







RECRUITING,
DEVELOPING AND
RETAINING OUR
WORKFORCE



AN ANCHOR IN OUR COMMUINITIES



WORKING TOGETHER
WITH LOCAL HEALTH
AND SOCIAL
CARE PROVIDERS



LONG-TERM

SUSTAINABILITY



Information pack for the post of

CONSULTANT IN EMERGENCY MEDICINE

Division of Urgent and Emergency Care

January 2024











Welcome from Chief Executive Hannah Coffey

Hello and welcome

to our Trust! I am delighted that you are considering our organisation as a place to work.

This is a really exciting time for our patients and staff as we work with our local health system partners across Cambridgeshire, Peterborough, and South Lincolnshire to deliver some key development projects that will shape the care we provide for future generations within the 900,000-strong catchment we serve. As well as building a new hospital at Hinchingbrooke and redeveloping our sites at Peterborough and Stamford to better meet the needs of patients, we are investing in a Trust-wide electronic patient record system and harnessing digital technology within our diagnostic services to enhance the quality and speed of diagnosis and treatment.

It's a great time to be joining TeamNWAngliaFT where we truly value the health and wellbeing of our staff and encourage our leadership team to empower their teams to be the best they can be, to help them develop in their careers and, at the same time, ensure our patients can experience good quality care by people who are dedicated to serving their health needs.

If you are looking to develop your career in an environment that's primed for organisational change, where you can actively contribute to the quality improvements we are making for our patients and staff, then look no further for your next role.

Hannah Coffey

Chief Executive Officer





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Section 1 - Job Description

Job Title	Consultant in Emergency Medicine
Grade	Consultant
Location	Peterborough City Hospital
Hours of Work	40 hours per week (10 PA) - flexible
Reports to	Clinical Lead for Emergency Medicine
Accountable to	Chief Medical Officer
Responsible for	Junior and Middle Grade Doctors, Advanced Clinical Practitioners
Liaises with	Consultants in Emergency Medicine & other specialties

North West Anglia NHS Foundation Trust

North West Anglia NHS Foundation Trust was formed in April 2017. We run three acute sites Peterborough City, Hinchingbrooke and Stamford and Rutland Hospitals. In addition, we deliver outpatient and radiology services at Doddington Hospital, the Princess of Wales Hospital, Ely, and North Cambridgeshire Hospital, Wisbech.

We deliver acute care services to a growing catchment of approximately 850,000 residents living in Cambridgeshire, Lincolnshire and the neighbouring counties of Norfolk and Bedfordshire.

Background

This document contains information about the above post. It also forms the job description and a potential job plan for this post. As required by Health Circular HC (90)16, after taking up the appointment, the successful candidate will complete and agree a job plan with the Clinical Lead / Divisional Director and the Divisional Operations Manager. This will then be ratified by the Medical Director and reviewed thereafter on a yearly basis.

Job Summary

This is an exciting opportunity for a forward-thinking consultant to play a major role in leading the development of a novel system of integrated emergency care.





Duties include:

- Providing clinical assessment, appropriate treatment (including resuscitation) and supervision of all types of patients attending the Emergency Department until onward referral or discharge.
- Provide clinical leadership and supervision for junior medical and nursing staff within the department.

This post requires someone who is dynamic, enjoys variety and challenge and is interested in service development.

The post

This is a whole-time Emergency Medicine Consultant post based at Peterborough City Hospital.

The post holder is managerially accountable to the Division of Urgent and Emergency Care and is clinically accountable to the Medical Director.

Applicants will be expected to be a Fellow of the Royal College of Emergency Medicine, or have equivalent experience and training, and must be fully registered with the General Medical Council. The appointee must be on the GMC's Specialist Register or be within 6 months of completion of CCT prior to taking up appointment. Development of a special interest will be strongly encouraged and accommodated where at all possible.

Main Duties and Responsibilities

Strategy and Organisation

The Consultants are required to provide clinical leadership and be available for opinion and advice on any patient within the Urgent and Emergency Care Centre.

The appointee should be a team player with the ability to cope under pressure.

The appointee will be required to supervise junior Urgent and Emergency Care Centre medical staff and to provide guidance to nursing staff of all grades.

The appointee will liaise with colleagues to ensure a consistent flow of information and updates across the speciality.

Right Care, First Time, Every Time

We are committed to high quality care delivered in a cost effective and efficient manner. Our Quality Strategy describes the Quality Governance Framework which describes our work for strategy, risk, capability, culture, structures, processes and measurement.

The appointee will promote a positive image of the Trust with appropriate professional groups and organisations as well as the local health economy.





The appointee will promote a positive and supportive atmosphere which encourages staff to innovate and to go beyond the call of duty in order to achieve key objectives. At the same time, the appointee will ensure staff recognition for exceptional service.

The appointee will help develop and promote departmental clinical guidelines in line with evidence-based best practice.

It is expected that the post holder, in conjunction with consultant colleagues, will be responsible for the organisation and provision of a comprehensive 24-hour Emergency Department service.

Clinical Duties

The post holder will be required to maintain high clinical standards in the assessment and treatment of patients and in the overall development of the Urgent and Emergency Care Centre services.

Day to day management of a busy ED:

- Reception, resuscitation, diagnosis, and initial treatment of patients.
- Regular teaching of medical staff, nurses, ENPs, ACPs and medical students attached to the department, as well as occasional teaching of other staff.
- Participation and organisation of medical and clinical audit.
- Clinical care of patients admitted to the Clinical Observation and Decision Unit.
- Development of a specialist interest will be encouraged within the remit of the department.

Administrative Duties

- Managerial duties as agreed with the Lead Clinician and Divisional Operational Manager.
- Preparation of reports, plans, cases of need etc, to bid for future requirements of the department.
- Co-operation with existing emergency staff and other medical services and administrative departments within the hospital and in other hospitals within and outside the local healthcare system.
- Close communication with local General Practitioners about individual cases, the appropriate use of the department and any urgent problems. Liaison with outside agencies such as Police, Fire, Ambulance, District Nursing, Social Services etc, with regard to training, patient care and Major Incident Procedures.
- Contribution to activities and development of the Clinical Management Team.
- Provision of cover for consultant colleagues' periods of leave.
- Professional supervision, appraisal, and management of junior medical staff, as appropriate.





- Responsibilities for carrying out teaching duties as required and for contributing to postgraduate training and continuing medical education activities.
- Research activities consistent with the priorities of the trust, subject to the availability of funding and resources.
- Participation in the rolling process of clinical governance
- To undergo annual appraisal, as well as GMC revalidation.
- Such additional duties as may be required from time to time, either by the Divisional Director or Medical Director after appropriate consultation.

Workload

The department has seen a large rise in recent new attendances from 65,000 in 2009 to around 115000 new attendances in 2020 – 21.

Office Accommodation and Secretarial Support

There are shared offices for the Consultant body with secretarial support as needed.

Teaching and Professional Development

The Learning and Development is situated in the fourth floor and provides multiple rooms for educational and meeting purposes, as well as a large main lecture theatre which has a capacity for 145 delegates. The library is based in the same Centre with good in hours and out of hour's access. Our learning Centre provides multiple educational events and hosts life support courses such as ATLS, ALS, GIC, NLS, APLS, HMIMMS, PILS and ILS. We will also be starting APLS from May 2018. We have also previously hosted the Royal College of Emergency Medicine, MRCEM part C (OSCE) exam, following which the venue received huge accolades from our fellows, as well as from the Trust.

As a department, we organize multiple educational events including courses as mentioned below:

- Twice yearly ATLS and APLS
- CBRN training
- MRCEM and Clinical Skills course in India twice yearly
- FRCEM Primary Revision course for all EM trainees and non-trainees in the region
- FRCEM SAQ course for trainees and non-trainees in the region
- FRCEM Critical Appraisal course for trainees and non-trainees in the region
- Yearly MSK and Paediatric training days for CT3 trainees in Emergency Medicine.
- Three regional ACCS training days at Peterborough
- Annual regional Higher Specialty training day
- Specialty Doctor and DRE-EM regional training day





- Three days of induction for new trainees. This takes place every change over period in August, December, February, and April.
- Medical student teaching we have two teaching clinical fellow posts (50:50 EM: teaching)
- Simulation training for junior doctors in ED
- Human factors training

Job plan

Suggested Weekly Timetable

The exact details of the successful applicant's job plan will be agreed with the Lead Clinician and Divisional Director. The plan below is based on a minimum 10 PAs per week (7.5-8.5 DCC plus 1.5 SPA, extendable up to 2.5 with additional commitments), although it is likely that more DCC PA's will be available subject to agreement between the Trust and the consultant appointed to this post.

A sample work plan is as below, and the allocation of DCC, SPA and timings are subject to change upon the recruitment of 14 WTE consultants. There is the flexibility of self-rostering, with specific rota rules that clinicians need to adhere to, especially regarding Bank Holidays, Fridays, and teaching sessions.

There is set number of Early shifts to be completed (either 0800 - 16:30 or 0800 - 1600) and likewise set number of late shifts (either 1500 - 2300 or 1600 -midnight plus on call). The weekends are planned as early 0800 - 1630, mid-shifts 1100 - 1900 and late shifts 1600 -midnight plus on call.

General Conditions of Employment

The appointee will enjoy terms based on the nationally agreed Terms and Conditions of Service for Consultants (England) 2003.

The successful candidate will be required to live within 20 miles of the Trust or 30 minutes travelling time when on-call.

The appointee will be expected to cover for colleagues' absence from duty on the basis of mutually agreed arrangements with the Department and with the Employing Trust. This is arranged by mutual agreement of consultant colleagues and approval of the Clinical Lead, in accordance with standard Trust and NHS regulations. It is essential that six weeks' notice is given to allow for proper planning and prevent cancellations of patients' appointments/surgery. This includes all forms of leave. Leave is granted in line with Trust Policy and Specialty protocol.





The Trust requires the successful candidate to have and maintain full registration with the General Medical and to fulfil the duties and responsibilities of a doctor as set down by the General Medical Council.

All appointments are subject to satisfactory Occupational Health Clearance being obtained and a satisfactory Criminal Records Bureau check.

The appointment is exempt from the provisions of Section 4(2) of the Rehabilitation of Offenders Act 1974 by virtue of the Rehabilitation Act 1974 (Exemptions) Order 1975. Applicants are not entitled therefore to withhold information about convictions which for other purposes are "spent" under the provision of the Act, and in the event of employing 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 in relation to an application for positions to which the Order applies.

Subject to the provisions of the Terms and Conditions of Services, the appointee is expected to observe the Trust's agreed policies and procedures, drawn up in consultation with the profession on clinical matters, and to follow the standing orders and financial instructions of the Trust.

In particular, where the appointee manages employees of the Trust, he/she will be expected to follow the local and national employment and personnel policies and procedures. The appointee will be expected to make sure that there are adequate arrangements for hospital staff involved in the care of patients, to be able to contact them when necessary, and to observe the current local arrangements for advising details of leave.

Compensation and Benefits

Consultants are remunerated according to nationally agreed NHS pay scales and terms and conditions.

Newly appointed Consultants may be eligible for reimbursement of the whole or part of the cost of their removal expenses, including international expenses, provided that the removal is necessary to comply with North West Anglia NHS Foundation Trust's requirements concerning the place of residence and relocation policy





Person Specification

Job title: Consultant in Emergency Medicine

Division: Urgent and Emergency Care

Reports to: Clinical Lead for Emergency Medicine

Criteria		Essential or		Assessment Method		
		Desirable Criteria		ı	Т	R
Education and Qualifications						
Fully registered with GMC	Е		$\sqrt{}$			
 Certification of completion of specialist training or be within 6 months of gaining it by the interview date (or equivalent) 	E		V			V
 Fellowship of the Royal College of Emergency Medicine (FRCEM or equivalent) 	E		1			V
 Must be on the GMC's Specialist Register for Emergency Medicine 	E		V			1
 ATLS, APLS/EPALS and ALS provider 	Е		$\sqrt{}$			$\sqrt{}$
 Instructor in one or more life support courses (ALS/ATLS/APLS or equivalent) 		D				1
 Additional sub-speciality training qualifications in: PEM; Critical Care; PHEM 		D	1			V
Professional Experience and Clinical Skills		•				
Evidence of first-rate professional practice	Е		$\sqrt{}$			V
 Able to demonstrate clinical skills in management of full range of patient presentations as defined in the RCEM Curriculum 	E		V	1		
 Evidence of extended clinical skills in areas pertinent to acute and emergency care including but not exclusive to: Intensive Care medicine, Pre-hospital medicine, Point of care ultrasound, Advanced airway management 		D	V	V		
Clinical Governance	<u> </u>	_	•			
 Awareness of the requirements of clinical governance, with particular reference to the specialty. 	E		1	1		
 Formal experience in the development of patient safety systems as pertaining to Emergency Medicine. 		D	V	V		
Further training, e.g., Management, Audit						
Experience of clinical audit and education	E		V	\ \		
Evidence of delivering Quality Improvement Projects	Е		$\sqrt{}$	V		$\sqrt{}$
Formal training in QIP methodology		D	$\sqrt{}$	V		
Research/Teaching/Publications						
 Demonstrable teaching ability and experience 	Е		$\sqrt{}$			$\sqrt{}$





 Commitment to participate in research throughout the 	Е		N		
	L		٧	٧	
Emergency Medicine Service			,	,	
 Willingness to undertake teaching of clinical staff at both 	Е		V	$\sqrt{}$	
undergraduate and postgraduate level					
Evidence of participation in undergraduate and or	Е			\checkmark	
postgraduate teaching in formal settings					
 Completion of Education Training course/further qualifications 		D		$\sqrt{}$	V
 Published research and audit 		D			V
 Peer reviewed publications 		D	$\sqrt{}$	$\sqrt{}$	V
Personal requirements, Communication, Leadership skills, F	lexib	ility			
Evidence of management experience	Е				V
 Evidence of management experience Evidence of good team working with peers and other senior 	E E		√ √	√ √	\[\sqrt{1} \]
·			√ √	,	,
Evidence of good team working with peers and other senior			\[\sqrt{1} \]	,	,
 Evidence of good team working with peers and other senior colleagues 	E		\(\frac{1}{\sqrt{1}}\)	1	,
 Evidence of good team working with peers and other senior colleagues Flexible attitude and good communication skills 	E		\[1	,
 Evidence of good team working with peers and other senior colleagues Flexible attitude and good communication skills Ability to integrate into and share leadership of a 	E		\[1	,
 Evidence of good team working with peers and other senior colleagues Flexible attitude and good communication skills Ability to integrate into and share leadership of a multidisciplinary team 	E E	D	\[\sqrt{1} \]	\[\sqrt{1} \]	,
 Evidence of good team working with peers and other senior colleagues Flexible attitude and good communication skills Ability to integrate into and share leadership of a multidisciplinary team IT and computer literacy 	E E	D D	\[\sqrt{1} \]	\[\sqrt{1} \]	,
 Evidence of good team working with peers and other senior colleagues Flexible attitude and good communication skills Ability to integrate into and share leadership of a multidisciplinary team IT and computer literacy Ability to work under pressure and in difficult circumstances 	E E		\[\sqrt{1} \]	\[\sqrt{1} \]	,

Assessment Criteria: A = Application, I = Interview, T = Test, R = References



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Section 2 - The Department and Division

Divisional Structure

Following the formation of our new Trust in April 2017, our operational functions across the three hospitals merged to form five clinical divisions. They are:

- Division of Medicine
- Division of Urgent and Emergency Care
- Division of Surgery
- Division of Family and Integrated Support Services
- Division of Maternity, Gynaecology and Breast Services

The clinical divisions are key to our service delivery and the structure is based on 'family groups' of services that have greater clinical interdependencies, which ensures working relationships remain closely aligned. The Divisions are led by a triumvirate comprising a Divisional Clinical Director, Divisional Operations Director, and Divisional Nursing Director.

The Emergency Department

The Emergency Department is part of the Urgent and Emergency Care Centre and all emergency admissions or attendances to the trust present through the Urgent and Emergency Care Centre, other than those directed to our busy Ambulatory Care Unit.

Facilities include:

- Eight resus bays
- 26 bedded majors area plus five escalation cubicles
- Eight bays for rapid assessment and treatment
- Dedicated Paediatric Emergency area within the department managed by Paediatric nurses
- Dedicated area for Ambulatory majors patients (Fit to sit)
- Urgent Treatment Centre with Out of Hours GP services
- 24/7 CT and X-ray, with established guidelines for trauma and non-trauma patients requiring CT out-of-hours

Activities such as procedural sedation (adults and children) and ultrasound are actively encouraged.

We run an ACP training programme and have 5 qualified ACPs and 3 trainees supporting the medical rota.

Adjacent to ED in the Emergency Centre is the Medical Assessment Unit and Medical Short Stay unit with an in-reach frailty service. We have a clinical observation and decision unit





(CODU) for ED patients who may need observation for head injuries, minor overdoses, or psychiatric review.

A nurse led consultant supported APLS (Acute Psychiatry Liaison Service) team is available within the ED 24/7.

We are constantly developing our services and would like you to join our team of consultants who provide clinical cover for 16 hours a day, seven days a week, and who are encouraged to pursue other interests to improve patient care in Emergency Medicine.

Future plans include expansion of consultant numbers and further developing our Paediatric service, including PEM subspecialty training. Candidates with special interests such as Paediatrics, Ultrasound, teaching, Critical Care, Pre-hospital medicine will be very welcome.

We have a dedicated Thursday teaching rota for junior medical and ACP staff with monthly Sim sessions, morbidity & mortality, and clinical governance.

There are strong links between the department and Mid-Anglian General Practitioners Accident Scheme (MAGPAS) Helimedix and East Anglia Air Ambulance (EAA) with several Consultants and registrars working clinical shifts with them.

Medical Staffing

Consultant Staff

- Dr Athar Yasin UTC Lead
- Dr Charlotte Cope
- Dr Christopher Edmunds (EM/ICM/PHEM)
- Dr William Halford ACP Lead
- Dr Alastair Jones
- Dr Ranjith Kandavelu
- Dr Avinash Krishnappa
- Dr Charleen Liu
- Dr Katherine Mortimore (EM/ICM) Clinical Lead
- Dr Prasad Siddalingeswara Trust Trauma Lead, College Tutor (ACCS)
- Dr Dan Walter (EM/ICM)
- Dr Davina Wilbraham College Tutor (HST)
- Dr Vijayasankar Dhakshinamoorthy (PHEM) Divisional Director, HST lead
- Dr Kyle Mason
- Dr Errietta Panagiotopoulos
- Dr Omair Syed (PEM) currently on sabbatical

Junior Staff

Middle Grade (Registrar level) – 12 WTE funded post.





- Clinical Fellow 18 WTE (Aim to increase to 24 WTE)
- Junior Grade (FY2/CT1/GPVTS) 24 WTE
- Junior Grade (FY 1 level) Three non-training LAS post to cover the ED ward

Nursing Leads

- Lead Nurse Jonathan Mason
- Matron Stuart Toulson

Informal Enquiries

In the absence of special circumstances, e.g., travel difficulties, candidates are strongly advised to visit the department prior to completion of the shortlisting process, though such a visit does not form part of the process.

The candidates are invited to contact Dr Katherine Mortimore (Clinical Lead) via the Emergency Medicine secretaries' office 01733 673442.

Applicants are also welcome to contact:

Dr Callum Gardner

Chief Medical Director EA – A Stimson, 01733 677993

Dr Vijayasankar Dhakshinamoorthy

Divisional Director (Division of Urgent and Emergency Care) PA – Kirsty Westbury, 01733 671558

Shortlisted applicants only will be reimbursed travelling expenses as follows:

- Pre-interview visit
- Attendance for interview

For applicants from outside the UK, travelling expenses will be paid from port of entry only. Expenses will not be paid to shortlisted candidates who withdraw their application or refuse an offer of appointment on grounds which the Trust consider inadequate.





Section 3 - Working at the Trust

Teaching programme

There is a strong commitment to education from a departmental and organisational level, and the appointee will be expected to undertake teaching.

There is an active Medical Education Centre with seminar rooms and a lecture theatre, and an on-going programme for senior and junior medical staff organised by the Clinical Tutor and the Medical Education Department.

Continuing Professional Development (CPD)

There is dedicated support for CPD within the Trust, under the direction of the Medical Director, Clinical Tutor, and Specialty Tutors.

All non-training grade medical staff are required to undertake CPD to fulfil the requirements of revalidation.

Senior medical staff have an entitlement to study leave of 30 days in a three-year period and the current study leave budget allowance is £700 per annum per person.

Clinical Library

The Trust has clinical libraries. The Library Services Manager and assistants can support medical staff in conducting literature searches via MEDLINE and accessing books and journals.

Research and Development (R&D)

The Trust actively contributes to research in the NHS and has an extensive research portfolio covering 28 of the 30 National Institute for Health Research (NIHR) clinical specialties. The Trust is currently recruiting to over 160 NIHR Portfolio research studies and is set to recruit over 2,000 participants during 2017-18.

A key metric in assessing R&D performance is a Trust's Value for Money (VFM) score. At present NWAngliaFT has the best VFM score of any acute trust within CRN Eastern and is third in overall study recruitment.

Principal Investigators are supported by an R&D Department encompassing both clinical and non-clinical staff. With over 60 members of the team the department provides end-to-end research support throughout the study life cycle, from protocol development through to delivery and study closedown. The growth of R&D remains a key objective for the Trust as it actively promotes the growth of its sponsored research portfolio.





Clinical Quality Assurance

The appointee will take an active part in clinical audit and clinical governance.

The appointee will ensure that they are up to date with mandatory and statutory training requirements as required by the Trust and or external organisation.

There is a wide-ranging clinical audit programme across many specialties within the Trust supported by specialist staff.

The appointee will ensure data collection and processing undertaken is consistently accurate and timely and complies with the Trust Data Quality Policy and Information Governance procedures.

The Trust is developing several acute care pathways, and is working towards a system of integrated care, and the appointee will be expected to contribute to and support these.

Other

To comply with the roles and responsibilities as defined in the Trust's Health & Safety Policy.

To be responsible for safeguarding and promoting the welfare of children and adults by undertaking the appropriate level of training in accordance with the safeguarding policy training strategy and being aware of and working within the Trust's safeguarding policies.

Ensure all data collection and processing undertaken is consistently accurate and timely and complies with the Trust Data Quality Policy and local procedures.

Undertake any other similar duties in line with the key purpose of the job.

Act in accordance with Trust policies and GMC guidance regarding 'Confidentiality: good practice in handling patient information' so that patient confidentiality is maintained both in terms of patient's electronic and paper records, and when holding conversations about and with patients in appropriate environments.

Infection prevention is of paramount importance to the safety and wellbeing of all our patients. The Infection Prevention and Control Team use national and local guidance and policy to formulate Infection Prevention Policy and Procedure documents. It is the responsibility of all Trust employees to comply with the Infection Prevention and Control Policy and Procedure documents. Compliance with the relevant documents will be assessed during appraisal.

The person appointed will be indemnified by the Trust for all duties undertaken as part of his/her contracts of employment. He/she is encouraged to take out adequate defence cover as appropriate to cover him/her for any work which does not fall within the scope of the Trust's indemnity scheme.





As a member of staff, you will automatically be classed as a staff member of the North West Anglia NHS Foundation Trust - this means that you will be able to vote for a staff governor to represent you at the Trust's staff council and on the Trust's Council of Governors, or indeed stand to be a Staff Governor.

