



Royal United Hospitals Bath
NHS Foundation Trust

Job Description

For

Consultant in Gastroenterology

The RUH, where you matter

At the RUH we're proud to put people at the heart of what we do, striving to create an environment where everyone matters. Everyone means the people we care for, the people we work with and the people in our community.

We provide a [wide range of services](#) including medicine and surgery, services for women and children, accident and emergency services, and diagnostic and clinical support services.

We also provide specialist services for rheumatology, chronic pain and chronic fatigue syndrome/ME via the Royal National Hospital for Rheumatic Diseases.

We work closely with other health and care organisations as members of the Bath and North East Somerset, Swindon and Wiltshire Integrated Care Board. We strive to improve the health and wellbeing of the people in our community by working together build one of the healthiest places to live and work.

Management Structure

The Trust has a divisional structure. There are three clinical divisions, Medicine, Surgery and Family and Specialist Services, supported by two additional divisions, Corporate Services and Estates & Facilities. Each Clinical Division is led by a senior management team, consisting of a Divisional Director, Divisional Director of Operations and a Divisional Director of Nursing. Each also has a Clinical Governance Lead in the senior divisional team. Anaesthesia, ICM and pain services sit within the division of surgery.

The senior management team meets with other divisional colleagues to discuss both operational and strategic issues for the specialities within the division.

Operational management decisions are made by the Management Board which consists of the executive directors and representatives from the three divisions.

The hospital is managed by a Trust board, which consists of a chair, six non-executive directors and eight executive directors. The day-to-day management of the hospital is the responsibility of the chief executive assisted by the executive directors, and supported by the three clinical divisions.

Executive directors: Chief Executive; Chief Operating Officer; Director of Finance; Chief Nurse; Chief Medical Officer, Director of People & Culture, Strategy Director and Director of Estates & Facilities.

JOB OUTLINE

Appointment

This is a full time post for a Consultant Gastroenterologist at the Royal United Hospital, Bath. An exciting opportunity exists for an enthusiastic and ambitious individual to join a

dynamic team of Consultants. An interest either luminal gastroenterology, advanced endoscopy or hepatology would also be considered. The role includes a 1 in 24 commitment to the GIM on call rota. There is a separate Elderly Care on call.

The Department of Gastroenterology

Twelve consultant gastroenterologists currently lead this specialty. This department has a 24 bedded specialist ward, adjacent to the endoscopy suite (5 endoscopy rooms and dedicated recovery areas) and outpatient facilities. In 2019/20 the department saw approximately 8000 new GP outpatient referrals. There are close links with the surgical teams. A full range of diagnostic and therapeutic services are provided e.g. ERCP/spyglass, oesophageal stenting and capsule endoscopy. Access to EUS - is available at local hospitals. Six established nurse endoscopists and 3 endoscopy fellows also contribute to the busy endoscopic workload. Yearly, the department carries out approximately 11000 procedures. There are 1 full time and 2 part time nurse specialists who deal with liver disease. Other nurse specialists support nutrition, inflammatory bowel disease, and upper and lower GI cancer. We have recently started a "Virtual biological and Immunologics clinic" for our IBD service which will look after those IBD patients with difficult disease and on biological agents via a telephone clinic.

The gastroenterology team consists of:

Dr Peter Marden – Bowel cancer screening, small bowel endoscopy and IBD
Dr Ben Colleypriest – ERCP, endoscopy and IBD
Dr John Linehan – ERCP, Bowel Cancer Screening, endoscopy and IBD
Dr Julia Maltby – Hepatology
Dr Jonathan Quinlan – Bowel Cancer Screening, nutrition and IBD
Dr David Walker – IBD
Dr Tina Mehta – Luminal gastroenterology
Dr Adrian Griffiths – Luminal gastroenterology
Dr John Saunders – Bowel cancer screening, Nutrition and IBD
Dr Sakitha Paranehewa – Hepatology
Dr Terry Farrant – Hepatology
Dr Ben Arnold – ERCP and IBD
Dr Ovi Roy –Luminal gastroenterology

We have a dedicated viral hepatitis clinic currently run by our nurse specialists, a separate dedicated liver clinic run by Dr Julia Maltby, Dr Terence Farrant and Dr Sakitha Paranehewa and supported by the nurse specialists. A Fibroscanner has recently been purchased to support the dedicated liver clinics.

There are 2 Specialist Registrars, a CMT trainee, and a Foundation Year 2 post and 2 Foundation Year 1 posts to support the firm. We are approved by the Joint Advisory Group for Endoscopy. We have 5 Olympus endoscopy rooms equipped with "Scopeguide" for training colonoscopy. Since April 2009, we have been participating in the National Bowel Cancer Screening Programme

A seminar room in the department has 2 way links to 3 endoscopy theatres and we have run regional training days in colonoscopy and ERCP. We run a JAG accredited course for Basic skills in colonoscopy in association with the Gloucestershire centre once or twice a year.

We are keen that we strengthen our liaison with the undergraduate teaching programme that is run by the University of Bristol.

Whilst no formal mentorship programme currently exists for new consultants at the RUH there are a large number of consultants who have had mentorship training both in the department and in the RUH who would be available to support a newly appointed consultant.

Details of the Post

Clinical Duties: The post holder will take part in the full activities of the unit including care of inpatients (1 in 13 rota), outpatient clinics (approx. 3/week when not covering the ward) and endoscopy lists (approx. 2/week). The candidate will also be expected to provide cover for GI bleeds which would be 1 in 13 rota out of hours. At the weekend this comprises of emergency endoscopies, a ward round reviewing new patients admitted directly to the gastroenterology ward and in reach into MAU. This is the department's current commitment to "seven day working" and fulfils the Trusts requirement to provide increased cover for inpatients at the weekend. Any further changes to weekend working will be negotiated with the whole department by the Chair of the medical division. The department has recently been withdrawn from providing cover to the medical take to enable the department to continue to provide cover on the gastroenterology ward and for GI bleeds at weekends as described above.

Weekend working is included in the 10 PA job plan such that this time is compensated during the week.

The outpatient department sees 8000 New and 8500 follow up patients annually. Current scheduling allows 30 minutes per new and 15 per follow up with dedicated results clinic.

A role in teaching and training undergraduates (Bristol University) and junior staff is encouraged. Participation in multidisciplinary meetings is required. A research interest is welcomed.

The department wishes to increase general gastroenterology capacity, consolidate current services, and also develop new ones such as colon capsule, nasal gastroscopy and EUS.

The post holder will participate in audit and medical speciality meetings, and undertake administrative duties as required by the Lead Clinician for Gastroenterology. The appointment is full-time. (10 PA's, of which 8.5 are in direct clinical care and 1.5 supporting activities).

Key Duties:

- Sharing the overall clinical responsibility for the Gastroenterology ward (Haygarth) and any outlying patients.
- Outpatient clinic work

- Endoscopy, e.g. upper and lower GI endoscopy.
 - Supervision and co-ordination of junior doctors within the department.
 - Teaching and training of medical and nursing staff, both informal and formal
- **Non-Fixed Sessions:** The successful candidate is expected to be able to account for the rest of their non-fixed sessional time. These will be filled with teaching, clinical audit, administration, continuing medical education, research and professional development. He/she may be required to undertake some managerial duties associated with the running of the department. If any of these activities is more than the allotted 1.5 SPA then after agreement with the clinical lead this can be increased to 2.5 SPA.
 - Additional SPAs are allocated for managerial responsibilities, educational supervision, clinical governance and appraisal.

The post will be based at the RUH and the holder will participate in audit and directorate meetings and undertake administrative duties as required by the Lead Clinician of Gastroenterology.

A commitment to maintain professional expertise by attendance at meetings and courses is expected and encouraged by the trust e.g. allocation of study leave and professional leave and completion of diaries for CME is essential. It is also essential that you have an annual appraisal. This will enable the successful candidate to maintain their CPD requirements and will be supported by the trust in the process of revalidation.

An interest in research and teaching is expected with participation in projects, courses, etc to enhance the standing and role of the Department and Trust.

Attendance at, and organisation of, meetings is expected.

The post holder will be expected to cover for colleagues when absent or on leave.

Management Duties: The post holder will be expected to work with local managers and professional colleagues in the efficient running of services and will share with Consultant colleagues in the medical contribution to management.

The holder will be expected to take an active role in the development of resource management and to assist in the preparation of business plans. Consultants are required to undertake the administrative duties associated with the care of patients and the running of clinical areas where they work.

General Requirements: Subject to the provisions of the Terms and Conditions of Service, the post holder will be 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, financial instructions and code of expectations of the Trust

Gastroenterology Rota

The Gastroenterology consultants work in a flexible timetable to facilitate morning ward rounds and to maximise the utilisation of endoscopy theatres and clinics by covering for colleagues' absence. A specimen timetable for a week of ward duty is outlined below:

Work Programme

The work programme will be reviewed on a monthly basis and agreed with the post holder, Divisional Manager and Lead Clinician. Where possible a regular timetable will be established, however the nature of the post requires the post holder to be flexible in order to maximise capacity.

Local procedures will be followed in the event of any disagreement over proposed changes, culminating in an appeal to the Trust Board.

Proposed Job Plan

The job plan will be a prospective agreement that sets out consultants' duties, responsibilities and objectives for the coming year. It will cover all aspects of a consultant's professional practice including clinical work, teaching, research, education, clinical governance, private practice and any other responsibilities.

Programmed activities 10 PAs

Direct clinical care 8.5 PAs

Supporting professional activities 1.5 PAs

Timetable

The following provides scheduling details of the clinical activity and clinically related activity components of the job plan that occur at regular times during each week including supporting professional activities.

Day	Time	Location	Work	Categorisation	PAs
Monday	0830	RUH	Ward Round	DCC	1.00
	1230	RUH	Grand Round	SPA	0.25
	1400	RUH	Clinic	DCC	1.00
	0900	RUH	Clinic	DCC	1.00

Day	Time	Location	Work	Categorisation	PAs
Tuesday	1400		Off site		
Wednesday	0830	RUH	Admin	DCC	1.00
	1400	RUH	Clinic	DCC	0.5
	1600	RIH	Results / admin		0.5
Thursday	0830	RUH	MDM	DCC	0.25
	1000	RUH	Ward Round	DCC	0.5
	1230	RUH	X Ray Meeting	DCC	0.25
Friday	0830	RUH	ERCP	DCC	1.00
	1300	RUH	Departmental meeting	SPA	0.25
	1400	RUH	Teaching, Clinical Audit, Admin, CME, Research and Professional Development	SPA	1.00
Additional agreed activity to be worked flexibly					
Predictable emergency on-call work		RUH	Weekend gastroenterology speciality service	DCC	0.5
Predictable emergency on-call work		RUH	GIM on call	DCC	1
Total Hours				40	Total Hours
Total PAs				10	Total PAs
SUMMARY OF PROGRAMMED ACTIVITY				Number	
Supporting Professional Activities				1.5	1.5 SPA to be allocated according to the individual's priorities.
Direct Clinical Care (including unpredictable on-call)				8.5	

Day	Time	Location	Work	Categorisation	PAs
Other NHS Responsibilities				To be taken out of DCC and SPA	
External Duties				To be taken out of DCC and SPA	
TOTAL PROGRAMMED ACTIVITIES				Total 10	

ON-CALL AVAILABILITY SUPPLEMENT

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Agreed on-call rota **1 in 13**

Agreed category (A or B): **A**

On-call supplement (%): **3%**

Commencement of duties

The appointee would be expected to take up the post within 3 months of interview. If you consider it is unlikely that you will be able to take up the appointment within such a period, you are advised to highlight this at the time of your application.

Office and Secretarial Facilities

Secretarial support will be provided.

Accountability

The Chief Executive is managerially responsible for the services provided by the Trust and the Lead Clinician is responsible for the provision of the service. The post holder will be responsible for the discharge of their contractual duties through the Lead Clinician to the Chief Executive.

The Foundation Trust will take direct responsibility for costs and damages arising from medical negligence in the treatment of NHS patients, where they (as employers) are vicariously liable for the acts and omissions of their medical and dental staff. However, it is strongly advised that the person appointed maintains defence body membership in order to cover any work, which does not fall within the scope of the hospital policy.

A medical professional indemnity scheme is available to cover compensation (including claimants' costs and expenses) arising from medical negligence in the treatment of private patients at the Royal United Hospital.

Health & Safety

Employees must be aware of the responsibilities placed on them under the Health and Safety at Work Act (1974) and any subsequent relevant legislation and must follow these in full at all times including ensuring that they act in line with all agreed procedures at all times in order to maintain a safe environment for patients, visitors and staff. Failure to comply with these policies may result in disciplinary action up to and including dismissal.

Healthcare Associated Infections (HCAIs)

All Trust staff have a responsibility to act and follow all instructions to protect patients, staff and others from HCAIs. All staff are required to follow the NHS Hygiene Code and all Trust policies and procedures related to it and the Health Act 2006. Failure to comply with any of these may result in disciplinary action up to and including dismissal.

Medical Examination / Screening

At any stage of your employment you may be required to undergo a medical examination to confirm your fitness to undertake your duties. All medical and dental practitioners are appointed subject to medical screening. Vaccinations and immunisations except Yellow Fever may be obtained by contacting the Occupational Health Department at the Royal United Hospital on Extension 4064.

If this post has been identified as one involved with exposure prone procedures, satisfactory Hepatitis B status will be a condition of your employment with this Trust. You will be required to either undergo the immunisation process or produce written evidence of satisfactory Hepatitis B status prior to taking up this appointment.

As this appointment will provide substantial access to children, an enhanced Criminal Records Bureau check on convictions will also be necessary.

ACADEMIC FACILITIES

The Royal United Hospital has two centres for academic support. The Post Graduate Medical Centre has excellent lecture and meeting facilities including a surgical simulation suite. The Bath Academy Education Centre houses an excellent medical library, clinical simulation suite, resuscitation training and again has extensive meeting facilities.

In addition to these facilities the Wolfson Centre houses a number of departments that are linked to Bath University with whom the hospital has excellent links. Bath University has a School for Health where academics collaborate actively with hospital staff over a wide range of disciplines. The hospital is also closely linked with Bristol University Medical School.

Undergraduate and post graduate training is undertaken on site. Many consultants have honorary appointments at Bath and Bristol Universities. There are strong links with several other universities and several members of staff have honorary chairs. There is a long tradition of research and education at the hospital and a regular supply of undergraduate students. All locum consultants are expected to take part in these teaching activities.

There is an active research and development department which fosters and facilitates research in all medical disciplines.

CLINICAL GOVERNANCE

The NHS Executive has defined Clinical Governance as:

“A framework through which NHS organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish”

In line with Government requirements, the Trust has established a Clinical Governance Committee. The Chief Executive is the accountable officer and the lead is the Director of Nursing, who is responsible for ensuring that systems for clinical governance are in place and monitoring their continued effectiveness.

As part of the requirements of clinical governance, the Trust's Committee is ensuring that all hospital doctors participate in audit programmes, including, where appropriate, specialty and sub-specialty national audit programmes.

Procedures are in place for all professional groups to identify and remedy poor performance, including critical incident reporting, professional performance and supporting staff to report any concerns they may have about colleagues' professional conduct and performance.

CONDITIONS OF SERVICE

National terms and conditions of service (Consultants (England) 2003) cover the post.

This post is open to applications to candidates who wish to work less than full time or would like a job share.

Residence within either 10 miles of, or thirty minutes by road (e.g. from RUH) is a requirement of this post.

This post is subject to an Exception Order under the provisions of Section 4(2) of the Rehabilitation of Offenders Act, 1974.

The post is subject to pre-employment checks such as Disclosure and Barring Service, Occupational Health, Visa clearance (where applicable) and satisfactory references.

You are required to be registered with the General Medical Council with a licence to practice/General Dental Council throughout the duration of your employment and to comply with and abide by the relevant code of professional practice, as appropriate.

Annual Leave

6 weeks and two days per annum pro-rata to be approved by the Clinical Lead. Requests should be submitted at least six weeks before leave is required. Requests for annual leave over three weeks should be submitted three months before leave is required. Up to 5 annual leave days may be carried over from one leave year if relevant to the next with the agreement of the Clinical Lead.

Study and Professional Leave

Study and professional leave of up to 30 days, including off duty days within the leave period, in any three years is available in line with the Trust's Study/Professional Leave Policy for Consultants, Associate Specialists, Specialists, Specialty Doctors and Staff Grade Doctors. Leave will only be given where it has been formally approved by the Clinical Lead. A minimum of eight weeks notice is required for any request.

The allocation of study leave is discussed at the annual appraisal. Leave requests, and any associated expenses, must be approved by the Surgical Division in line with Trust policy.

Canvassing

Candidates should note that canvassing any member of the Advisory Appointments Committee or the RUH NHS Trust will result in their being disqualified (see Statutory Instrument 1983 No 276 para 8,1,b).

Policies and Procedures

The post holder is required to familiarise themselves with all Trust policies and procedures and to comply with these at all times. Failure to comply with any of these policies may result in disciplinary action up to and including dismissal.

Confidentiality and Data Protection

The post holder must maintain the confidentiality of information about patients, staff and other health service business and meet the requirements of the Data Protection Act (1998) at all times. The post holder must comply with all Trust Information and Data Protection policies at all times. The work of an NHS acute Trust is of a confidential nature and any information gained by the post holder in their role must not be communicated to other persons except where required in the recognised course of duty. Failure to comply with any of these policies may result in disciplinary action up to and including dismissal.

No Smoking

The Royal United Hospital, Bath NHS Trust is a Smoke Free hospital and site and all Trust staff are not permitted to smoke on any part of the site at any time. Failure to comply with this policy is likely to result in disciplinary action up to and including dismissal.

Equality and Diversity

The Trust has adopted a Managing Staff Diversity Strategy & Policy covering all of its staff and it is the responsibility of all Trust staff to comply with these requirements at all times. The key responsibilities for staff under this Strategy and Policy are set out in the Trust Code of Expectations for Employees. Failure to comply with these policies may result in disciplinary action up to and including dismissal.

Safeguarding Children & Adults

All Trust staff have a responsibility to safeguard adults & children which includes an understanding of the relevant Trust & Local Safeguarding Adults & Children's Board Policies.

Conflict of Interest

All Trust staff are required to identify and report any potential conflict of interest in line with the Trust Code of Expectations of Employees and other Trust policies.

Person Specification

Consultant in Gastroenterology

REQUIREMENTS	ESSENTIAL	DESIRABLE
Qualifications Basic Postgraduate	Degree MRCP or equivalent Full Registration with a licence to practice with the GMC. *Entry on Specialist Register for both General Internal Medicine and Gastroenterology (or entry expected within six months of interview date)	MD or PHD
Clinical Experience	Clinical training and experience equivalent to that required for gaining UK CCST in relevant speciality. Ability to provide expert clinical opinion on range of problems both emergency and elective within specialities. JAG certified or equivalent for colonoscopy or gastroscopy. If substantial experience already obtained before JAG certification was available then this may be considered.	
Management and Administrative experience	Ability to advise on efficient and smooth running of a specialist service within the National Health Service.	Participation on a management course. Evidence of ability to lead a team.
Teaching Experience	Experience of teaching nurses, Foundation doctors and Core Medical Trainees.	Evidence of an interest in medical education.

	<p>Experience of teaching endoscopy. Experience of teaching basic skills to undergraduates.</p> <p>Experience of supervising Specialist Registrars.</p>	<p>Postgraduate medicate certificate in Medical education.</p> <p>Completion of JAG approved Training the Colonoscopy Trainers course.</p>
Research Experience	Ability to apply research outcomes to clinical problems.	Evidence of conducting research e.g. basic science, teaching or service based.
Personal Attributes	<p>Ability to work in a multidisciplinary team.</p> <p>Ability to work flexibly.</p>	