

JOB DESCRIPTION

Consultant Physician in

Renal and General Medicine

(10 Programmed Activities) in

NORTH MIDDLESEX UNIVERSITY HOSPITAL NHS TRUST

AND

ROYAL FREE LONDON NHS FOUNDATION TRUST



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The North Middlesex University Hospital NHS Trust

SECTION 1

ABOUT THE TRUST

North Middlesex University Hospital NHS Trust is a medium sized acute Trust based in Edmonton in Enfield, North London. We serve a diverse multicultural population largely from the London boroughs of Enfield and Haringey. Many of our patients live in wards that are within the 5% most deprived in the UK and a large proportion of our patients were born abroad. This makes it both a fascinating and a challenging hospital to work in.

Over the last decade we have rebuilt almost all the hospital and now have facilities that we are proud to work in. We employ almost 4,000 staff, more than half of whom live locally. We encourage apprenticeships from the local community and are part of NL Partners Integrated Care.

We are primarily an emergency led hospital with more than 90% of our bed days being used for patients admitted via our emergency and ambulatory units. As well as offering everything you would expect from a major acute hospital, we have several tertiary services treating patients with HIV and Sickle Cell Disease and a large cancer and radiotherapy service. We also run our local community Sexual Health Clinics.

We are proud of our staff and want to ensure their training allows them to provide excellent clinical care. We are also a training unit for medical students from University College London (UCL) and St George's University Grenada, and for nursing and midwifery students from Middlesex and City Universities.

In our most recent Care Quality Commission (CQC) report (2022) we are found to 'overall require improvement', but the report noted the achievements since the previous report, with a positive shift in culture and quality, notably in our Emergency and Maternity departments. Our Trust vision and objectives show our aspirations to develop towards 'Good' and 'Outstanding'.

Our vision

Our vision is to provide outstanding care for local people.

Our objectives

Our objectives are:

- Excellent outcomes for patients
- Excellent experience for patients and staff
- Excellent value for money.

The above are underpinned by the associated objectives of each of our corporate and clinical divisions, their departments, teams, and individual members of staff.

Our digital strategy

We have developed ambitious plans to modernise our information technology over the next three to five years. The “Global Digital Exemplar – Fast Follower” programme started in January 2019 and brings £12m investment within 3 years to achieve:

clinical noting replacing most paper-based documentation
 electronic prescribing to make the use of medication safer
 mobile devices for nurses to document patient encounters and identify patients at risk
 a new mobile team communication system to replace most pagers

information exchange with other NHS providers and primary care across North Central London
 working towards a patient portal that promotes patients’ active involvement in their care

Clinician’s involvement in the design, configuration, testing and implementation of these systems.

Our values and expected behaviours

You are part of Team North Mid, a workforce almost 4,000 strong. A big part of working here is having a culture and values that help us to achieve our vision of delivering outstanding care to local people.

We are caring:

What it means	Our behaviours
We are compassionate and take time out to check on colleagues and patients We are understanding and recognise each other as individuals We are committed to improving our community for colleagues, patients and carers	Showing empathy Being curious Showing humility Listening to others

We are fair:

What it means	Our behaviours
We respect and understand each other’s differences and backgrounds We are consistent with providing realistic, clear expectations and constructive feedback We are always looking for opportunities to develop all our staff and our services	Being consistent Listening to others Supporting each other

We are open:

What it means	Our behaviours
<p>We embrace change and continuously challenge ourselves and colleagues to create meaningful improvement</p> <p>We ask for help when we need it; we offer help when we see a colleague struggling and we are always open to challenge</p> <p>We actively look for new ways of working and explore new partnerships across teams, divisions and organisations</p>	<p>Speaking up</p> <p>Being curious</p> <p>Learning from mistakes</p>

These values are extremely important to us and we expect everyone who works at the Trust in any capacity to share and uphold these values. Further information on the Trust's values is available on our website.

The Management Structure

The Executive team:

Chief Executive Officer	Dr Nnenna Osuji
Medical Director	Dr Victoria Jones
Chief Nurse	Sarah Hayes
Chief Operating Officer	Shola Adegoroye
Director of Strategic Development	Richard Gourlay
Chief Finance Officer	Bimal Patel
Director of Human Resources	Mark Vaughan

The operational structure comprises 3 Divisions:

Medicine and Urgent Care Services

Surgery, Anaesthetics, Critical Care and Associated Services

Women, Children, Cancer and Diagnostics

Each Division has a Divisional Clinical Director, a Divisional Director of Operations and a Divisional Head of Nursing. This team is supported by Clinical Directors, Service Managers and Matrons.

The post is within the Medicine and Urgent Care Division

The Divisional Management Team is:

Divisional Director – Dr Jayne Lim

Deputy Director of Ops – Kevin Cairney

Head of Nursing – Richard Hughes

Renal Medicine Department

The Management team are:

Service Manager – Kimberley Ellis

Clinical Director – Dr Jayne Lim

Matron – Lurnece Dookie

Clinical lead – Dr Salman Sajid

THE ROYAL FREE LONDON NHS FOUNDATION TRUST

Royal Free London NHS Foundation Trust World Class Values

The post holder will offer World Class Care to service users, staff, colleagues, clients and patients alike so that everyone at the Royal Free can feel:

Welcome all of the time Confident because we are clearly **communicating**
Respected and cared for **Reassured** that they are always in safe hands

About us

The Royal Free Hospital was founded in 1828 to provide free healthcare to those who could not afford medical treatment. The title 'Royal' was granted by Queen Victoria in 1837 in recognition of the hospital's work with cholera victims.

For many years, Royal Free Hospital was the only hospital in London to offer medical services to women. This began a close association with the London School of Medicine for Women, later renamed the Royal Free Hospital School of Medicine.

Royal Free Hospital moved to its present site in the mid-1970s, bringing together the old Royal Free Hospital in Gray's Inn Road with the Lawn Road, New End and Hampstead General hospitals.

In April 1991 the Royal Free Hampstead NHS Trust became one of the first NHS trusts established under the provisions of the NHS and Community Care Act 1990.

On 1 April 2012 the trust was authorised as a foundation trust, under the name Royal Free London NHS Foundation Trust.

In 2014, Barnet Hospital and Chase Farm Hospital joined our foundation trust, bringing further medical expertise and local care to the NHS services we provide.

Barnet Hospital first provided healthcare in an infirmary in the Barnet Union Workhouse in 1838. Chase Farm Hospital began as a home for pauper children in 1884.

The hospitals were important to medical treatment during both world wars. Between 1916-18, 6,000 wounded and sick soldiers were given medical care at Barnet Hospital, and during the Second World War, Chase Farm cared for wartime casualties under the emergency medical scheme. In 2004 Chase Farm made European history, by carrying out the first total hip replacement procedure with the patient leaving hospital in just 27 hours. At the time in the UK, the average length of stay following a total hip replacement was 11 days.

The Royal Free London NHS Foundation Trust runs three hospitals in London:

Barnet Hospital
Chase Farm Hospital
Royal Free Hospital

Across our three London hospitals, our vision is clear: to deliver world class expertise and local care. We combine globally recognised clinical expertise with local and friendly hospital care to represent the NHS at its best.

Our mission is to be world class in terms of healthcare treatment, clinical research and teaching excellence. We aim to deliver and develop leading local healthcare in all three of our hospitals, to improve lives and help people thrive.

How the Royal Free will achieve its mission

We will achieve our mission by making sure that we have:

Excellent outcomes, in our clinical treatment, research and teaching

Excellent experiences for patients, staff and GPs

Excellent value, by improving the efficiency and productivity of our services, and reducing costs

Full compliance, meeting or exceeding all regulatory standards and outcomes we are set

A strong organisation, investing effectively in our staff and infrastructure to make sure we are fit for future challenges

How the Royal Free measures its performance

In order to meet our aims, we want to ensure that our three London hospitals are in the top 10% of all healthcare providers for:

- quality of clinics and treatments
- medical research
- teaching and training new medical staff patient satisfaction and experience value for money

We set corporate objectives on an annual basis to help us achieve our mission.

The University College London Medical School

University College London is the largest of over 50 colleges and institutes which make up the federal University of London and is consistently rated as one of the U.K.'s premier academic institutions. The University College Medical School is a general medical school in the Faculty of Medicine of the University of London, formed on 1 August 1998 by the merger of the Royal Free Hospital School of Medicine and University College School of Medicine. A joint Department of Medicine, with around 400 staff, has existed between the two Schools since January 1994. The Department encompasses a broad range of basic and clinical research programmes and undertakes teaching of undergraduates and postgraduates.

Research

Research and development (R&D) are a major component of the Royal Free London NHS Foundation Trust strategy and reflects the Trust's desire to maintain its position as one of the top ten trusts for R&D income in the UK. We are interested in candidates who will support and contribute to current and future research opportunities in renal dialysis and CKD. The research

efforts of the Trust and Medical School are closely integrated and there are extensive facilities for both clinical and basic science research. Consultant staff are expected to participate in research according to their skills and speciality. An audit system for quality in R&D was introduced during 1998 and reflects an individual's commitment to this area.

The Trusts Organisation in 2021

Patient services are divided across nine divisions. Renal sits within NURT division with Nephrology, Urology and Renal Transplantation services. Dr Sally Hamour (Consultant Nephrologist) is the Divisional Clinical Director for the NURT Division, and the Head of Nursing is Damir Tandaric.

There is a separate Private Practice Unit located on the 12th Floor of The Royal Free Hospital. Consultants undertaking private patient work are encouraged to use the trust's facilities.

THE DEPARTMENT OF: Nephrology and Renal Transplantation History

The Department of Nephrology & Transplantation was established in 1966 and relocated and enlarged in 1995. Following a review of renal services, the North Central London Strategic Health Authority recommended that renal services at University College London Hospital and the Royal Free Hospital should merge on the Royal Free Hospital site in 2005. Following substantial Trust investment, this merger occurred smoothly in June 2005.

Today

Inpatient facilities are located on the 10th floor of the Royal Free and include a 24 bed Acute Kidney Unit and a 30-bed renal ward with dedicated in-patient dialysis. Renal transplantation is performed in a separate isolation ward on the 11th floor. There is a substantial nephrology inpatient workload at Royal Free site including extensive consultation in other specialist areas, including liver transplantation, intensive care, rheumatology and the regional vascular surgery centre. On the Barnet site we provide dialysis, outpatient nephrology and inpatient consult service.

The department also provides outreach nephrology services for 3 other acute Trusts across North London and is the hub of the local AKI network. An ambulatory care ward is located on the second floor. Specialist Nephrology outpatient clinics are held in a dedicated Kidney and Urology outpatient centre on the third floor.

The Department performs 120-140 renal transplants per year and manages over 1400 Chronic transplant patients. Approximately 30 live donor transplants are performed per year. The dialysis programme manages approximately 750 haemodialysis patients, including a small home haemodialysis programme of around 15-20 patients. The peritoneal dialysis programme has seen substantial expansion in recent years and now treats approximately 190 patients. A renal strategy paper was accepted by the Trust Board in 2010 which outlined a new model of service delivery including development of three major Kidney Care Centres across North Central London. These centres provide the full range of non-surgical kidney care closer to patients' homes and are closely integrated with local primary care services. Our kidney care programme is patient-centred with a major emphasis on self-management, self-care dialysis and home-based renal replacement therapies. The first Kidney Care Centre was established at Edgware community hospital and construction of a further Kidney Care Centre in Tottenham

was completed in 2014 with 44 dialysis stations including supported and self-care areas and a home training facility. In April 2015 we opened a new 15 station dedicated supported selfcare and home training unit in our centre in St Pancras hospital.

Haemodiafiltration is now undertaken on 4 sites with approximate patient numbers in parentheses:

- Edgware Kidney Care Centre (180)
- St Pancras Kidney and Diabetes Centre (240)
- Tottenham Hale Kidney and Diabetes Centre (240)
- Barnet Hospital (80)
- Home haemodialysis (20)
- Peritoneal Dialysis (190)

In each of our kidney care centres, we also provide community-based CKD, dialysis preparation, peritoneal dialysis clinics and transplant follow up.

IT support within the Department is provided by a dedicated renal database (Vital Data) which is accessible from computers within the hospital and Kidney centres. A renal database manager provides training to staff and support for database management and development. The Trust has recently moved to Cerner EPR with extensive IT resources and the postholder would be provided with a dedicated personal computer.

Clinical Directorate

The senior staff of the Department are:

Medical:

Dr John Connolly (Chief Executive and Consultant Nephrologist)

Miss Gillian Smith (Medical Director and Consultant Urologist)

Dr Sally Hamour (Divisional Clinical Director and Consultant Nephrologist)

Dr Jenny Cross (CIO for the Royal Free London NHS Foundation Trust/Consultant Nephrologist)

Dr Gareth Jones (Consultant Nephrologist & Clinical Lead Transplantation)

Dr Cate Goodlad (Consultant Nephrologist & Clinical Lead Dialysis)

Dr Phil Masson (Consultant Nephrologist & Clinical Lead Renal Inpatients)

Dr Ben Caplin (Associate Professor renal medicine/Honorary Consultant Nephrologist)

Dr Colley Crawford (Specialty Doctor Dialysis)

Professor Sir John Cunningham (Professor of Nephrology / Hon Consultant Nephrologist)

Professor Andrew Davenport (Consultant Nephrologist/Hon Reader Nephrology)

Dr Peter Dupont (Consultant Nephrologist)

Professor Daniel Gale (Professor/Hon Consultant Nephrologist)

Professor Julian Gillmore (National Amyloidosis centre. Honorary Consultant Nephrologist)

Dr Mark Harber (Consultant Nephrologist)
Dr Dakshina Jayasena (Consultant Nephrologist North Middlesex Hospital)
Dr Shabbir Moochhala (Consultant Nephrologist North Middlesex Hospital)
Dr Sai Krishna Duraisingham (Consultant Nephrologist North Middlesex Hospital)
Dr Ruth Pepper (Consultant Nephrologist,)
Professor Alan Salama (Academic Head of Centre for Nephrology)
Dr Kin Yee Shiu (Consultant Acute Medicine & Nephrology, Clinical Lead for Outpatients)
Dr Ben Walsh (Senior Lecturer Experimental Medicine/Hon Consultant Nephrologist)
Professor David Wheeler (Professor of Kidney Medicine/ Honorary Consultant Nephrologist)
Dr Robin Woolfson (Consultant Nephrologist)

Surgical:

Mr. Colin Forman (Consultant Transplant and Vascular Surgeon, Acting Transplant Surgery Lead)
Mr. Bimbi Fernando (Consultant Transplant Surgeon)
Mr Reza Motallebzadeh (Consultant Transplant Surgeon)
Miss Fiona McCaig (Consultant Urologist & Transplant surgeon)
Mr Ayaz Hossein (Consultant access & Transplant surgeon)
Mr Amar Al-Midani (Consultant Transplant surgeon)

Junior Medical Staff

Various deanery supported posts.

Specialist Nurses

Damir Tandaric is head of nursing for the division. Ms Sarah Milne is the lead nurse for nephrology. Pre- and post-transplant care is well supported by a number of specialist nurses working wholly within the department. We have an innovative team of specialist nurses working across our network delivering CKD and pre-dialysis care. A dedicated team of research nurses provide support for clinical research and are fully integrated across the clinical service.

Research and Development

Research and development are a major component of the Royal Free London NHS Foundation Trust strategy and reflects the Trust's desire to maintain its position as one of the top ten Trusts for R&D income in the UK. Our research programmes have collaborations nationally and internationally and attract funding from prestigious bodies. The Royal free hospital is one of the most active dialysis research centres in the UK and we wish to focus on its development and cultivation. Professor Andrew Davenport has an unparalleled reputation internationally for his work on acute kidney injury, renal failure in an ITU setting and dialysis research.

The Trust is in the fortunate position of being co-located with the UCL RFH campus and their research agenda is closely integrated. There are extensive facilities for both clinical and basic

science research. The Corporate objective under current strategic activity affecting R&D is a joint approach to research and development with UCL and UCLH.

Consultants are expected to participate in research, according to their skills and specialty, and publish their research findings. Annually, the R&D Office conducts a quality assessment exercise (QAE) on the publications in highly cited peer-reviewed journals. All research undertaken is bound by the research governance framework.

The Department of Renal Medicine, UCL

The UCL Department of Renal Medicine (DoRM) is unusual in having a wide breadth of clinical and research expertise (applied epithelial physiology and pathophysiology, renal genetics and cell biology, immunology and inflammation, mineral metabolism, cardiovascular disease, and modalities of renal replacement therapy and conservative management) applied to kidney research, clinical care, and training.

The DoRM is part of the UCL Division of Medicine and is within the Transplantation and Immunology theme of the UCL Academic Health Sciences Centre (UCL Partners). This theme includes active renal, liver (including islet cell) and bone marrow transplant programmes, as well as plans for face and laryngeal transplantation. The DoRM became a large, single, clinical service and academic unit in 2006 when renal services at the Middlesex, University College, and Royal Free hospitals merged. As a result, the DoRM is formally linked with the clinical Nephrology service at the Royal Free Hospital. We have significant internal collaborations and strong links with other UCL research departments, including physiology, biochemistry, genetics, virology, rheumatology, infectious diseases, immunology, and clinical pharmacology.

See the web pages below for a summary of our key research themes and activities, demonstrating our comprehensive clinical and basic science research, which form the foundation of our clinical and research training programmes.

<http://www.ucl.ac.uk/medicine/nephrology/research>

SECTION 2

THE DEPARTMENT OF NEPHROLOGY AT NMUH

This is a well-established department within the trust and currently we have 4 substantive but part time (shared with RFH) consultants amounting to 2.25 whole time equivalents. We are in the process of expanding our workforce.

Our work centres on outpatient activities for Nephrology as well as in-patient care for both renal and general medical patients. We also provide an innovative acute kidney injury (AKI) service, concentrating on those patients presenting with, or, developing stage 3 AKI whilst in hospital.

There are 4 general nephrology clinics per week and a monthly joint diabetes/renal new patient clinic. In addition, there are monthly joint multidisciplinary team meetings (MDTs) between the nephrologists and the Rheumatology, Diabetes and Urology teams, and quarterly joint meetings with the HIV.

The post holder will be expected to provide a general nephrology clinic weekly (3 new patients, 9-10 follow-up).

The Renal Ward in on the 8th floor of the Tower Block (T8 ward).

Department’s Medical Staffing

Consultants	Special Interests	Additional Responsibilities
Dr Dakshina Jayasena	Diabetic nephropathy and low clearance patients	Lead for SpR training within the firm
Dr Shabbir Moochhala	Renal tubular physiology and stone disease	
Dr Salman Sajid	Acute kidney injury Vasculitis	Clinical Lead TPD for foundation year Appraiser
Dr Sai Krishna Duraisingham	Hypertension	

Other Medical Staff

- 2 x SpRs (North Central Thames rotation)
- 2 x CTs Medicine
- 1 x FY2
- 3 x FY1

Administration and Support Staff

The consultant appointee will have dedicated office space with networked computer access and secretarial support (1 secretary for the renal department). All administrative duties are facilitated with a remote access system.

SECTION 3

ABOUT THE POST

Post Details

Job Title	Consultant in Renal and General Medicine
Directorate	Medical and Urgent Care

Professionally Accountable to	Medical Director
Responsible to	Clinical Director
Type of contract	Permanent
Number of PAs	10 PA 5PA North Middlesex, 5PA Royal Free Hospital
Base hospital	North Middlesex University Hospital

Background to the post

This post is a replacement post for an already existing substantive post shared jointly (5PAs each between the North Middlesex and Royal Free Hospitals).

Indicative Job Plan

A formal job plan will be agreed between the appointee and their clinical manager in line with the Job Planning Guidelines in force in the Trust. Once agreed with the clinical manager, job plans are finally signed off by the Clinical Director. An indicative job plan for this post with indicative Programmed Activities (PAs) is provided below, but this will normally be re-assessed after 3 months of appointment to ensure it meets the needs of the service.

For a whole-time contract: the normal initial DCC / SPA allocation is (split equally between the 2 trusts)

Direct Clinical Care: 8.0 PAs on average per week
(*Clinical activity, clinically related activity, predictable & unpredictable emergency work*)

Supporting Professional Activities: 2.0 PAs on average per week
(*CPD, audit, teaching, & research*) **

** An additional 0.5 SPA is available to all Consultant Staff for quality and service roles, subject to review and agreement. These must be approved prospectively by the Clinical Directors on both sites.

Job plans are reviewed annually, and applicants are encouraged to study the provisions of the Consultant Contract for England 2003 under which this post is offered.

Renal and General Medicine at NMUH + Low clearance and haemodialysis clinics at Tottenham Hale (RFH)

This is a joint post between the North Middlesex and Royal Free Hospitals, in which the post holder will be contracted to provide 5 PA for each hospital site.

The North Middlesex duties consist of 1 renal diagnostic clinic a week (42 per year). When the consultant is covering the ward, the clinic is reduced in template to a 3-hour afternoon clinic, so the total number of renal clinic delivered remains 42/year. The consultant will provide 12 weeks of GIM and renal ward cover per year on a rotational basis and will be supported by the junior doctors on the renal firm for all NMUH activities. There is a fortnightly ward discharge/AKI clinic delivered by the renal registrars and will be supervised by the ward attending consultant.

The out of hours (GIM) duties occur 1 in 8 weekends at the NMUH site between the hours of 9am and 5pm and include assessing all patients that move to the medical wards in the Tower block, and any potential weekend discharges. After 5 PM, consultant will be on call for GIM, off-site (from home). The postholder is not expected to do Post-Take ward round of new medical admissions in the Acute Medicine Unit. The postholder will provide only GIM cover to the patients on General Medical wards, excluding patients on the care of elderly wards and the acute medical unit.

Weekday out of hours (GIM) duties occur only at night between 21:00-08:00. These shifts are 1 in 12 frequency and are non-resident. Please see Table 3.

The Royal Free duties include care of a dialysis cohort of 50-60 patients, weekly Low clearance clinic (30 weeks of the year), and a chronic dialysis cohort (42 weeks each year). The post holder will also be expected to contribute to the Academic afternoon 42 weeks per year.

When the post holder is providing ward cover in NMUH, they are only expected in the dialysis unit on a Tuesday afternoon.

The consultant will be supported by the well-established multidisciplinary haemodialysis, low clearance, and hypertension teams.

At the North Middlesex, each consultant will oversee in-patients on a rotational basis, during which period, he or she is expected to do two ward rounds / week, as well as ensuring early daily review of new patients transferred to the ward and those who need senior review. They will also be expected to participate in daily discharge planning meetings. The post holder will work 12 weeks on the wards spread out during the year on a rotational basis.

The timetable for the post therefore varies according to when the post holder is covering the wards in NMUH.

Table 1: On wards at NMUH (12 weeks spread throughout the year)

Day	AM	PM	Work Category
Monday	08.00 - 09.00 – Joint Renal/DM/Endo teaching (NMH SPA) 09.00 - 14.00 -Ward Round (NMH DCC)	14.00 – 16.00 Referrals and Direct Care Admin/ clinic dictation (NMH DCC)	1.75 DCC 0.25 SPA
Tuesday	09.00 – 13:00 - Ward round and renal referrals. (NMUH DCC) 13:00-14:00 Hospital Grand Round	14:00 – 14:30 Travel 14.30 – 17.00 Alternate week Dialysis clinic (6 patients) and alternate week patient related/clinic admin/ dictation (RF DCC)	1.75 DCC 0.25 SPA
Wednesday	09.00 - 09.30 -Radiology meeting (NMH DCC) 09.30 - 12.00 -Ward Round (NMUH DCC)	13.00 – 14.00 Direct Care admin (NMUH DCC) 14.00 – 17.00 General Nephrology clinic (NMH DCC) (2 New 6 Follow Up)	2 DCC
Thursday	09.00 - 11.00 -Ward Round (NMH DCC) 11.00 – 12:30 Ward admin (NMH DCC). Discussion with registrar of 6 patients from AKI/ward discharge clinic fortnightly. 12:30- 13:00 Travel	13:00 – 16:00 RFH Academic meeting	1 DCC / 0.75 SPA
Friday	09.00 - 13.00 - Ward Round + Ward Multi-Disciplinary Team (NMH DCC)	13.00 – 14.00 – Referrals 14.00 – 16.00 - Clinical Admin/ dictation (NMH DCC)	1.75 DCC

Total			DCC 8.25/ SPA 1.25
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Table 2: Off wards (30 weeks spread throughout the year)

Day	AM	PM	Work Category
Monday	08.00 - 09.00 - Joint Renal/DM/Endo teaching (NMH SPA) 09.00 - 13.00 – Vetting for OP referral and clinical admin (NMH DCC)	13.00 - 15.00 – Clinic admin/dictation (NMUH DCC) 15.00 - 16.00 - NMUH SPA	1.5 DCC / 0.5 SPA
Tuesday	09.00 - 11.00 trouble shooting Haemodialysis unit 11.00 - 14.00 - RFH patient related direct care admin/dictation (DCC)	14.00 - 17.00 Alternate week Dialysis clinic (6 patients) and alternate week patient related/clinic admin/dictation (RF DCC)	2 DCC
Wednesday	09.00-13.00 – General Nephrology clinic (NMUH DCC) (3 New and 9 Follow up)	13.00 – 13.30 Travel 13.30 – 17.00 MDT Low Clearance or dialysis, Chronic Kidney disease referral triage (RF DCC)	2 DCC
Thursday	09.00 - 13.00 Low Clearance Clinic (RFH DCC) (12 patients)	13:00 – 16: 00 RFH Academic meeting 16:00 – 17:00 RFH SPA (Undergraduate teaching)	1 DCC 1 SPA

Friday	09:00 – 10:00 Educational supervision 10:00 – 12:00 Audit and governance		0.8 SPA
Total			DCC 6.5/ SPA 2.3

On Call duties

The out of hours (GIM) duties occur 1 in 8 weekends at the NMUH site between the hours of 9am and 5pm and include assessing all patients that move to the medical wards in the Tower block, and any potential weekend discharges. After 5 PM, consultant will be on call for GIM, off-site (from home).

Weekday out of hours (GIM) duties occur only at night between 21:00-08:00. These shifts are 1 in 12 frequency and are non-resident. The overnight on-call activity attracts a band B pay supplement.

The weekend on-site activity at NMUH is included within total PA allocation for the job plan and is not shown in the timetable. There is time off in lieu.

There is no on-call or inpatient activity at RFH.

Table 3: Total PAs for the post

<u>Activity</u>	<u>Type of PA</u>	<u>Number</u>	<u>Weeks/year</u>	PAs/year	<u>Annualised PA</u>
<u>On wards</u>	DCC	8.25	12	99	2.357
	SPA	1.25	12	15	0.357
<u>Off wards</u>	DCC	6.5	30	195	4.64
	SPA	2.3	30	69	1.64

ON-CALL (1 in 8 weekends) 9am-5pm on-site. Afterwards off-site plus 30 mins telephone consult/night	DCC	6.333	6	38	0.90
(1 in 12 weeknights) 30mins telephone consult/night		0.166	21.66	3.6	0.085
TOTAL				419.6 PA	10 PA
			DCC	335.24	
			SPA	84	

Other Roles and Responsibilities

The post holder will work with colleagues and the Clinical Audit and Effectiveness department to ensure that relevant clinical audit is carried out.

Consultants have continuing responsibility for the care of patients in their charge and for the proper functioning of their department. They are expected to undertake administrative duties associated with the care of their patients and the running of their clinical departments. The appointee will be expected to take responsibility for maintaining their continuing medical education to the standard set by the relevant Royal College.

Education and training role

The North Middlesex University Hospital has gained a reputation for teaching excellence in the region due to our dedicated consultant teachers and a rich variety of clinical cases. Formal teaching sessions are organised differently in various departments.

The post-holder will be expected to teach junior doctors regularly as agreed with the Specialty Lead.

There is potential for additional 0.5 SPA for teaching, etc. but it needs to be approved prospectively.

Flexible job planning

Candidates wishing to work less than full time are invited to discuss their interest. Job share arrangements and other adaptation of the job plan to the suitable candidate's needs may be accommodated if the evolving service needs can be met.

Clinical Governance

This appointee is expected to contribute actively to improving clinical governance in our department. The GMC's Good Medical Practice guidelines form the basis of the responsibilities and standards expected of the Trust's consultants. All newly appointed consultants will be issued with an Induction Programme and mandatory training, all aspects of which are mandatory. There is a well-established annual appraisal process for all consultants and non-consultant career grades in the Trust.

It is a condition of employment that all staff have a responsibility for Infection Control. The appointee will therefore be expected to attend mandatory Infection Control courses on appointment and to participate actively in measures designed to reduce Health Care Associated Infections (HCAIs).

The appointee will be expected to fulfil the relevant Royal College's requirements for Continuing Medical Education (CME) or Continuing Professional Development (CPD) as a minimum.

The Trust considers the development of Clinical Guidelines and Protocols as the foundation of evidence-based medical practice. All consultants are therefore expected as part of their SPAs to contribute to the development and updating of clinical guidelines within their specialty that meet NICE or other peer-body guidance, and to audit their practice according to such guidelines or protocol. There is a dedicated Clinical Services area on the Trust Intranet where clinical guidelines are uploaded by specialty. The Trust has an Audit and Clinical Effectiveness Manager and an IT Developer who work to support consultants on this.

Undergraduate Education

As a university hospital of the University of London, the hospital has a substantial commitment to training of medical students from the University College London (UCL) Medical School and is one of the 2 centres outside the teaching hospitals for UCL Final MBBS examinations. Many consultants are recognised teachers of UCL. Medical students from St. George's International School of Medicine in Grenada also attend for varying periods in different specialties. On occasions, there are elective students from other overseas universities.

Postgraduate Education

The hospital is currently redeveloping its Education Centre to ensure that we can provide education within modern facilities, including a dedicated simulation suite and a comprehensive medical library. The Hospital has an excellent reputation for its postgraduate medical education. There are regular FRCS, MRCP, DCH and MRCOG courses held and ongoing MRCP training. ALS, simulation training and other similar courses are conducted locally.

SECTION 4

GENERAL INFORMATION/CONDITIONS OF EMPLOYMENT

- The post is covered by those terms and conditions of service of consultants 2003 (England) which are appropriate to the Trust. The Trust may, however, introduce future changes in standard terms and conditions of service after negotiation. All local policies and procedures apply. The appointment is pensionable under National Health Service regulations unless the successful candidate chooses to opt-out of the scheme.
- Employees of the Trust are expected to maintain a safe working environment and observe obligations under organisational and departmental Health & Safety Policies, maintaining awareness of safe practices and assessment of risk.
- The post holder will have access to secretarial support and have an office with computer and IT facilities
- Employees of the Trust are required and expected to acquaint themselves of all the Trust policies that are relevant to their area of work. The operative policies at any time are available on the Trust Intranet.
- The Trust is committed to providing safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report, quickly and confidentially, concerns about the conduct, performance, or health of medical colleagues. All medical staff practising in the Trust should ensure that they are familiar with the procedure and apply it.
- All Consultants have a continuing responsibility for the care of patients in their charge and for the proper functioning of their departments. They are required to undertake the administrative duties associated with the care of their patients and the running of their clinical departments. The Consultant will be expected to attend meetings of the appropriate department and division as required.
- All Consultants are expected to assume responsibility, both singly and corporately, for the management of junior medical staff. In particular, they are expected to be responsible for approving and monitoring junior staff rotas and junior staff locum arrangements, where appropriate. They are also expected to concern themselves with the professional development, both clinical and personal, of their trainees.
- All Consultants are required to participate in the Trust's annual appraisal process which identifies personal and professional development needs, agrees plans for them to be met, while reviewing the doctors work and performance and considering the doctors contribution to the quality and improvement of service delivery. The annual

appraisal and documentation form the evidence needed to meet the requirements for the GMC revalidation process.

- Candidates are offered mentorship to support them in their new role
- All consultants are required to participate in the Trust's annual job plan review process. Job Plans will list all NHS duties of the Consultant, the number of programmed activities and agreed supporting resources. Job Plans may only be changed with the agreement of the Trust.
- Where you intend to undertake private professional services other than such work carried out under the terms of this contract, whether for the NHS, for the independent sector or for another party, the provisions in Schedule 6 of the Terms and Conditions apply.
- Reference should be made to the "Code of Conduct for Private Practice" which sets out standards of best practice governing the relationship between NHS work, private practice, and fee-paying sessions.
- Candidates unable, for personal reasons, to work whole time are invited to apply and 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 Clinical Lead and the Clinical Director.
- All applicants to any post within the Trust are required to declare any involvement, either directly or indirectly, with any firm, company or organisation that has a contract with the Trust. Failure to do so may result in an application being rejected or if it is discovered, after appointment that such information has been withheld, and then this may lead to dismissal.
- The Consultant will be required to live within 10 miles by road (or 30 minutes travelling distance) of the main hospital base. Reimbursement of removal and associated expenses will be subject to agreement and in line with existing Trust Policy.
- This appointment is subject to the receipt of a satisfactory medical clearance from the Trust's occupational health department.
- The appointee will be expected to provide cover for annual and study leave of his/her consultant colleagues.

- Reimbursement of removal and associated expenses are discretionary and will be subject to agreement by the Trust. There is no guarantee that any reimbursement of expenses will be made.

A copy of the Terms and Conditions – Consultants (England) 2003 is available from Gerry Lambe, Recruitment Manager, Human Resources Department, North Middlesex University Hospital (020 8887 2914) or from www.doh.gov.uk/consultantframework.

Annual Leave

Annual leave is given in accordance with the Terms and Conditions of Service and the Trust Policy relating to Medical and Dental Staff. Whole-time Consultants are entitled to six weeks and two days' leave a year (32 working days) if within 7 years of service, or 6 weeks and 4 days (34 working days) after 7 completed years of service. Annual leave for part-time staff is pro rata this whole-time amount.

Consultants are expected to plan their annual leave well in advance so that their absence is not detrimental to the service. They should give no less than 6 weeks' notice of intention to take leave.

Study and Professional Leave

Study and professional leave are given in accordance with the Terms and Conditions of Service relating to Medical and Dental Staff. Consultants are currently entitled to assistance with expenses associated with approved study leave. It is the current policy of the Trust to assist consultants with reasonable fees and expenses associated with approved continuing medical education (currently up to approx. £500 per annum). Consultants are expected to plan Study Leave in advance so that their absence is not detrimental to the service.

Rehabilitation of Offenders

Because of the nature of the work of this post, it is exempt from the Section 4(2) of the Rehabilitation of Offenders Act (1974) by virtue of the Rehabilitation of Offenders Act (Exemption Order 1975). Applicants are therefore not entitled to withhold information about convictions including those which for other purposes are "spent" under the provisions of the Act and in the event of employment any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust. Any information given will be completely confidential and will be considered only in relation to application for positions to which the order applies.

Disclosure & Barring Service

Posts are offered subject to enhanced clearance from the Disclosure & Barring Service.

Confidentiality

You are required to maintain confidentiality of any information concerning patients, which you have access to or may be given in the course of your work.

Personal Conduct

All staff within the Trust are expected to treat other members of hospital staff with courtesy and respect. The Trust's rules and policies including the disciplinary procedure apply to all staff without exception. The attention of consultant medical staff is drawn to the GMC document "Good Medical Practice". The Trust will take this into account when considering the conduct of medical staff in relation to any incident.

Health & Safety Policy

Employees must be aware of the responsibilities placed on them under the Health & Safety at Work Act 1974, to ensure that the agreed safety procedures are carried out to maintain a safe environment for employees and visitors.

Security

It is the responsibility of all employees to work within the security policies and procedures of the Trust to protect the patients, staff and visitors and the property of the Trust. This duty applies to the specific work area of the individual and the Hospital in general. All staff are required to wear official identification badges.

Data Protection

This post has a confidential aspect. If you are required to obtain, process and/or use information held on a computer or word processor you should do it in a fair and lawful way. You should hold data only for the specific registered purpose and not use or disclose it in any way incompatible with such a purpose and ought to disclose data only to authorised persons or organisations as instructed. Breaches of confidence in relation to data will result in disciplinary action.

No Smoking

North Middlesex University Hospital NHS Trust operates a No Smoking Policy and all staff are advised that it is a disciplinary offence to smoke inside or outside Trust buildings or anywhere within the grounds of the hospital.

Equal Opportunities

It is the aim of the Trust to ensure that no job applicant or employee receives less than favourable treatment on grounds of sex, race, colour, nationality or national origins and is not placed at a disadvantage by conditions or requirements that cannot be shown to be justifiable. To this end the Trust has an equal opportunities policy and it is for each employee to contribute to its success.

Method of Payment

Payment of salary is made into bank account/building society account by direct bank system. Details of a bank account or building society account will be required on the first day at work. There are no facilities for any other form of payment.

Prospects of Change

National and local discussions, including sustainability and transformation plans (STPs) may result in changes to the configuration of services over time. This may require changes to work patterns, for example some consultants in future may be expected to undertake some clinical sessions in a dedicated elective centre off-site. This may result in changes to the working arrangements for individual consultant staff, but staff will be consulted about specific proposals as it affects them.

Additional information

Situated in Edmonton, North London with a multi-cultural community, the area provides a wide range of facilities and is close to the heart of London. On-site we offer car parking and restaurant facilities. Central London is easily accessible, with Liverpool Street and Kings Cross approximately 30 minutes away by public transport.

Road Access and Public Transport

Situated on the North Circular Road, the hospital is within very easy reach of the M25, M1, A1, A10 and A12. The hospital is situated close to the residential districts of North London including Enfield and Winchmore Hill, which all have an excellent environment and schools.

Silver Street main line railway station is a 6-minute walk away, with services direct to Liverpool Street Station and Seven Sisters underground Station.

VISITS FOR APPLICANTS

1. Interested applicants are welcome to visit the hospital (at their own expense). Please contact Dr Salman Sajid (salman.sajid@nhs.net).

Short listed candidates are encouraged to visit the hospital before being interviewed by the
Trust's Advisory Appointment Committee.