

### JOB DESCRIPTION

Job Title:	ICU Consultant – 10 Pas
Band/Pay:	Consultant Salary Scale
Department:	Critical Care Medicine

# **Newton Abbot and Coastal Integrated Service Units**

Associate
Director of
Nursing and
Professional
Practice

Associate
Medical Director
Operations

**ICU Clinical Service Lead** 

**ICU Consultant (This vacancy)** 

#### Job overview

To join a team of enthusiastic and dedicated clinicians to deliver a high quality Consultant led service in Intensive Care Medicine 24 hours a day.

### Main duties of the job

To provide high quality consultant delivered care to critically ill patients and those at risk of becoming critically ill. This includes clinical leadership and supervision of junior medical staff, ensuring the highest standards of clinical care are provided to all patients attending the hospital requiring critical care input.

### Weekly timetable/Job plan

This post is for an equal clinical work load with all the existing ICU consultants in delivering the core ICU clinical service.

All on-call and day time ICU DCC (direct clinical care) is dedicated purely to ICU. The current rota is 1:11 for weekday night (1800 – 0800) and weekend on-call ICU duties (maximum 24 hour continuous on-call), an 11 week rolling rota for ICU week-day sessions (0800-1800) and outreach sessions (currently 1300-1800, usually preceding a week night on-call). Additional PAs are potentially available in clinical specialities of Anaesthetics, Acute Internal Medicine, Emergency Medicine, Respiratory Medicine and Renal Medicine following discussion and agreement with the relevant clinical teams and leaders and suitability of the candidate for the post.

### Total Programmed Activities: up to 10 PAs

Will include at least 5.17 PAs of ICU direct clinical care, with potential for additional clinical sessions in allied specialities subject to discussion during the appointment process.

Supporting Professional Activities (SPAs): 2.5 PAs per week.

On-Call frequency is currently 1:11.

During the weekend day time on-calls are based on being present in the hospital from 0800 – 1800 at least.

PA calculations and shift timings:-

Monday to Friday (see template rota for expected rota pattern) day sessions 0800 – 1800 = 2.5PA

Monday to Friday outreach sessions 1300 – 1800 = 1.25 PA

Monday to Sunday night on-call 1800 - 0800 = 1.9PA per on-call based on diary analysis and described as unpredictable on-call. On-call category A Intensity supplement 3%.

Weekend on-call 0800 - 0800, comprising 0800-1800 predicable on-call (expected to be present in the hospital) = 8 hours x 1.5 + 2 hours x 2) = 4 PAs

### About your new team and department

#### Intensive Care Unit

We run a newly built state-of-the-art ICU which opened in February 2017. This contains 14 beds fully equipped to take Level 3 patients of which 10 are funded (6 level 3 and 4 level 2 at present). It functions as a combined adult general ICU and HDU with the beds being used for a mixture of Level 3 and Level 2 patients depending on demand.

In addition to the above we have 2 "level 1.5" beds in an orthopaedic high care area where we can run vasopressors and monitor invasive blood pressure primarily for high-risk patients undergoing elective orthopaedic procedures.

Across ICU and the orthopaedic high care area we have approximately 800 admissions per vear.

There are approximately 40 paediatric admissions each year most of which are transferred to the Bristol Children's Hospital.

The multidisciplinary team functions very effectively with daily MDT ward rounds (Occupational Therapy/Physiotherapy/Dietician/Pharmacist and Psychologist), daily microbiology rounds and daily Radiology meetings. We are a national exemplar for rehabilitation of patients following critical illness.

There are 11 intensive care consultants with a broad range of interests encompassing echocardiography, organ donation, resuscitation and treatment escalation, pharmacology, research, statistical analysis, human factors, clinical information systems, quality improvement, teaching and journal clubs, patient safety, rehabilitation and follow-up and intensive care outreach.

#### Research in ICU

The Trust offers SPA time to be a PI for NIHR approved studies. Current ongoing studies are:REMAP-CAP, MOSIACC, MARCH, Post ABC, GenomiCC, we have expressed interest in Septic and ABBRUPT.

### Ward Based Intensive Care

We currently run a very successful 24/7 Intensive Care Outreach team. We are currently working towards increasing our Consultant input to further support patients on the ward who may benefit from more intensive support in a ward environment.

#### Intensive Care Follow Up

A multidisciplinary follow up clinic takes place once a month for patients who have been in the unit for more than 4 days. An intensive care nurse and clinical psychologist jointly run this clinic.

#### Pre-assessment and enhanced recovery

There is a nurse led pre-assessment clinic for elective patients. High risk patients are seen by consultant anaesthetists in dedicated clinics and appropriate patients undergo cardiopulmonary exercise testing. This forms the back bone of planning postoperative care including high dependency and critical care for the high risk surgical patient.

The Trust is committed to the concept of 'enhanced recovery as standard' for all elective surgical patients.

### Day Surgery Unit

We are proud to have a nationally recognised Day Surgery Unit, there are 3 theatres in a stand alone unit with 2 more being added in 2023. Our success comes from high quality staffing, well developed patient pathways and comprehensive data systems which enable ongoing quality improvement and assurance.

### Obstetric Anaesthesia

The Obstetric service achieved CNST level 3 in 2012. There are between 2500 and 3000 deliveries per annum. We provide senior anaesthetic care for labour ward every weekday morning and separately for elective caesarean section lists. We have a dedicated obstetric theatre situated within the labour ward complex.

Date last updated:

### Inpatient theatres

There are 10 inpatient operating theatres including a purpose built interventional radiology suite. The Trust provides a 24/7 interventional radiology service.

### Trauma and Orthopaedic service

The anaesthetic department actively supports the Trauma and Orthopaedic service through participation in the accelerated Neck of Femur fracture pathway and through daily all day trauma lists throughout the year, including weekends and bank holidays. We support the elective orthopaedic service by provisional of a regional anaesthetic service for upper and lower limb surgery and when undertaking complex major joint surgery including revision surgery.

Torbay is a major trauma receiving unit, and we support this through providing senior support to the trauma team and transfer service to the regional trauma centre in Plymouth.

### Pain Medicine

The Chronic Pain Team consists of 4 consultants and one GPWSI and is part of the Anaesthetic Department. Pain consultants work within a multidisciplinary team to deliver general outpatient chronic pain clinics, interventional pain lists and support to the inpatient pain service.

Inpatient pain services are primarily consultant and nurse delivered. There are 3 inpatient pain nurses providing a weekday service. There is close liaison between the inpatient and outpatient teams. Weekend support is provided by the general anaesthetic emergency team. Pain consultants work approximately 50% of their time in pain medicine and 50% in anaesthetics.

#### **ICU STAFF**

#### **Consultants**

Dr Adam Revill Intensive Care Consultant / Clinical service lead, Research lead Intensive Care Consultant / High risk Pre-operative assessment Dr John Carlisle Intensive Care Consultant / FFICM Tutor, Transfer Lead Dr Adam Carpenter Dr Tod Guest Intensive Care Consultant / ICU Clinical Governance Lead Dr Nikki Freeman

Intensive Care Consultant / Organ Donation Lead, follow-up, maternity

liaison

Dr Jonathan Ingham Intensive Care Consultant

Intensive Care Consultant / Infection control lead Dr Ben Ivory Dr Richard Eve Intensive Care Consultant / Outreach Lead

Dr Kate Smurthwaite Intensive Care Consultant / Paediatric and Medical Student Lead

Dr Ed Scarth Intensive Care Consultant /

Intensive Care Consultant / IT System Lead Dr Ben Whittaker

Dr Rachel Saunders Intensive Care Consultant / Retrieve Transfer Consultant

In ICU, there are 2 FY1 trainees and 1 FY2, six core trainee level (including rotating IMTs and anaesthetic STs), and 1 stage 3 ICM trainee in intensive care medicine.

### Senior nursing team

Peggy Christie Matron for ICU, Outreach and Pain Services

Sharon Evans Unit manager

Dawn Straw **Practice Education Lead** 

Michaela O'Sullivan Outreach Hazel Robinson Outreach

Date last updated: Page **4** of **8** 

AfC job evaluation ref:

# Senior Multi-disciplinary team comprising

- o Rehab lead and senior Occupational Therapist
- Unit Pharmacist
- o ICU lead Physiotherapist
- o ICU lead dietician
- Psychotherapist
- o ICU Practice Manager
- Operational Manager

### **Anaesthetic leads**

Dr Andrew McEwen Chairman/ General Anaesthetist

Dr Lyn Margetts Clinical Service Lead Anaesthesia/ Pain Medicine

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## Detailed job description and responsibilities

- Communication and working relationships
  - Patients
  - Clinical Colleagues
  - Junior Medical staff
  - Trust and NHS Management and Leadership
  - Other medical and service departments within the Trust
  - Liaison with other Trusts/Providers where necessary
  - SW Retrieve service
  - o Bristol Children's Hospital PICU and WATCh
  - South West Critical Care Network
- Planning and organisation
  - To be able to plan patient care effectively
  - Prioritise workload efficiently and safely
- Analytical and judgement
  - To use best evidence based analytical judgement in providing care to patients
- Responsibility and accountability
  - To provide high quality consultant delivered care to patients including clinical leadership and supervision of junior medical staff, ensuring the highest standards of clinical care are provided to all patients attending the hospital
  - To provide teaching and training at undergraduate and postgraduate level and supervision and training for the junior doctors. To be proactive in the department's clinical governance agenda and take on leadership roles to support continuous learning and improvement, thereby abiding by the clinical and corporate governance policies of the Trust
- Responsibility for patients and client care
  - To be proactive in ensuring all patients receive rapid assessment treatment and clinical decision making, whilst ensuring our standard to deliver safe quality and performance are delivered and sutained
- Policy and service responsibility
  - To adhere to policies and guidelines of the Trust
  - To participate in relevant audit and quality assurance processes
- Responsibility for finance, equipment and other resources
  - Liaise with the Associate Medical Director, associate Director of Operations and Operational Manager on budgetary issues
- Responsibility for supervision, leadership and management
  - Recruitment, appointment, teaching and educational supervision of junior medical staff including educational contracts, organisation of study leave, annual leave and rotas
- Information technology and administrative duties
  - To complete relevant medical records as per policies and procedures Use IT systems i.e. Picis, Galaxy, CLW, VitalPAC etc
- Responsibility for research and development
  - o To take part in research and development within the department



# **PERSON SPECIFICATION**

Attributes	Essential	Desirable
Qualifications and	Full GMC Registration (with licence to practice).	Distinctions, scholarships, prizes.
training		Other degrees, e.g. BSc, MSc, MD.
	CCT/EU equivalent Specialist Registration in Intensive Care	Additional training in general medicine.
	Medicine before commencing posdt	Additional training in specialist critical care (e.g. Cardiac, Neuro, Liver, Burns, Paediatric etc.)
	FRCA, MRCP FCEM or equivalent	ATLS / APLS / ALS.
	Up to date Good Clinical Practice (GCP) researcher certificate	
	Minimum of English Level 2 (GCSE grade C or equivalent),	
	IELTS or graduate of a UK Medical School.	
Clinical Experience	Ability to offer expert clinical opinion on a broad range of	Other relevant clinical experience for working in a DGH Adult
	critical care problems.	
	Ability to take full and independent responsibility for clinical	Critical Care unit, such as echocardiography, point of care
	care of patients of patients.	ultrasound, bronchoscopy.
	Ability to prioritise clinical need.	Clinical experience outside the South West NHS region or UK.
	Ability to supervise multi-disciplinary teams.	·
Other Experience/Skills	Recent and demonstrable experience in use of clinical	Evidence of innovative development and implementation of
	information systems and understanding of information	guidance.
	governance and information communications technology.	Evidence of involving patients in practice and quality
		improvement.
	Ability to demonstrate familiarity with and understanding of	
	NHS structures, management and current issues, including	Ability to supervise postgraduate clinical research.
	awareness of national strategic plans and constraints.	Evidence of relevant research, mublications or presentations
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	Clear willingness and ability to effectively lead clinical teams	Formal management experience and training
	and contribute to the development of an effective specialist	
	clinical service through research, audit, quality improvement	Clinical leadership training
	and adherence to clinical governance principles.	٠
	3 1 1	Educational qualification
	Experience of Audit and Management.	
	Exponence of Addit and Management.	Life-support instructor
	Proven ability to teach clinical skills within multi-disciplinary	End dapport motidator
	teams applying evidence based knowledge.	Simulation training experience
	teams applying evidence based knowledge.	Simulation training experience
	Williampece and chility to contribute to departmental and Trust	
	Willingness and ability to contribute to departmental and Trust	
	teaching programmes.	
Requirements due to	Able to work effectively within a multi-professional and	
work	disciplinary team structure	Evidence of patient and colleague feedback
environment/conditions	To be able to communicate affectively with national relatives	
	To be able to communicate effectively with patients, relatives and staff. This includes verbally, via information technology	Enquiring critical approach to work
	and documentation, and demonstrating excellent inter-	
	personal relationship skills.	
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Physical skills	Able to fulfil the role as presented and work an equal share of out of hours work within the team
Physical effort	Ability to undertake an on call rota and the day to day service delivery of critical care
Emotional effort	Ability to undertake an on call rota and the day to day service delivery of critical care
Mental effort	To be able to concentrate for prolonged periods of time.