



Consultant Paediatric Anaesthetist

Surgery, Peri-operative and Critical Care Division

Full time - 10 Programmed Activities

JOB DESCRIPTION

CONSULTANT IN ANAESTHESIA

WITH AN INTEREST IN PAEDIATRIC ANAESTHESIA

February 2024



Context

Barts Health NHS Trust is one of Britain's leading healthcare providers and the largest trust in the NHS. It was created on 1 April 2012 by bringing together three Trusts: Barts and The London NHS Trust, Newham University Hospital NHS Trust and Whipps Cross University Hospital NHS Trust. The new trust has a turnover of approximately £1.1 billion and has approximately 15,000 employees.

Together our hospitals - Newham University Hospital in Plaistow, St Bartholomew's (Barts) in the City, The Royal London in Whitechapel and Whipps Cross in Leytonstone - deliver high quality clinical care to the people of East London and further afield.

The hospitals offer a full portfolio of services that serve the needs of the local community and are home to some of Britain's leading specialist centres including cancer, cardiac, trauma and emergency care. Barts Health also has one of the UK's busiest children's hospitals and internationally renowned surgical facilities.

Our vision is to create a world-class health organisation that builds on strong relations with our partners and the communities we serve – one dedicated to ending the historic health inequalities in East London. We will build an international reputation for excellence in patient care, research and education. And as members of UCL Partners, the largest academic health sciences system in the world, we will ensure that our patients are some of the first in the country to benefit from the latest drugs and treatments.

We are looking for the best talent to lead our ambitious healthcare organisation. In return, Barts Health will provide professional development opportunities, enabling investment in a range of new initiatives that would mean:

- Doctors and nurses in training will be able to gain experience in different hospitals along the whole patient pathway;
- There would be greater opportunity for career progression – we could retain good staff who might otherwise leave to gain promotion;
- Becoming world-class will enable us to recruit some of the best doctors and researchers in the world, who can share their knowledge and experience;
- Joining forces with other partners in an Academic Health Science System will mean that staff would be better able to secure funds and pool their talents to develop new technology, techniques and treatments.

ANAESTHESIA AT BARTS HEALTH

We provide anaesthetic services across all our hospitals: The Royal London Hospital, Whipps Cross



Hospital, Newham Hospital and St Bartholomew's Hospital (Barts).

Future reconfiguration of services will lead to movement of anaesthetic staff across hospitals. The combined departments have approximately 120 consultants.

At **St Bartholomew's Hospital**: Cardiothoracic surgery, cardiology and respiratory medicine, breast and endocrine, oncology, radiotherapy and cardiothoracic. With the exception of ophthalmic and breast surgery, all surgical services moved to the Royal London Hospital in January 2012.

At the **Royal London Hospital**: Trauma and orthopaedics, gynaecology, gynaecology oncology, ENT, general and plastic surgery, neurosurgery, maxillofacial, dental, paediatrics and obstetrics.

Paediatric Anaesthesia

The paediatric anaesthetic department consists of 15 consultants, 10 specialist registrars. We have specific links to the Paediatric Critical Care Unit (PCCU), the Homerton Hospital, the Children's Acute Transport Service (CATS) and the Trauma Service. We cover the following specialties: neonatal surgery, general, plastics, ophthalmology, gastroenterology, interventional radiology, diagnostic imaging, ENT including airway surgery, dentistry and trauma and orthopaedics. We provide a 24 hour paediatric acute pain service (along with our two pain CNSs) and provide airway and resuscitation support to the paediatric intensive care and paediatric ED (the biggest in London.) Paediatric patients have a dedicated theatre suite with 4 operating theatres, recovery area and associated day case and inpatient wards. We deliver anaesthesia in the MRI and CT areas, interventional radiology suite and endoscopy suite, the dental institute and are developing a paediatric pre-operative assessment service. The Trust is a major trauma centre; in the last five years, we have attended 350 advanced paediatric trauma calls per year. We have tertiary paediatric respiratory, gastroenterology, neurology, neonatal (including the regional neonatal transport unit) and paediatric surgery units. We work closely with our medical and surgical colleagues as part of the Children's Hospital within Barts Health.

We have a very strong ethos in teaching and training in paediatric anaesthesia at Stage 2 and 3 levels. The successful candidate will be expected to be actively involved in the delivery of this. We provide various forms of structured training to the trainees from the School of Anaesthesia during their paediatric block- a weekly evidence based journal club, a weekly governance meeting and weekly case based teaching. There is opportunity to be involved in paediatric simulation and delivery of courses for the FRCA. There are opportunities for research and audit We host an International Paediatric Anaesthesia Education Day every November.

Adult Surgery

There is a large general surgical unit with sub-specialty units in upper GI, lower GI cancer and Inflammatory bowel disease, and hepatobiliary surgery which includes liver and pancreatic resections but not transplant. Gynae-oncology operate on major pelvic cancer and along with a number of other surgical specialties have an active robotic surgical programme. These specialties have been consolidated into a complex abdominal pelvic unit which will run in a separate group of theatres based



in the third floor theatre suite. This has the newly established surgical monitored unit attached to it on the third floor which will be able to take patients up to level 2 care post-operatively. There is also a 42 bedded step down ward which is to allow the safe flow of surgical patients through the hospital incorporating our ERAS pathways. The monitored unit will also accommodate patients from other specialties undergoing high risk surgery including neurosurgery, ENT, renal, orthopaedics and vascular surgery. We run 12 inpatient operating theatres on the fourth floor where other major elective and all emergency surgical cases are performed. It is co-located with the anaesthetic department and the intensive care unit on the 4th floor.

Trauma

Care of those who have sustained serious trauma opens up a huge challenge to those involved in their acute and on-going management. The Royal London Hospital is the largest of the four major trauma centres in the London Trauma System and in 2015 received in excess of 3000 trauma activations, almost 25% of which had an ISS >15. It hosts and receives admissions from both the helicopter and land based trauma retrieval service (London's air ambulance) in conjunction with London and regional ambulance services.

Trauma embraces all ages of patient from infants to the elderly. With shifts in population dynamics, we are also seeing increasing numbers of elderly trauma patients, with associated co-morbidity and poorer physiological reserve. The department of anaesthesia plays a major role in the management of acute trauma within the emergency department, interventional radiology, theatres and critical care unit.

Within our experienced anaesthetic department, we have developed a team of consultant anaesthetists whose focus is to deliver expert peri injury care to all ages of trauma patient throughout their admission. We endeavor to attend all trauma calls where we assist our trainees in the assessment and management of all levels of traumatic injury. Emphasis has been placed on management of major, catastrophic haemorrhage incorporating best evidence into practice, alongside our academic colleagues at QMUL. Recent introduction of peripheral and regional analgesic techniques has improved the pain management and rehabilitation of these complex patients. These advances in management have all required a comprehensive education programme, much of which has been facilitated via multidisciplinary "in situ" simulation. Our progress is now attracting fellows from civilian and military backgrounds, all of whom bring experience and innovation to the service.

Adult Orthopaedics

We run a dedicated orthopaedic trauma list every day to ensure we continue to deliver on this aspect of care for our trauma patients. The workload comprises the surgical management of complex muscular and bony injuries, working alongside other surgical teams to ensure the best outcome for our patients. In addition we run elective orthopaedic lists for complex surgeries in high risk patients who require a large amount of support in the perioperative period. This is a large caseload of people who benefit from a perioperative approach which we deliver with our surgical colleagues including pre-operative review and assessment, regional anaesthesia for surgery and pain relief and postoperative care.

Adult Vascular



We are a busy vascular centre at The Royal London Hospital which takes referrals from across North East London. There is a varied case mix, which includes both thoracic and abdominal endovascular aortic stenting, open aortic procedures, carotid endarterectomies (both elective and post TIA), peripheral revascularisation and all types of minor interventions in high risk patients. We run a daily 3-session operating list, with an average of 10-15 major vascular cases per week. An increasing number of the vascular procedures are being done in interventional radiology. All major elective patients are seen in a dedicated vascular pre-admission clinic and have cardio-pulmonary exercise testing prior to surgery.

Adult Neurosurgery

The Barts Health centre for neurosciences is housed at the Royal London hospital site. We are a major neurosurgical centre, undertaking all types of elective and emergency surgery for brain and spinal conditions. The unit includes a dedicated neurosurgical HDU.

Elective work includes cranial and spinal tumour resection, neurovascular work (both interventional and surgical), shunt surgery, complex spinal surgery and less invasive procedures such as kyphoplasty. We have the biggest neurostimulation unit in Europe undertaking vagal nerve stimulation for epilepsy.

We have considerable expertise in the care of traumatic brain and spinal injury as the first major trauma centre in London. As home to London's air ambulance we treat some of the most seriously ill and injured patients in London. Over 1000 patients a year come to us requiring emergency neurological care, including emergency craniotomies and craniectomies.

We are now a major hyperacute stroke centre and are building on our expertise in interventional neuroradiology and Barts Health now run an 24 intracranial clot retrieval service.

Obstetrics

There are approximately 5500 deliveries a year with a Caesarean sections rate of 20%. We run daily elective section lists and have 2 obstetric anaesthetists working on Labour Ward most days. There is a dedicated obstetric fellow attached to the department full time (a shared position with Queen Charlotte and Chelsea Hospital). The Royal London obstetric unit has been designated the NE Thames high risk centre which takes pregnancies from across the region. We work closely with the Interventional Radiology department, for example using aortic balloons in massive obstetric haemorrhage. We have a dedicated 4-bedded obstetric Level 2 area and are involved with multi-disciplinary teaching and training in the simulation centre (both for anaesthetic trainees and midwives). We run a high risk antenatal clinic as well as pre-assessment clinics for elective sections.

Adult Head and Neck

The Head and Neck Services include neuro, maxillofacial and ENT. This active, well publicised unit provides elective major surgery for difficult airway problems and a trauma service at The Royal London Hospital.

Adult Renal



The Trust has a large renal unit with an active live kidney donor and transplant programme and busy renal access lists to support the large renal medicine unit based at RLH. We also run a dedicated renal anaesthetic pre-assessment clinic for renal patients awaiting transplant.

Adult Pain Medicine

The Pain Service at Barts and the London sits within the anaesthetic department and has international reputation for integrated multidisciplinary input across various domains of pain medicine in one functioning department. The strong academic links of the pain services at Barts Health bring together a consortium of healthcare professionals with expertise in the delivery of interventional and non-interventional pain medicine, plus research methodologists.

The service is committed to providing an interdisciplinary integrated service to both in and out-patients alike. The medical staff are supported by a team of full-time nurse specialists while other disciplines including psychology, physiotherapy and occupational therapy provide input to the service.

Radiology

The anaesthetic department provides cover for the provision of general anaesthesia and sedation in the radiology department on both the Royal London Hospital and St Bartholomew's Hospital site. At the Royal London site alone we cater for 16 consultant led sessions in interventional radiology; this is planned to be extended in the near future. There is a wide mix of cases which covers both elective and emergency work, which includes hepatobiliary, vascular, renal, neurosurgical, trauma, gynaecology and obstetric specialties. As a department we also support the education of non-anaesthetic staff who provide sedation for patients undergoing Interventional radiology procedures.

Other Specialties

There is in addition a significant anaesthetic commitment to the Departments of Radiotherapy, Radiology, Endoscopy and Medical Oncology. We also run an invasive lines service at the Barts site.

Intensive Care

The Adult Critical Care Unit (ACCU) at the Royal London Hospital has 2500 admissions per annum. The varied case mix includes polytrauma, upper gastrointestinal, vascular, neurosurgery and general medical patients and plays a major role in post-surgical care. The dedicated surgical and medical HDUs are amalgamated with the level 3 facility. In 2012 the critical care floor opened further beds totaling 44 split between level 2 and 3.

Adult Pre-Assessment

There are daily pre-assessment clinics that assess the majority of elective surgical patients at the Royal London. There are anaesthetic and cardiology high risk pre-assessment clinics with a cardiopulmonary exercise testing programme. There is a POA MDT held every week to discuss the management of high risk surgical patients.

Research

The Barts Health & QMUL Critical Care and Perioperative Medicine Research Group comprises six senior clinical academics, and three clinical lecturers. Perioperative medicine is a major focus of our work and we have an international reputation for research and teaching excellence in this field. We have



particular expertise in pragmatic clinical trials (Prof Rupert Pearse), translational/mechanistic clinical studies (Prof Gareth Ackland), recovery from critical illness (Dr Zudin Puthuchery), renal dysfunction (Dr John Prowle), and cardiogenic shock (Dr Alistair Proudfoot). We recruit at least 500 perioperative patients a year at the Royal London Hospital site into several trials, funded by NIHR, MRC, British Heart Foundation and Bart's Charity. www.qmul.ac.uk/ccpmg/ shows the scope and opportunities for perioperative research within the department. Our education themes are led by Dr Parjam Zolfaghari and include MSc courses in perioperative medicine and critical care.

Anaesthetic trainees

Barts Health is a well respected teaching centre and pivotal in offering high quality anaesthesia and ICM training to trainees attached to the London School of Anaesthesia (North East Rotation). Within the Department we have three Training Programme Directors who play a large part in managing the recruitment of trainees, the ARCP (assessment) process and planning trainee rotations. Within the Royal London Anaesthetic Department alone, we have over 50 trainees on rotation at any one time.

Medical Students

We provide teaching for Final Year medical students from Queen Mary University of London. This is a 3 week block, split between intensive care and theatre anaesthesia.



JOB DESCRIPTION

Job Title:	Consultant Paediatric Anaesthetist (10 Programmed Activities) Barts Health NHS Trust
Division:	Surgery, Peri-operative and Critical Care Division
Terms & Conditions of Service	In accordance with the Consultant Contract (2003) and NHS Terms and Conditions of Service for Hospital Medical and Dental Staff.
Responsible to:	Dr Christene Swampillai, Clinical Lead for Anaesthesia and Peri-operative Medicine Dr Carmel Cassar, Clinical Lead Paediatric Anaesthetist Dr Madeleine Dancey, Clinical Director, Perioperative and Pain Medicine
Accountable to:	Dr Malik Ramadan, Medical Director Dr Nicholas Bunker, Divisional Director

JOB SUMMARY

MAIN DUTIES AND RESPONSIBILITIES

The post is a substantive post in anaesthesia based at Barts & The Royal London Hospitals. The post holder will be an employee of Barts Health and there may be future opportunities or requirements to work at one of the other hospitals in the Barts Health group.

This post is for a Consultant Anaesthetist with specialist training in paediatric anaesthesia. The appointee would be able to cover all aspects of paediatric anaesthesia and contribute to 24 hour paediatric anaesthesia consultant on call. There is a requirement to cover 2 sessions in adult anaesthesia each week upon appointment, which can be reviewed going forward. The appointee must be able to work flexibly and be able to cover the specialities provided for at Barts & The Royal London Hospitals.

In addition to the challenges of the role, we can offer you:

- A commitment to continuing professional development
- The opportunity to work part time

Applicants should possess full GMC registration and either be on the Specialist Register or be within 6 months of receiving their Certificate of Completion of Training (CCT) at the time of interview.

SPECIFIC RESPONSIBILITIES



This post is for an anaesthetist with a special interest in paediatric anaesthesia and the successful candidate would be expected to contribute to quality improvement programmes and patient pathways in this area of perioperative medicine and anaesthesia and to work collaboratively with other specialties.

The department would expect consultants to work flexibly. However, the department will try to help consultants to develop and maintain areas of clinical expertise with some regular clinical commitments. The initial contract will be for 10 programmed activities (PAs) as described in the 2003 consultant contract. These activities will be split between direct clinical care (DCC) and supporting professional activities (SPA). The successful candidate will start with a provisional job plan prior to agreeing a final job plan, including personal and professional developmental objectives with the Clinical Lead/Clinical Director within 3 months of commencement. The initial SPA allocation will be 1.5 per week (6 hours) although this may increase, following job planning, as additional responsibility is taken on. The successful applicant may have the opportunity to offer to work additional DCC PAs per week but this will be subject to the service requirements of the department.



Job Plan
10 PA contract

Job Plan

The Job plan will be negotiable depending on your interests, but will initially include one day of adult anaesthesia per week and two days of paediatric anaesthesia with after hours on call for paediatric anaesthesia.

Day and Session	Frequency	Hospital	Description	Category	PAs
Monday	0730-1800	RLH	Adult Theatres/Flexible	DCC	2.65
Tuesday	Weekly 0900-1500	RLH	SPA	SPA	1.75
Wednesday					
Thursday	Alternate Weekly 0730-1800	RLH	Paediatric theatres (General surgery/dental/orthopaedics)	DCC	1.35
Friday	Weekly 07.30-1800	RLH	Paediatric theatres (ENT/general surgery/plastics)	DCC	2.65
				On Call	1.6
Total					10



The final job plan will be flexible in the days worked and may include one 3-session day.

The total will include 8.5 DCCs (including one on-call) and 1.5 SPA in the first instance

This job plan shows the proportion of paediatric, SPA and on-call work but the days are subject to change depending on requirements at the time of appointment.

On Call

The structure of the on call arrangement is currently under review, but will average at 1:11 with internal cover. The on call involves cover for paediatric anaesthesia emergencies mainly in the paediatric theatres. It also involves assistance for critically ill children in the ED, PCCU, NICU and all ward areas. The on call consultant answers queries from the trainee covering the acute paediatric pain service out of hours.

The current allowance for on call is 1.6 PAs. This will include predictable and unpredictable on call for the Paediatric Anaesthesia Service.

GENERAL DUTIES OF CONSULTANT STAFF:

Patient Care

Consultants will have a continuing responsibility for the care of patients in their charge. They will undertake administrative duties associated with providing patient care. Access to office space, computers and secretarial support will be provided. Consultants are expected to deliver safe and evidence based anaesthesia and analgesia in line with agreed departmental Trust and national policies and guidelines.

Doctors in training

Consultants are expected to realise their continued responsibility for teaching and training junior doctors and undergraduates. All consultants are required to assume responsibility both singularly and corporately for the management of trainee medical staff. In particular, they are required to be responsible for approving and monitoring trainee rotas and trainee locum arrangements, where appropriate.

Clinical Governance

The post-holder will comply with the Trust's clinical governance requirements. This will include participating in clinical audit and review of outcomes, working towards achievement of national and local performance management targets, complying with risk management policies, and participating in the consultant appraisal process.



The post-holder will also be responsible for maintaining satisfactory patient notes and, when relevant, for entering data onto a computer database in accordance with the rules and regulations of the Data Protection Act.

Quality Improvement (QI)/Audit

The candidate will have the opportunity to participate in QI projects in accordance with the Trust's Core Audit Priorities, set by the Barts Health Board. Projects should be instigated by publication of evidence-based guidelines (e.g. NICE guidance) as well as local risk management, patient satisfaction and business needs. The emphasis is on team learning and quality improvement. Participation in multi-disciplinary and national QI as well as patient participation is encouraged.

All clinical effectiveness projects in which the appointee is involved must be approved by the specialty Clinical Effectiveness Lead prior to registration with the central clinical audit team. Completion of the full audit cycle will be monitored at appraisal and contribute to revalidation.

All staff are required to attend monthly clinical audit and service improvement half days to share project findings and agree recommendations. No elective clinical activity is scheduled during the session so that quality and safety issues are examined and appropriate recommendations taken forward with the agreement of the team.

Project reports written in Trust format should be disseminated to stakeholders and appropriate Trust committees and, where improvement is proven, lead to publication or conference presentation. Agreed actions must be monitored and followed up with re-audit to complete the audit cycle. Senior staff should support juniors and students in undertaking appropriate projects, raising awareness of Trust clinical audit policy on project registration, data quality, information governance and re-audit.

Management

The appointee will be expected to undertake the administrative duties associated with the care of their patients and the day to day running of the clinical areas they work in. They will also contribute to the administration of the department to ensure that the clinical service operates effectively. Consultants are expected to take a proactive role in the planning and development of services.

Appraisal and revalidation

Consultants must actively participate in the annual appraisal process in order to comply with the legal requirements of revalidation to maintain their licence to practice.

Continuing Professional Development

The post-holder will participate in the appraisal process and will agree a personal and professional development plan with their appraiser 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 Colleges, the General Medical Council, the Chief Medical Officer and the Trust itself. The post holder will be supported by appropriate study leave allocations, financial support and the Trust's appraisal scheme for consultant staff.



Critical incident reporting

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

Complaints handling

The post-holder will have shared responsibility for handling patient and user complaints and will work with the Trust's complaints department in ensuring timely responses for complainants.

MAIN CONDITIONS OF SERVICE

The appointment is subject to the most recent version of the 2002 NHS Terms and Conditions of Service for Hospital Medical and Dental Staff and Doctors in Public Health Medicine and Community health service (England and Wales) and the 2003 NHS Consultant Contract. The appointee will automatically be enrolled in the National Health Service Pension Scheme.

Please note that the proposed job plan may include some "premium time" working. Premium time is defined as any time which falls outside 7am to 7pm Monday to Friday or any time on Saturday, Sunday or a Public Holiday. In recognition of the unsocial nature of work during premium time, any sessions worked during this time shall be calculated as 3 hours as a full session (PA). Working in this way during premium time is not on call work and will be included as part of scheduled Direct Clinical Care.

- The post holder is clinically responsible to the Clinical Director of the specialty you are applying for and managerially accountable to the Chief Operating Officer for the trust.
- The NHS (Appointment of Consultants) Regulations 2005 prevent appointment of any applicant for consultant posts commencing after 1st January 1997 who is either not:
 - On the GMC specialist register
 - In possession of the CCT, or EEA/EU equivalent, or within 6 months of CCT if still in training.
 - It is the responsibility of applicants to satisfy all necessary GMC requirements prior to appointment. Applicants must ensure they provide evidence in their application identifying eligibility to be placed on the specialist register. This would ideally be in the form of a notification from the GMC.
- The full time basic salary for the first appointment of an NHS consultant (as at 1st April 2012) is set out below, including payment for agreed additional programmed activities. Part-time consultants will be paid pro rata, based on the number of agreed weekly Programmed Activities in the consultant's Job Plan. Salary on commencement and subject to progression will be in accordance with Paragraphs 4-9 of Schedule 14 of the Terms and Conditions. A London Weighting Allowance of £2,162 per annum (pro rata for part-time consultants) is payable. There are separate arrangements for those whose first appointment as an NHS consultant was before 31st October 2003. These are stated in the Terms and Conditions of service and the 2003 Consultant Contract.



Pay thresholds

Annex A: Section 2: Consultant (2003 contract) basic salary and allowances

Threshold	Years completed as a consultant	Basic salary (£)	Period before eligibility for next threshold	Pay scale code	
				Substantive	Locum
1	0	88,364	1 year	YC72 Point 00	YC73 Point 00
2	1	91,131	1 year	YC72 Point 01	YC73 Point 01
3	2	93,898	1 year	YC72 Point 02	YC73 Point 02
4	3	96,665	1 year	YC72 Point 03	YC73 Point 03
5	4	99,425	5 years	YC72 Point 04	YC73 Point 04
	5	99,425	4 years	YC72 Point 05	YC73 Point 05
	6	99,425	3 years	YC72 Point 06	YC73 Point 06
	7	99,425	2 years	YC72 Point 07	YC73 Point 07
	8	99,425	1 year	YC72 Point 08	YC73 Point 08
6	9	105,996	5 years	YC72 Point 09	YC73 Point 09
	10	105,996	4 years	YC72 Point 10	YC73 Point 10
	11	105,996	3 years	YC72 Point 11	YC73 Point 11
	12	105,996	2 years	YC72 Point 12	YC73 Point 12
	13	105,996	1 year	YC72 Point 13	YC73 Point 13
7	14	112,569	5 years	YC72 Point 14	YC73 Point 14
	15	112,569	4 years	YC72 Point 15	YC73 Point 15
	16	112,569	3 years	YC72 Point 16	YC73 Point 16
	17	112,569	2 years	YC72 Point 17	YC73 Point 17
	18	112,569	1 year	YC72 Point 18	YC73 Point 18
8	19	119,133	-	YC72 Point 19	YC73 Point 19

Applicable ESR pay codes for this group of staff also include YC, YM, YK, and YL.



- The successful candidate will be required to complete a health statement and the trust may require a medical examination as a condition of employment.
- The appointment is subject to satisfactory disclosures from the Criminal Records Bureau and because of the nature of the work of this post, it is exempt from the provision of Section 4 (2) of the Rehabilitation of Offenders Act 1974 (Exception Order 1975). Applicants are therefore not entitled to withhold information about convictions including those for which other purposes are spent under the provisions of the Act. In the event of employment, any failure to disclose such convictions could result in dismissal or disciplinary action by the Trust. Any such information should be sent in confidence to the Medical Director and will only be considered in relation to an application for positions to which the order applies.
- The post-holder will be required to live less than 15 miles by road from their base hospital, unless the Trust determines that residence at greater distance is acceptable. The distance of 15 miles usually equates with a travelling time to the hospital of approximately 30 minutes.
- Assistance may also be given to newly-appointed consultants towards the cost of the removal expenses, provided that the consultant moves from a position within the National Health Service, also that removal is necessary to comply with the Trust's requirements concerning the place of residence and a written request is sent to Medical Personnel before or immediately after appointment.

Private Professional Services and NHS Programmed Activities

Subject to the provision in Schedule 9 of the Terms and conditions, you may not carry out Private Professional Services during your Programmed Activities.

The post holder might be required to work across the Trust at any time throughout the duration of his/her contract, which may entail travel and working at different hospital.

Performance management and appraisal

All staff are expected to participate in individual performance management process and reviews.

Personal development and training

Barts Health NHS Trust actively encourages development within the workforce and employees are required to comply with trust mandatory training.

Barts Health's education academy aims to support high quality training to NHS staff through various services. The trust is committed to offering learning and development opportunities for all full-time and part-time employees.



No matter where you start within the NHS, you will have access to extra training and be given every chance to progress within the organisation. You will receive an annual personal review and development plan to support your career progression and you will be encouraged to develop your skills and experience.

Wellbeing

The department of anaesthesia takes a pro-active approach to staff well being. Current initiatives include a regular multi track day once a week in the mornings which allows for all staff to join activities such as self care yoga, MDT sessions of reflective practice or experiential exchange/ peer support and self-compassion sessions with clinical psychologists. We also run a bimonthly morning coffee club which provides a safe space for peer support for our trainees and consultants. The department has a wellbeing lead who is a great source of support and information. Barts Health offers an employee well being service with multiple sources of support.

Health and safety at work

The post holder has a duty of care and personal obligation to act to reduce healthcare-associated infections (HCAIs). They must attend mandatory training in infection prevention and control (IP&C) and be compliant with all measures required by the trust to reduce HCAIs. All post holders must comply with trust infection screening and immunisation policies as well as be familiar with the trust's IP&C policies, including those that apply to their duties, such as hand decontamination, personal protective equipment, aseptic techniques and safe disposal of sharps.

All staff must challenge noncompliance with infection, prevention and control policies immediately and feedback through the appropriate line managers if required.

Confidentiality and data protection

All employees are expected to comply with all trust policies and procedures related to confidentiality and data protection and to work in accordance of the Data Protection Act 1998. For those posts where there is management or supervision of other staff it is the responsibility of that employee to ensure that their staffs receive appropriate training (e.g. HISS induction, organising refresher sessions for staff when necessary).

Conflict of interest

The trust is responsible for ensuring that the service provided for patients in its care meets the highest standard. Equally it is responsible for ensuring that staff does not abuse their official position for personal gain or to benefit their family or friends. The trust's standing orders require any officer to declare any interest, direct or indirect with contracts involving the trust. Staff is not allowed to further their private interests in the course of their NHS duties.

Equality and diversity

The trust values equality and diversity in employment and in the services we provide. It is committed to promoting equality and diversity in employment and will keep under review our policies and procedures to ensure that the job related needs of all staff working in the Trust are recognised. The Trust will aim to



ensure that all job applicants, employees or clients are treated fairly and valued equally regardless of sex, marital status, domestic circumstances, age, race, colour, disablement, ethnic or national origin, social background or employment status, sexual orientation, religion, beliefs, HIV status, gender reassignment, political affiliation or trade union membership. Selection for training and development and promotion will be on the basis of the individual's ability to meet the requirements for the job. You are responsible for ensuring that the trust's policies, procedures and obligation in respect of promoting equality and diversity are adhered to in relation to both staff and services.

Budgetary management

If you have responsibility for a budget you are expected to operate within this and under the trust's standing financial instructions (available in the intranet's policies section) at all times.

Barts Health values based leadership

Our leaders ensure a focus on health where patients are at the centre of all we do. They work to create a culture where innovation is promoted and encouraged. They lead by example and demonstrate value based decision making as being integral to the ways of working within the Trust.

Barts Health leaders are role models who demonstrate those attitudes and behaviours which will make us unique. Our leaders are passionate about delivering high quality patient care, take pride in the work that they do to and are committed to the delivering the Barts Health NHS Trust 10 pledges of:

1. Patients will be at the heart of all we do.
2. We will provide consistently high quality health care.
3. We will continuously improve patient safety standards.
4. We will sustain and develop excellence in research, development and innovation.
5. We will sustain and develop excellence in education and training.
6. We will promote human rights and equalities.
7. We will work with health partners to improve health and reduce health inequalities.
8. We will work with social care partners to provide care for those who are most vulnerable.
9. We will make the best use of public resources.
10. We will provide and support the leadership to achieve these pledges.

Our leaders are visible leaders who believe in spending time listening and talking our staff, patients and partners about the things that are important to them and the changes they would like to make to continuously improve patient care.

Barts Health leaders work with their teams to develop organisational values, embed them in our ways of working and create the cultural changes required to ensure that we consistently provide an excellent patient experience, regardless of the point of delivery, in an environment where people want to work, regardless of where they work or what they do.

This job description is not intended to be exhaustive and it is likely that duties may be altered from time to time in the light of changing circumstances and after consultation with the post holder



A final shortlist is expected to be completed within approximately three weeks after the closing date. Shortlisted candidates should visit the hospital before being interviewed.
For further information, please contact Dr Carmel Cassar, Lead Paediatric Anaesthetist, 020 359 41328 carmel.cassar@nhs.net



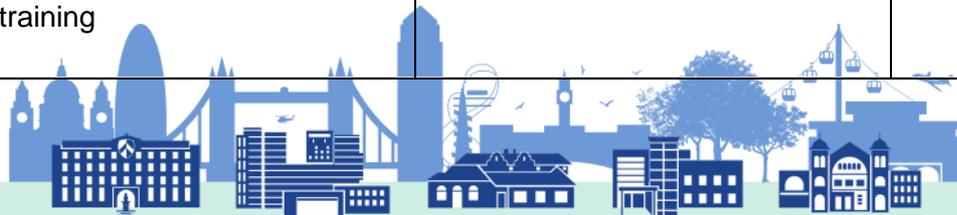


Barts Health
NHS Trust

BARTS HEALTH NHS TRUST, CONSULTANT ANAESTHETIST PERSON SPECIFICATION



FACTORS	ESSENTIAL	DESIRABLE	HOW IDENTIFIED
Qualifications/ Clinical Skills	<ul style="list-style-type: none"> • GMC Registration • MBBS or equivalent • CCT in anaesthesia or equivalent or, if in training within 6 months of CCT • FRCA or equivalent • Higher training in Paediatric Anaesthesia 	<ul style="list-style-type: none"> • Experience of UK healthcare system • Higher degree • ALS/APLS 	CV Application form
Special Knowledge/ Abilities and/or Experience	<ul style="list-style-type: none"> • Extensive experience in aspects of general and paediatric anaesthesia • At least 1 year advanced specialist training in paediatric anaesthesia including neonatal anaesthesia and trauma in children • Experience in the peri-operative care of medically complex patients including pain management • Audit experience 	<ul style="list-style-type: none"> • Experience in anaesthesia specialties in the job plan • Clinical management training • Training for at least 3 months in Paediatric Intensive care • Demonstrated experience in anaesthesia service development 	CV Interview References
Personal Skills/ Qualities	<ul style="list-style-type: none"> • Ability to communicate clearly and intelligently in written and spoken English • Ability to lead a multidisciplinary team, make decisions and exert appropriate authority. • Ability to build strong and effective relationships with patients, relatives and colleagues • Ability to gain confidence and trust • Ability to cope with pressure and adapt to change • Enthusiasm and approachability 	<ul style="list-style-type: none"> • Leadership skills appropriate to leading a multidisciplinary team • Directing and teaching medical, nursing and other professions allied to anaesthesia and Intensive Care 	CV Interview References
Teaching & Training	<ul style="list-style-type: none"> • Involvement in teaching undergraduates ,trainee medical staff, nurses and allied health professionals • Keen desire to improve patient care by involvement in a wide range of teaching activities, including simulation training • Familiarity with Stage 1, 2 and 3 FRCA and advanced Paediatric Anaesthesia SIA training 	<ul style="list-style-type: none"> • ATLS, ALS, APLS or PALS instructor status. • Certificate of education. • Evidence of training in teaching skills. • Experience in paediatric simulation • Experience in evidence based medicine teaching. 	CV Interview References



Research	<ul style="list-style-type: none"> • Understands research methodology • Actively encourages research with junior and other staff 	<ul style="list-style-type: none"> • Published or submitted research to indexed journals • Experience of research presentations to learned societies on topics related to anaesthesia 	CV Interview References
Additional Requirements	<ul style="list-style-type: none"> • Commitment to continuing personal development and medical education 	<ul style="list-style-type: none"> • Experience in teaching and clinical audit • Computer skills 	CV Interview References

