## JOB DESCRIPTION

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| Job Title: | Consultant Elderly Care Physician, Acute Frailty |
| Number of hours: | Full Time |
| Base: | Conquest Hospital |
| Professionally accountable to: | Chief Medical Officer |
| Responsible to: | Clinical Unit Lead |
| Responsible Officer: | Chief Medical Officer |

This is an exciting opportunity for a vibrant and enthusiastic individual to join the Elderly Care team at East Sussex Healthcare NHS Trust. We are appointing a consultant to provide specialist care to Older patients living with frailty referred to the Elderly Care team. The appointee will work with consultant colleagues and an Acute Frailty Team to provide comprehensive inpatient and outpatient services for local residents across East Sussex with a catchment area of approximately 544,000. The appointee will be based at Conquest Hospital, but this may change depending on service need.

Individual appointees should have been fully trained and accredited in all aspects of Elderly Care, with special interests in Frailty and Comprehensive Geriatric Assessment, which will complement the other two Consultant members of the Service and support the continuing development of Frailty in East Sussex Healthcare NHS Trust.

1. **Job Purpose:**

The post holder will clinically lead an Elderly Care team and provide consultant support to the Acute Frailty team in supporting earlier assessment of older patients with Frailty. The role comprises one of three posts, which is also replicated at Eastbourne DGH, together leading review of referrals in ED / AMU and Ambulatory care, supporting a base ward,

In conjunction with an Acute Frailty Team and supported discharge teams, the appointee will develop management plans to enable frail older people to live independently in their own homes where possible with appropriate support. The Acute Frailty team is mobile and the majority of time is spent at the front of house, in addition to this the Acute Frailty consultant will also support a base ward. There are no dedicated Acute Frailty beds in ED, but the Trust is planning to build an Emergency Floor in the near future which includes Acute Frailty beds. The Acute Frailty team provide in-reach to ED, CDU, AAU for all patients requiring frailty input. The Acute Frailty team can see upwards of 10 patients per day. Not all of these patients will require Consultant support as the Advanced Practitioners within the Acute Frailty team work autonomously. The appointee will also assess patients referred by other teams and provide a weekly specialist clinic which might focus on a particular area of special interest e.g., movement disorders. This clinic will also contain ward follow-ups as appropriate.

The successful applicant is also expected to take part in the medical rota currently 1 in 13 with general physician and acute physician colleagues.

The appointee will be based at Conquest Hospital, but this may change depending on service need, such as to cross site cover during periods of annual leave.

1. **Key Specialty Information**

The Trust is currently organised into 3 Divisions; the Service for Elderly Care being part of the Urgent Care Division. The Service for Elderly Care consists of Consultants and teams at Eastbourne District General Hospital and Conquest Hospital.

There are three dedicated 28 bedded Elderly Care wards at both Conquest Hospital and Eastbourne District General Hospital, these are supported by the existing medical teams with Consultant ward rounds and daily MDT board rounds to support discharge.

Acute stroke services are based at EDGH, with regular TIA clinics cross site.

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| **EASTBOURNE SITES** | **CONQUEST SITES** |
|  | |
|  | Dr McIntyre – Clinical Lead & Consultant Geriatrician |
| Dr H. Alexander – Consultant Geriatrician | Dr T. Win – Acute Frailty Consultant |
| Dr A. Nahas - Consultant Geriatrician | Dr E. Mucci Acute Frailty & TIA Consultant |
| Dr D. Budihal - Consultant Geriatrician | Dr S Sivathiran – Locum Acute Frailty Consultant |
| Dr L Kawa – Locum Consultant Geriatrician | Dr C Lasantha – Locum Consultant Geriatrician |
| Dr A. Nahhas - Consultant Geriatrician | Dr M. Rahmani Consultant Geriatrician |
| Dr M. Fonseka - Consultant Geriatrician | Dr R. Golez Consultant Orthogeriatrics |

This Post – Conquest :

One of 3 Acute Frailty Consultants supporting:

Acute Frailty in-reach

28 beds on Elderly Care Ward Middle Grade/Junior Staff (per Ward team):

Spr Reg

2 x FY2

FY1

Acute frailty team

SpR / Advanced Practitioner

Physician Associate

Doctor Assistant

Dedicated therapy and Nurse practitioner team (Hospital Intervention Team)

MDT

Dedicated Acute Frailty Team

Frailty Practitioners

Allied Healthcare

Adult Social Care

Specialist Nurses

Dementia Care Team

Acute Medical Team

Hospital Intervention Team

Out of Hospitals

Support Staff:

Secretaries / Outpatient Nursing Staff

### Proposed Work Programme – 10 PAs + 1 PA for On-Call commitment

| Acute Frailty Week (1 in 3)  Summary : DCC 8.25 / SPA 0 / Admin 1.75 + 1 PA for On-Call commitment | | | | | |
| --- | --- | --- | --- | --- | --- |
| **DAY** | **AM/PM** | **DETAILS** | **Direct Clinical Care (DCC)** | **SPA** | **Admin** |
| Monday | am | Board Round / Acute Frailty (New + Reviews)/ MDT | 1.00 |  |  |
| pm | Acute Frailty (New + AEC)  MDT | 0.75 |  | 0.25 |
| Tuesday | am | Board Round / Acute Frailty (New + Reviews)/ MDT | 1.00 |  |  |
| pm | Acute Frailty (New + AEC)  MDT / Admin | 0.50 |  | 0.50 |
| Wednesday | am | Board Round / Acute Frailty (New + Reviews)/ MDT | 1.00 |  |  |
| pm | Acute Frailty (New + AEC)  MDT | 0.75 |  | 0.25 |
| Thursday | am | Board Round / Acute Frailty (New + Reviews)/ MDT | 1.00 |  |  |
| pm | Acute Frailty (New + AEC)  MDT / Admin | 0.50 |  | 0.50 |
| Friday | am | Board Round / Acute Frailty (New + Reviews)/ MDT | 1.00 |  |  |
| pm | Acute Frailty (New + AEC)  MDT | 0.75 |  | 0.25 |
| **SUB-TOTAL** |  |  | **8.25** | **0** | **1.75** |

| **Base Ward Week ( 2 in 3)**  Summary : DCC 6.00 / SPA 3.00 / Admin 1.00 + 1 PA for On-Call commitment | | | | | |
| --- | --- | --- | --- | --- | --- |
| **DAY** | **AM/PM** | **DETAILS** | **Direct Clinical Care (DCC)** | **SPA** | **Admin** |
| Monday | am | Board round / review new cases  PTWR from Weekend or admin  MDT | 0.75 |  | 0.25 |
| pm | OPD  1x New  2 x New IP Stay  3x Follow Up | 1.00 |  |  |
| Tuesday | am | Board round  Ward Round 14 patient /MDT | 1.00 |  |  |
| pm | SPA (Teaching/  Supervision) |  | 1.00 |  |
| Wednesday | am | Board round / review new cases  Admin / MDT | 0.50 |  | 0.50 |
| pm | SPA (CPD) |  | 1.00 |  |
| Thursday | am | Board round / review new cases  PTWR alternate weeks or admin  MDT | 0.75 |  | 0.25 |
| pm | Community Frailty Virtual ward round | 1.00 |  |  |
| Friday | am | Board round  Ward Round ( 14 patient /MDT | 1.00 |  |  |
| pm | SPA |  | 1.00 |  |
| **SUB-TOTAL** |  |  | **6.00** | **3.00** | **1.00** |

##### **Office Accommodation and Secretarial Support**

This post is supported by a whole time experienced secretary and the post holder will have an adequately

equipped office, including IT facilities and dictation through Big hand.

##### **Other Commitments**

The Supporting Professional Activities will be used for non-clinical administrative duties, audit, research, clinical governance, teaching and training, and reflective practice.

Time off in lieu will be considered if work is undertaken outside of the job plan.

It is essential that the candidate is certified in General Internal Medicine.

1. **Responsibilities of the Post**

The post-holder will be managerially accountable to the Chief of Division, and professionally accountable to the Medical Director. The successful candidate will be expected to agree a formal job plan with the Clinical Lead indicating the number of programmed activities, within 1 month of taking up post.

The post-holder will be expected to cross-cover essential services when his/her Consultant colleagues are on leave.

1. **Main Conditions of Service**

These will be in accordance with those approved by the Trust. Currently these are covered by the Whitley Councils.

Any consultant who is unable, for personal reasons, to work full-time will be eligible to be considered for this post. If such a person is appointed, modification of the job plan will be discussed on a personal basis in consultation with consultant colleagues.

The new consultant will be required to reside not more than ten miles or thirty minutes travelling time by road from their base hospital, unless specific approval is given to a greater distance.

The appointment is subject to a satisfactory medical report from the Trust’s Occupational Health Consultant.

You will be paid in accordance with the Terms and Conditions for Consultant Medical Staff, and assimilated to the salary scale taking account of all relevant Consultant service.

Annual Leave must be applied for at least six weeks in advance and approved by the Clinical Unit Lead. The annual entitlement is thirty days per year.

All medical staff under contract to East Sussex Healthcare NHS Trust will be expected to comply with local policies and procedures, copies of which are available on the Trust’s Internet site, from the Human Resources Department or from the Clinical Unit General Manager, and will be expected to attend Mandatory training sessions.

##### **Special Duties Require of this Post**

###### Clinical Governance

The appointee is expected to be committed to the improvement of quality of clinical care and to participate in incident reporting, risk management and Clinical Governance Meetings.

**Appraisal**

The appointee is expected to compile an annual portfolio with evidence of continuing professional development in accordance with the Trust’s appraisal process. He/she will be expected to participate in annual appraisal by designated consultants and to produce a personal development plan which will be shared with the Medical Director and Chief Executive. The appraisal process will also be part of the information used to revalidate Consultants by the GMC.

**Mentoring**

Mentoring for the newly appointed consultant will be provided in-house by the existing consultants and Medical Director. A named mentor will be appointed to support the transition into their role. The mentor will also support and signpost education and leadership development, encourage networking and support personal wellbeing.

###### Audit

The appointee will be expected to actively participate in audit. He/she will be expected to initiate and supervise audit projects related to his/her particular sub-speciality interest. He/she will liaise with the audit speciality Lead Consultant. All audit projects, including Trust directed audit are approved by the Clinical Effectiveness and Audit Committee. Participation in national audit is encouraged.

###### Research

The Elderly Care Service is research active. The Universities of Sussex and Brighton, are actively developing research interests and expertise in a number of areas of medical and health service-related research, and encourage academic and research links with the Trust.

###### Continuous Professional Development/Continuous Medical Education

Taking study leave is a necessary part of Continuing Medical Education/CPD. Application for study leave must be submitted six weeks prior to the dates requested. There is a study leave entitlement of 10 days a year or 30 days over any three year period. Study leave is agreed by the Clinical Unit Lead and should be linked to the individual’s personal development plan. Evidence of CME participation will become part of the potholder’s portfolio.

Visits to other hospitals/working with colleagues are encouraged as an important part of CPD.

###### Teaching

The postholder will be expected to participate in clinical teaching of undergraduate and junior medical staff within their supporting Professional Activities as required. If there is a specific interest or need, a more extensive teaching role can be developed within the Divisional structure and under the direction of the Speciality College Tutor. The Brighton and Sussex Medical School, which opened in 2003, will present opportunities for participation in undergraduate education.

Educational Supervision

Consultants are required to supervise the education of doctors in training; the postholder will be involved with teaching and training junior doctors and should help with both their professional and personal development. Consultants must ensure that junior doctors in their care are not overwhelmed by clinical commitments or overburdened by responsibilities inappropriate to the experience required. Consultants are also responsible for the assessment and appraisal of trainees under their supervision and must keep the Clinical and/or College tutor aware of problems that may arise.

**Review**

The job description will be regularly reviewed. It is intended as a guide to the general scope of duties and is not meant to be definitive or restrictive. It is expected that some of the duties will change over time and this Job description will be subject to change as required by the Trust.

**7.** **General Description of Trust and Services**

**ABOUT OUR TRUST**

**We provide safe, compassionate and high-quality hospital and community care to over half a million people living in East Sussex and those who visit our local area.**

We are one of the largest organisations in East Sussex with an annual income of £650 million and we are the only integrated provider of acute and community care in Sussex. Our extensive health services are provided by over 8,000 dedicated members of staff working from two acute hospitals in Hastings and Eastbourne, three community hospitals in Bexhill, Rye and Uckfield, over 100 community sites across East Sussex, and in people’s own homes.

In 2020 the Care Quality Commission (CQC) rated us as ‘Good’ overall, and ‘Outstanding’ for being Caring and Effective. Conquest Hospital and our Community Services were rated ‘Outstanding’ and Eastbourne DGH was rated ‘Good’.

Our two acute hospitals have emergency departments and provide 24 hour a day care, offering a comprehensive range of surgical, medical, outpatient and maternity services, supported by a full range of diagnostic and therapy services. Our centre for trauma services and obstetrics is at Conquest Hospital, while our centre for urology and stroke services is at Eastbourne DGH. At Bexhill Hospital we offer a range of outpatient, day surgery, rehabilitation and intermediate care services. At Rye, Winchelsea and District Memorial Hospital we offer outpatients, rehabilitation and intermediate services. At Uckfield Community Hospital we provide day surgery and outpatient care.

In the community, we deliver services that focus on people with long term conditions living well outside hospital, through our integrated locality teams working with district and community nursing teams. Community members of staff also provide care to patients in their homes and from a number of clinics, health centres and GP surgeries.

We are part of the Sussex Health and Care Integrated Care System (ICS), which is made up of health and care organisations across Sussex.

## In the last year...

* our emergency departments had over **130,000** attendances
* 3,053 babies were born in our hospitals
* **54,000** people had planned surgery, **87%** of these were day cases
* we received over **21,800** cancer referrals
* **42,000** referrals were made to community nursing, **10,100** were seen within 24 hours
* there were **410,000** outpatient appointments, nearly **300,000** were consultant-led
* we carried out **283,000**x-rays and scans
* **7 million** pathology tests were undertaken
* **1.2 million** calls were answered by our switchboard team
* **470,000** medicines were dispensed by our Pharmacy

Our Values

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Executive Team Structure

A screenshot of a group of people

Description automatically generated

For further information about the Trust please visit the website, [www.esht.nhs.uk](http://www.esht.nhs.uk)

For further information on the role or to arrange a visit to the department, contact;

Dr Hugh McIntyre

Clinical Lead

[hughmcintyre@nhs.net](mailto:hughmcintyre@nhs.net)

Gemma Sheppard

General Manager

[Gemma.sheppard1@nhs.net](mailto:Gemma.sheppard1@nhs.net)

**PERSON SPECIFICATION -**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Essential** | **Desirable** | **Method of Assessment** |
| **Values and Behaviours** | * Put the patient first by being Compassionate, helpful, caring, respectful and patient * Always taking opportunities to improve, encouraging excellence * Work as one team – communicate, collaborate and share * Respect each other by being polite, pleasant and listening |  |  |
| **Qualifications and Training** | * Hold a medical qualification or qualification registered with the GMC * Entry onto the Specialist Register for GMC or be within six months of obtaining CCT/CCST or equivalent * On specialist register for GIM and geriatric medicine * Appropriate higher medical qualification i.e. MRCP/MRCS or equivalent | * MD or equivalent higher degree or evidence of relevant research | CV / Application |
| **Clinical Experience** | * High standard of clinical skill and expertise in the specialty * Able to contribute to the full range of skills required for the on call rota for the specialty * Comprehensive clinical experience in general medicine and geriatric medicine. * Good working knowledge of the theory and practice of Geriatric Medicine | * Good all round experience in General Internal Medicine/Care of the Elderly and/or other Medicine Specialties. * Special interest and expertise in the subspecialty of geriatrics * Experience in Frailty & Comprehensive Geriatric Assessment | CV / Application / Interview |
| **Management & Administrative Experience** | * Audit/Research * Has attended a recognised management training event or will have such training on completion of CCT/CCST * Supervision of post graduate trainees * Personal time management skills * Clinical Governance * Ability to organise outpatient waiting lists | * Familiarity within issues of service organisation and development | CV / Application /  Interview |
| **Teaching Experience** | * Experience of teaching undergraduate and postgraduate trainees * Ability to teach clinical skills | * Experience of supervising junior doctors * Experience of teaching Lay groups and other staff groups * Ability to supervise postgraduate research | Application /  CV / Interview |
| **Research Experience** | * Ability to contribute to change management * Ability to apply research findings to clinical problems * Ability to critically review research | * Publications in peer review journals | Application /  CV / Interview |
| **Language** | * + Demonstrable skills in written and spoken English to the appropriate standard necessary to fulfil the job requirements. |  |  |
| **Personal Attributes** | * Ability to work in a multi-disciplinary team * Ability to work in partnership to deliver a patient centred service * Demonstrate an understanding and willingness to embrace user involvement * Good interpersonal skills * Enquiring, critical approach to work * Ability to communicate with patients and relatives * Commitment to continuing professional development * Willingness to undertake additional professional responsibilities to local, regional or national levels * Willingness to work with consultant colleagues and management to maintain and develop a comprehensive service * Able to make own arrangements for travel between working sites * Commitment to Specialty development |  | Application / CV / Interview |
| **Other** |  |  |  |