory/ Emergency interest
Dr B Ruge	Paediatrician with Safeguarding interest
Dr A Dakova	Paediatrician with Neurology interest (Locum)

## Junior Doctors in Department of Paediatrics

Specialty Doctor Posts	10
Trust doctor posts (registrar level) -	6
ST4-ST5 training posts	16
Trust doctor posts (SHO level)	10
ST1-3 training posts	7
FY2 posts	2
FY1 posts	3
GPVTS posts	6

### Main Duties of post:

The successful applicant will work as an acute general paediatrician and along with colleagues the successful candidate will be responsible for delivering safe and effective care to the CYP attending the child health services.

### General Paediatric duties:

The successful applicant will be part of a team of 20 general paediatricians ( to be expanded to 24), providing a consultant delivered service to children at BHRUT. The main principles of the rota are:

- 3 hot weeks in 24 (on-take for either Tropical Lagoon ward at Queen's Hospital or Dahlia/A&E at KGH)
- 5 Hot days covering the Emergency Department, CYP AU and Hot clinics at QH over 8 weeks.
- 12 paediatric clinic over 8 weeks
- On calls (Category A) 1 in 7 resident until 7pm (Monday to Friday) and resident from 8.30 – 13:00 on Saturday, Sunday and Bank Holidays (times are under review with expected changes to 10pm on all days with reduced frequency).

On call: There are 3 separate consultants covering 3 acute areas, Tropical lagoon/HDU, CYP AU/Queens ED and Dahlia/KGH ED out of hours.

The Hot Week on Tropical Lagoon or Dahlia (1:8) is a DCC session and leave cannot be taken in this week. Consultant led and delivered ward rounds should take place twice a day. The morning round should start no later than 9.30am, after the early discharges have been identified in the joint handover at 8:30 am. The afternoon ward round should take place from 2.30 pm so that patients can be identified for discharge in the evening and early the following morning, in advance of the consultant morning ward round. The consultant must be contactable at all times on their DECT/mobile phone. The consultant will participate in the online Advice & Guidance service to local GPs as part of their regular duties as explained in the job plan.

The King George Hospital (KGH) Dahlia ward consultant will also respond to paediatric resus calls in ED at KGH. The consultant will be expected to have an overview of the children that have been referred to paediatrics from ED and actively participate in managing patient flow in ED.

The department has close ties with local GPs and provides an urgent clinic (Hot clinic) on weekdays between 9 am and 12noon at Queen's Hospital. Patients are referred to this service via the Advice and Refer (ERS) online with a paediatric consultant. The consultant covering the hot clinic also provides supervision to the review clinic in the day assessment unit and also is responsible for electronic triaging of GP referrals.

The on call consultant is expected to be resident from the hours of 16:30-19:00, and to review patients on the ward/day assessment unit. This is to facilitate discharge and prevent unnecessary admission. This is counted as predictable on-call in the job plan. From 19.00hrs to 08:30 the consultant is on call from home. At weekends predictable on-call is from 08:30-13:30 on Saturdays and Sundays and Bank Holidays (subject to change, as above).

### **Paediatric Neurology Service**

The Paediatric Neurology service at BHRUT is currently run by 1 consultant and 1 epilepsy nurse specialist, with this post making a 2<sup>nd</sup> consultant. We work closely with the Great Ormond Street Hospital and Royal London Hospital's Neurology services. We have good support from the Neurophysiology department and the Radiology Department. We can perform standard and sleep deprived EEG, MRI under sedation and EMG.

Clinics run at Queen's Hospital and the current features of the service are:

1. Weekly first seizure clinic
2. Weekly Follow up/headache clinic
3. Triannual Transitional Epilepsy clinic with adult neurology clinic

We currently have over 600 children with epilepsy under our care and the number is expanding rapidly. The successful applicant will be responsible with his/her colleagues for seeing patients mainly with epilepsy and other neurological conditions and helping the children / young people and their families with education and support both in clinic and outside clinic. The successful applicant will also assist with his/her colleagues in providing any necessary advice to the children's ward when children and young people are admitted for epilepsy related reasons.

### **Teaching and training**

- The Trust is committed to sustaining and advancing the provision of medical, dental, nursing and other professional education and to the delivery of high-quality postgraduate and undergraduate training. The post holder is expected to contribute to teaching of paediatric trainees, peers and nurses, as required by the RCPCH, Health Education England, BHRUT Trust, and other regulatory bodies.
- BHRUT takes the training of medical students very seriously. Medical students come from Queen Mary University London and UCLH. The department recognises that consultant lead daily handover time as best time for teaching. There is weekly one hour session teaching for both neonatal and Paediatric junior doctors that are

consultant led on KGH and Queen's Hospital. In addition, there is regular weekly programme for teaching, clinical governance and Audit, morbidity & mortality, complex patient case discussions and guideline review meetings.

- There is a regular simulation scenario training (skills and drills) every Wednesday morning.
- There is a simulation facility at King George Hospital and there is an established programme of quarterly multi-professional simulation sessions led by a faculty from anaesthetics and paediatrics. These responsibilities are included with the job plan under 1.5 SPAs.
- The post-holder will be expected to participate fully in the scheduled academic activities:
  - Regular bedside teaching for the trainees and non-training Trust grade doctors
  - Journal Club
  - Weekly Critical Care teaching sessions
  - Monthly morbidity and Mortality meetings
  - Simulation sessions and other courses
  - Yearly session for the weekly Hospital Grand Round
  - Induction and in-house teaching of medical students and overseas students and trainees.
  - Support for the Trust induction programme
  - Teaching sessions on the Trust Foundation Teaching Programme For the majority of consultants this will involve specific timetables and regular teaching commitments agreed with the lead consultant and will be part of the SPA activity.

#### Secretarial and Office Accommodation

Office accommodation is provided together with medical secretarial support.

#### IT Support

The Trust provides IT support.

#### Medical and Clinical audit

The post holder is expected to participate in the process of medical audit and quality improvement. Audit and Quality Improvement is strongly encouraged within the paediatric department with all junior doctors being asked to complete an audit/QA project while they are at BHRUT. There are regular Trust audit presentation meetings and support is available from the Trust audit department.

#### Clinical Governance

The appointee will be expected to input into the Clinical Governance activities of the Trust to maintain the quality standards of clinical services.

### CPD, Revalidation and Appraisal

The post-holder is expected to fully engage in the Consultant appraisal process and will construct a personal development plan which will be reviewed on annual basis. The development plan will take account of general and specialist requirements for professional development issued by the relevant Royal College(s), the General Medical Council, the Chief Medical Officer and the Trust itself. The post holder will be supported by appropriate study leave allocations with internal cover.

Revalidation is an important part of your learning and development. It shows you are fit to practice and that you are able to offer the best and safest care to our patients. This means that holding a license to practice is an indication that you continue to meet the professional standards set by the GMC. It is a contractual obligation for all doctors at all levels in the NHS and the process is closely aligned with the GMC's core guidance for doctors, Good Medical Practice.

### Critical incident reporting

The post-holder will have responsibility for ensuring that critical incidents and near misses are appropriately reported into the Trust's Risk management systems.

### Mentoring:

Mentoring is part of Leadership - The PRIDE Way and will help us to introduce a learning culture across our Trust, which will encourage us to support each other every day and give us the opportunity to develop and learn new skills.

### Post graduate facilities:

There are excellent postgraduate facilities at Queen's and King George Hospitals, both of which include library services.

### Research and development:

The Trust has a well-developed research and development unit and an active interest in medical research is encouraged.

### Terms and conditions of service:

The post is covered by the new Terms and Conditions – Consultants (England) 2003. The appointment is superannuable unless the post holder chooses to opt out of the National Health Service Superannuation Scheme.

The salary scale for the Consultants is presently starts at £88364 for the standard 10 Programmed Activities per week. The successful candidate will also receive a London Weighting Zone payment.

Short listed candidates will be required to complete a Health Statement and the Trust may require a medical examination as a condition of appointment.

Because of the nature of the work of this post it is exempt from the provisions of Section 4 (2) of the Rehabilitation of Offenders Act 1974 (Exemption Order 1975). Applicants are therefore not entitled to withhold information about convictions, including those, which for other purposes are "spent" under the Provision of the Act and in the event of employment any failure to disclose such conditions could result in dismissal or disciplinary action by the

Trust. Any information should be sent to the Medical Director in an envelope marked for his/her personal attention and will be completely confidential, only considered in relation to an application for positions to which the order applies.

This is a full-time post, and the proposed job plan will be subject to discussion and agreement. A standard full-time job plan will contain an average of ten Programmed Activities per week, subject to the provisions to agree extra Programmed Activities.

The successful candidate will be expected in the normal run of their duties, to deputise for absent Consultant or Associate Specialist colleagues on occasions.

The successful candidate who intends to undertake remunerated clinical work that falls under the definition of Private Professional Services, other than work specified in his/her job plan, will first consult with his/her clinical manager. The Trust may offer the opportunity to carry out up to one extra Programmed Activity per week on top of the standard commitment.

If the appointment is within a specialty where attending the hospital whilst on-call is necessary, the successful candidate will be required to live within 30 minutes travelling time. The private residence must be maintained in contact with the public telephone service. Subject to agreement and compliance with the Trust's policy on Removal Expenses, assistance may be given to newly appointed Consultants with part of the cost of their removal expenses.

The successful candidate will be allocated a base but will need to work across the Trust should the need arise.

#### Proposed Job Plan:

The total contractual commitment will be 10 professional activities (PAs) per week.

The appointee will have continuing responsibility for the care of patients in his/her charge and for the proper functioning of the service. He/she will undertake the administrative duties associated with the care of patients and the running of the clinical department.

A formal job plan will be agreed between the appointee and their Clinical Director, on behalf of the Medical Director, three months after the commencement date of the appointment. The job plan will be reviewed annually, following an Appraisal Meeting. The job plan will be a prospective agreement that sets out a consultant's duties, responsibilities and objectives for the coming year. It should cover all aspects of a consultant's professional practice, including clinical work, teaching, research, education and managerial responsibilities. It should provide a clear schedule of commitments, both internal and external. The post holder will be expected to take part in the on call rota at nights and at weekends. The current On-call Rota for the service is 1:7 and it is Category A.

There will be a separate general paediatric consultant on call for nights and the weekends at both Queen's and King George Hospital. At the weekend the consultant is on call from 17.00 hours on Friday until 09.00 hours on Monday. During this time, there is a requirement for the consultant to conduct daily ward rounds. The post-holder is not required to cover the neonatal unit. There are 3 separate middle-grade and SHO rotas to cover Queen's Hospital General Paediatrics, King George Hospital General Paediatrics, and Queens Hospital NICU.

During leave, it is the responsibility of each consultant to ensure that arrangements have been made to cover duties, including on-call.

The on-call commitment would be 1:7 and the daytime duties would be according to a 16-week pattern. The components of the job plan are as follows and proposed timetable is on the next page:

1:7 on call Category A. 2 hr predictable and 4 hrs unpredictable on weekdays. 10 hours predictable and 8 hrs unpredictable over weekend	2.6
1:8 ward week 08:30-17:15(prospective cover)	1.7
3 ED/CYPAU cover days over 8 weeks (prospective cover)	0.98
2 Hot clinic/ambulatory cover over 8 weeks( prospective cover)	0.66
Outpatient clinics	1.56
Administration sessions	0.39
Service development	0.53
Total DCC	8.42
SPA	1.5
<u>Total DCC + SPA</u>	<u>9.92</u>

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
Week 1	0830-17:15 Ward	08:30-17:15 Ward	08:30-17:15 Ward	08:30-17:15 Ward	08:30-17:15 Ward		
Week 2		11:00-13:00 Admin	09:00-17:00 Hot clinic and ambulatory unit	09:00-17:00 Hot clinic and ambulatory unit	09:00-17:00 SPA		
Week 3	1300-1700 Neurology clinic	0900-1100: Service Development 11:00-1300 Admin 1300-1700: General clinic			09:00-17:00 SPA		
Week 4	1300-1700 Neurology clinic	09:00-1100 Admin  1100-1300: MDT/service development 13:00-17:00 : General clinic	08:30-17:15 ED cover/CYPA U	08:30-17:15 CYP AU/ED	08:30-17:15 ED/CYPAU		
Week 5	1300-1700  Neurology clinic	0900-1100: Service development  1100-1300 Admin  1300-1700: General clinic			09:00-17:00 SPA		
Week 6	1300-1700 Neurology clinic	0900-1100: Service Dev 1100-1300 Admin 1300-1700: General clinic			09:00-17:00 SPA		
Week 7	1300-1700 Neurology clinic	0900-1100: Service Dev  1100-1300 Admin 1300-1700: General clinic			09:00-17:00 SPA		
Week 8	1300-1700 Neurology clinic	0900-1100: Service Dev  11:00-1300 Admin 1300-1700: General Clinic			09:00-17:00 SPA		

## Job Related Criteria

	Essential Criteria	Desirable Criteria
<b>EDUCATION/QUALIFICATIONS</b>		
Full registration with the GMC	X	
MRCPCH or equivalent	X	
Entry on the Specialist Register or within 6 months of obtaining a UKCCT/CESR-CP for General Paediatrics	X	
Epilepsy SPIN module/BPNA Distance learning		X
Higher qualification, e.g. MD, Medical Education		X
<b>TRAINING</b>		
Up to date Advanced paediatric life support training	X	
Social Paediatrics and child protection (up to date level 3 safeguarding training)	X	
<b>EXPERIENCE</b>		
Experience of a wide variety of general and specialist Paediatrics in senior roles in the UK	X	
Experience of managing children with seizures, headaches and epilepsy.	X	
Experience of managing children with more complex neurological conditions.		X
Experience of clinical audits	X	
An understanding of NHS management responsibilities of consultants	X	
Attendance at an appropriate management course		X
Experience of undertaking audit and Quality Improvement activity	X	
<b>TEACHING</b>		
Interest in and commitment to undergraduate and postgraduate teaching	X	
Experience of teaching medical and other staff	X	
<b>RESEARCH/PUBLICATIONS</b>		
Evidence of recent and current research with relevant publications		X
<b>PROFESSIONAL INTERESTS</b>		
Membership of appropriate professional societies		X
Knowledge of the up-to-date literature	X	
<b>PERSONAL REQUIREMENTS</b>		
Excellent written and spoken English	X	
Ability to listen to comments and/or challenges and respond constructively	X	
Honesty and integrity	X	
Value diversity and demonstrate respect for others	X	
Organisational and self-management skills	X	
Able to prioritise workload effectively	X	

	Essential Criteria	Desirable Criteria
<b>COMMUNICATION AND INTERPERSONAL SKILLS</b>		
Good oral and written communication skills	X	
Good interpersonal and influencing skills	X	
Good presentation skills	X	
Able to empathise with people from different social, cultural and religious backgrounds	X	
Able to communicate with children and their carers effectively	X	
Training in communication skills		X
<b>OTHER REQUIREMENTS</b>		
Agreement to live within a reasonable distance of the hospitals to allow for emergency access	X	
Able to travel to meet the requirements of the post	X	
Satisfactory medical clearance from the Trusts Occupational Health Physician	X	

For further information regarding this post, please contact:

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