Consultant Neonatologist

10 PAs

November 2017

JOB DESCRIPTION
THE POST – 2 posts
One full-time (10 PA) substantive position for Consultant in Neonatology for Manchester University NHS Foundation Trust (St Mary’s Hospital site)

One full time (10 PA) locum position for 12 months as Consultant in Neonatology for Manchester University NHS Foundation Trust (St Mary’s Hospital site)

The successful applicants will join a current integrated team of 16 full-time Consultants (including the above posts) providing neonatal care and the post is suitable for either experienced or newly qualified Neonatologists or senior Trainees within 6 months of their Certificate of Completion of Training (CCT)

NEWBORN INTENSIVE CARE, ST MARY’S HOSPITAL
The Newborn Intensive Care Unit is committed to providing the best care to the families and patients we look after. St Mary’s Hospital is the major Regional Perinatal Centre for the North Western Region of England and is an integral part of the Manchester University NHS Foundation Trust.

The Newborn Intensive Care Service is managed as an integrated service and is one of the Directorates within St Mary’s Hospital. The Newborn Intensive Care Unit cares for both neonatal medical and surgical infants and is one of the largest units in the country. The Newborn Intensive Care Service moved in July 09 to a new £500M PFI development as an integrated service and currently has a total of 59 cots, which comprise 17 intensive care cots, 15 high dependency care cots and 27 special care cots delivering clinical care to both medical and surgical neonates. There is an on-going expansion plan to the current number of cots to reflect the existing activity of the unit.

The Wythenshawe site has a Local Neonatal Unit (managed clinical services by St Mary’s site since October 2017)

Once merger with North Manchester General Hospital goes ahead (12-18months time), there would be an addition of another Local Neonatal Unit (likely to join the managed clinical services by St Mary’s site).

The Newborn Intensive Care Unit enjoys a high reputation amongst neonatal nurses, due to its comprehensive induction programme, nursing structures and commitment to on-going professional training.

SERVICE PROFILE
The Neonatal unit (St Marys Site) is one of seven neonatal intensive care units in the North West Operational Delivery Network which includes Greater Manchester, Lancashire and South Cumbria and Cheshire and Mersey. It is the busiest unit in the ODN, in 2016 there were 1215 admissions and 11459 days of neonatal intensive and high dependency care. It is also the only neonatal intensive care unit that provides care for neonatal surgical patients and there are over 200 neonatal surgical procedures performed each year. In addition we undertake a wide range of specialist neonatal work as we are co-located with Royal Manchester Children’s Hospital, one of the largest children’s hospitals in Europe. With over 9,000 deliveries, the maternity unit has one of the highest delivery rates in the North West of England. There also close links with fetal medicine which undertakes interventional antenatal procedures.

We have a well-equipped Neonatal Unit with state of the art equipment, including integrated clinical monitoring, high frequency oscillation, inhaled nitric oxide, neonatal hypothermia therapy and portable ultrasound. The Service is well supported by pharmacy, dietetics, physiotherapy, speech and language, paediatric radiology and neuro-radiology services and we have access to the full range of paediatric specialist opinion. We also provide retinopathy of prematurity screening and are the regional retinopathy of prematurity treatment centre. We also provide neonatal hearing screening, neonatal immunisation, neonatal phlebotomy and electronic prescribing for neonatal parenteral nutrition and all drugs.

The breadth of clinical experience that will be gained by joining our team is considerable as it includes neonatal surgery, neonates with specialist medical conditions as well as referrals from our fetal medicine unit. In addition being part of one of the largest teaching hospital groups in England confers a high degree of job stability in a changing political landscape.
Job description – General Details

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<th>Title:</th>
<th>Consultant Neonatologist – 1 Substantive and 1 Locum (12 months)</th>
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<tr>
<td>Location:</td>
<td>Newborn Intensive Care Services, St Mary’s Hospital, Manchester University Hospital NHS Trust Manchester</td>
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<td>Post:</td>
<td>Both are 10 PA post which comprises 8 DCCs and 2 SPAs</td>
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| Prime responsibility: | • Provision of a first-rate neonatal service at local, regional and national levels  
• Part of a Neonatal consultant team responsible for education and training of Medical students, nurses, midwives and trainee doctors  
• Provision of best outcomes through evidence-led clinical care and improvement led by research and evidence |
| Accountable to: | Medical Director, Prof Robert Pearson and Toli Onon |
| Reports to: | Clinical Head of St Mary’s Division – Prof Dian Donnai  
Divisional Director – Mrs Karen Connolly  
Clinical Director Newborn Services – Dr Sajit Nedungadi |
| Works with: | • Colleagues in the Departments of Neonatology, Obstetrics and Fetal Medicine, Neonatal Surgery and Paediatrics.  
• Medical, nursing, allied health professionals and managers in the hospital  
• Clinicians across the Greater Manchester Neonatal network  
• Connect Northwest Neonatal transport Service |
| Key tasks: | • Maintenance of the highest clinical standards  
• To share with colleagues responsibility for the day-to-day management of the intensive care, high dependency, special care and other ward areas  
• Liaison with clinicians and managers across perinatal networks  
• Teaching and training of neonatal junior doctors, nursing staff, midwives, medical students  
• To participate in Continuing Professional Development, Clinical Governance, Safeguarding and Appraisal and Revalidation |

DUTIES AND EXPERIENCE REQUIRED

The Neonatal Consultant will be based in the directorate of Newborn Intensive Care Services at St Mary’s Hospital.

Newborn Intensive Care Services at St Marys site– Service Organisation

All neonatal consultants will between them share the full responsibility for care of infants admitted to the Newborn Intensive Care Unit. Each patient is admitted under the care of a named consultant. This arrangement ensures an unambiguous line of communication between an individual consultant and parents of babies admitted under his/her care. Decisions involving complex ethical matters and unusual clinical management issues are the responsibility of the named consultant.
Day to day decisions about the management of babies in intensive care on the Newborn Intensive Care Unit are discussed each morning on the ward round which is led by the neonatologist. These decisions are normally based on agreed Unit guidelines to which the consultant neonatologist will be expected to contribute. The clinical rooms will be allocated by rotation to all consultants to share the duties and take equal responsibility.

There are separate nominated consultants for the week to undertake regular ward rounds on the Intensive care, high dependency and special care. The postnatal wards are managed by a Neonatal Inreach team, junior doctors/ANNPs and overseen by a nominated Consultant. Hand over commences at 8:30am in intensive care each day followed by a ward round. An anaesthetist attends some of the morning ward rounds to offer advice on the peri-operative care of the surgical neonate. When on take, or at other times, the neonatologist may be asked to provide telephone advice on the management of babies (including unborn babies) who are being cared for at other hospitals in the North West Region. There is no general paediatric inpatient component to this post.

Outpatients
It is expected that routine clinical follow up activity will be done by the consultant neonatologist and clinic sessions have been provided. Many of the infants cared for, however, come from other parts of the region and follow up of these infants occurs locally in line with best practice.

On Call and Emergency Work (Nights and Weekends)
The rota involves both on call requirements from home as well as resident consultant session. However there are on-site middle grade doctors covering the neonatal unit at all times, 24 hours a day, seven days a week. Ward rounds on the NICU will be led by the consultants at 9am and 9pm each day. In view of the volume and complexity of neonatal cases cared for in our establishment there are always at least two consultants available at all times 24 hours a day. In addition to the internal on call cover, there will an external on call commitment of 1 in 9 weekends. Please refer to indicative rota template attached.

Colleague Cover
Cross cover between all consultants is maintained during periods of annual or study leave. Sickness cover would only be expected for the short term. Annual and study leave should normally be taken during the periods when clinical work is not allocated – see job plan – but can be taken at other times by mutual agreement. The consultant would be expected to co-operate with consultant colleagues in arranging study and annual leave.

STAFF
Consultants
The Newborn Intensive Care Service at St Marys NICU site is currently staffed by

- Dr Sajit Nedungadi (Clinical Director, CIS Lead)
- Dr Ian M Dady (Lead for Connect NW Neonatal Transport Service)
- Dr Ngozi Edi-Osagie (Assoc Medical Director/Clinical Lead SHS)
- Dr Anthony JB Emmerson (0.4 WTE)
- Dr Edward Gasiorowski (RCPCH Tutor, Infection control Lead)
- Dr Ruth Gottstein (Training Programme Director – ST1-3)
- Dr Susan Kamupira (Education Lead)
- Dr Ajit Mahaveer (Research Lead, Divisional Audit Lead)
- Professor Simon J Mitchell
- Dr Arindam Mukherjee (Audit Lead/MTI programme Lead)
- Dr Michelle Parr (Governance Lead, 0.7WTE)
- Dr Ranganath Ranganna (Simulation lead)
- Dr Gareth Penman
- Dr Yasser Masood (ANNP Lead)
- Dr Kristin Tanney (Badgernet Lead)
- Dr Nishant Banait
**Junior doctors**

There are 11 level ST 2/3 doctors. In addition we have ANNP’s working on Tier 1 rota. There are 9 level ST4+ doctors which includes one neonatal grid trainee.

All training posts for junior doctors have full recognition of RCPCH and Postgraduate Dean. All junior doctors are on a full shift rota and only cover neonates. There is also a 0.5WTE simulation fellow

We also have a dedicated ANNP and Enhanced Nurse Practitioner (ENP) roles who manage babies in the HDU and SCBU areas of NICU.

**Nursing Staff**

The neonatal unit has a large nursing team led by a lead Nurse, Kath Eaton, supported by three modern Matrons. There are currently approximately 200 WTE Neonatal Nurses. The medical and nursing teams work closely together and we have a motivated team of neonatal nurses, nursery nurses and community neonatal nurses to provide holistic and family-centred care. The high dependency and special – care areas of the unit are supported by 4 Advanced Neonatal Nurse Practitioners and 8 Extended practitioners (nurses with additional skills)

There are three research Nurses and a nurse-led Neonatal Outreach Community Service. In addition there are a number of senior nurses with additional roles – Retinopathy screening, breast-feeding, bereavement.

**Allied services**

There are medical technicians based in the Medical Engineering and Maintenance Department. Secretaries support the work of the Neonatal Intensive Care Unit. We also have a visiting speech and language therapist who has dedicated time to provide feeding and swallowing related advice and support from a neonatal dietician.

The post involves caring for neonatal surgical patients as well as medical patients and there will be close working with the paediatric surgeons. The Newborn Intensive Care Unit plays a major role in the integrated perinatal services of the hospital. The perinatal related services of special relevance to Neonatology are:

- Paediatric Surgery - Mr Neil Bateman (Clinical Director)
- Paediatric Anaesthesia
- Obstetrics (including 5 fetal medicine specialists) - Dr Clare Tower (Clinical Director)
- Neonatal Imaging – Dr Rob Hawkes (Clinical Director)
- Neonatal Cardiology – Dr Ed Ladusans
- Retinopathy of Prematurity – Mr Sus Biswas
- Medical Genetics, dysmorphology and laboratory genetics – Kay Metcalfe (Clinical Director)
- Perinatal Pathology - Dr M Newbould
- Full tertiary level support for all paediatric subspecialties (including cardiology, nephrology, neurology, neurosurgery, haematology, gastroenterology, and endocrinology) in the collocated Royal Manchester Children’s Hospital.
- General Paediatrics – Dr Ian Doughty (Clinical Director)

The Royal Manchester Children’s Hospital also has a secondary paediatric service for the local community and the paediatricians support the further admissions of infants who have been discharged from the Newborn Intensive Care Unit allowing for continuation of care shared with the consultant general paediatricians.

Full laboratory support services are provided within the Trust, including biochemistry, haematology, immunology, virology and microbiology. There is a well-developed paediatric pathology service available and a regional metabolic unit all within the collocated Royal Manchester Children’s Hospital.
DIRECTORATE ARRANGEMENTS
The Directorate of Newborn Intensive Care is part of the Saint Mary’s Division one of the Hospital sites of the Trust. Professor Dian Donnai is the Clinical Head of Division, Mrs Karen Connolly is the Divisional Director and Mrs Chris Ashworth is the Directorate Manager.

ADMINISTRATIVE AND MANAGEMENT RESPONSIBILITIES

Clinical Effectiveness
The Unit has an active Clinical Effectiveness programme in place including a well-developed no blame neonatal Risk Management process. The consultant would be expected to play a part in the further development and support of Clinical Governance within the Unit.

Audit and Resource Management
There is an active audit programme undertaken by the Newborn Intensive Care Unit. There is a clinical database including a wide range of data which facilitates clinical management, audit and research functions. There is an expectation that the successful applicant would take a full part in clinical audit. The Greater Manchester Neonatal Steering group has implemented the Badger neonatal.net platform for Greater Manchester neonatal data collection and to support the Neonatal National audit and collection of PbR data.

Information Technology
The consultant would be expected to utilise the appropriate IT support both provided by the Trust and the specialised IT utilised within NICU. It is anticipated that there will be significantly greater use of IT within the next year as we are looking to move into a clinical information system in 2017/18 and will have an integrated electronic patient record.

Office and secretarial support
The consultant appointed to this post will be provided with an office, a computer and secretarial support.

RESEARCH
The Trust undertakes research in a diverse range of clinical areas and regularly recruits patients into clinical trials. We believe that clinical research is most successfully translated into improved care for patients through the combined efforts of patients, clinicians, scientists, industry and other partners.

We are dedicated to improving health and well-being for our diverse population. Research and innovation are central to our vision to be recognised internationally as a leading centre for healthcare provision.

Patients. Some 2.6 million people live in Greater Manchester, with demographics representative of all major developed world disease areas, ethnic groups and areas of considerable deprivation. Over one million patients per year are cared for across our eight hospitals and community services.

Location. Greater Manchester is in the top three UK regions for attracting industry studies, and is home to a large, diverse and stable patient population. Manchester Royal Infirmary is located at the heart of the largest clinical-academic campus in Europe.

Connections. We are intrinsically connected with The University of Manchester – through colocation, and our joint biomedical research strategy, appointments, and medical training programme. With the University of Manchester we are one of seven partners in the Manchester Academic Health Science Centre (MAHSC), the only AHSC outside of Southern England; designated by the Department of Health, this is a quality stamp for the research we conduct. We host the National Institute for Health Research (NIHR) Clinical Research Network: Greater Manchester, and work closely with the Greater Manchester Academic Health Science Network and the Northern Health Science Alliance.

Quality of research. We are home to the NIHR/Wellcome Trust Manchester Clinical Research Facility (adults and children’s), the NIHR Manchester Musculoskeletal Biomedical Research Unit and one of the NHS England 100K Genome Centres.

Infrastructure. We empower our staff to identify and assess unmet needs, and support them in working with industry and other partners to craft co-developed diagnostics, treatments and devices.
Principal investigators work as part of a cross-functional team (divisional research managers, research nurses/midwives/coordinators, research office administrators, quality manager, innovation management service [TRUSTECH], etc.) dedicated to driving research and innovation.

**Performance.** We are continuously looking for ways in which we can improve delivery of our research studies. Over the past three years, we have significantly reduced the average time for study approval and first patient recruited (NIHR targets). Research and Innovation Division reports directly to the Board providing timely decision making, as well as strategic oversight and assurance to the Trust Board in relation to the management and governance of all research activities within the Trust and in our collaborations and partnerships.

Our world-leading research facilities, and the provision of internal pump-priming grants, provide a first-class environment for translational research in a hospital setting.

**TEACHING**

The neonatal service has well established links with University of Manchester, Manchester Metropolitan University and University of Salford. The consultants are encouraged to provide regular external teaching sessions in addition to in-house training days. There will be regular teaching of undergraduate medical students and post-graduate teaching of nurses, midwives and doctors.

With respect to undergraduate medicine, the neonatal service has well established links with Manchester Medical School, University of Manchester. The Manchester Medical School has a national and international reputation for excellence in teaching. Involvement in undergraduate medical student teaching, supervision and assessments is actively encouraged.

**TRUST RESPONSIBILITIES**

There will be an initial induction for newly appointed Consultants and junior doctors and there will be a requirement to complete the mandatory Clinical and Corporate and local training programmes.

**Continuing Professional Development**

All newly appointed Consultants will be required and supported to undertake the Newly Appointed Consultant (NAC) programme run by the Trust.

The applicant must maintain a commitment to furthering their knowledge and contribute to and participate in a continuing medical education programme. The unit fully endorses the CPD programme of the Royal College of Paediatrics and Child Health.

**Appraisal/ Job plan review**

The consultant will have an annual NHS appraisal in their birth month.

**Responsibility for junior medical staff**

The consultant would be expected to contribute in the educational supervision and mentoring of the STs, clinical fellow staff and ANNP’s.

**General Statutory Requirements**

Appropriate training and experience in neonatology and paediatrics, including a CCT in Neonatology.

The appointment is subject to the candidate’s agreement to comply with the Terms and Conditions of Service of the Central Manchester University Hospitals NHS Foundation Trust.

A satisfactory medical examination is a condition of employment for medical and dental staff in the NHS. Therefore, the successful candidate’s appointment will be subject to medical clearance from the NHS Trust’s Occupational Health physician. In relation to Hepatitis B Screening and vaccination it is a requirement of all staff that they should undergo periodic testing and, where in a post designated as potentially prone to exposure, be vaccinated.
Job Plan
It is planned that the consultant will take up the new Clinical contract with a standard 10 Professional Activities (PAs).

The Trust reviews each new job in line with Trust Objectives and Divisional requirements whilst still maintaining a degree of flexibility to consider an individual’s aspirations and development requirements. In this case, the Trust has considered the need for a core SPA to cover CPD, job planning, appraisal, mandatory training, audit and clinical governance. There is also a requirement to undertake teaching.

The annualised average 10 PA sessions will divide into 8 direct clinical care PAs and 2 PAs for supporting activity. The nine week rota showing indicative weeks has been attached.

RESIDENCE
Because of on-call commitments, the successful candidate is expected to be contactable by telephone and to reside not more than ten miles, or half an hour’s travelling time, from their main campus, unless the Trust gives prior, specific approval for a greater distance (or time).

The requirements of the Trust’s removal policy should be sought prior to entering any removal arrangements. Expenses will be reimbursed and grants paid only when the Trust is satisfied,

(1) That the practitioner is an eligible practitioner in accordance with the regulations
(2) That the removal of the practitioner's home is required by the Trust
(3) That the arrangements proposed are reasonable

Staff in receipt of removal expenses who terminate their employment with the Trust within 2 years will be required to repay the relevant proportion of these expenses.

REHABILITATION OF OFFENDERS ACT 1974
This appointment is exempt from section 4(2) of the Rehabilitation of Offenders Act 1974 (exemptions) Order 1975. You are required to reveal any information you may have concerning convictions which would otherwise be considered as "spent" in relation to this application and which may be considered relevant to your suitability for employment. Any such information will be kept in strict confidence and used only in consideration of suitability for appointments where such an exception is appropriate.

CANVASSING AND RELATIONSHIPS
Canvassing will result in disqualification. Applicants who are related to any member or Senior Officer in the Manchester University NHS Foundation Trust or must indicate in their application the person to whom they are related together with the nature of the relationship. Any applicant who deliberately conceals such a relationship would render himself or herself liable to dismissal.

VISITS
Prospective candidates are welcome to contact Dr. Sajit Nedungadi’s PA, Gillian Taylor on 0161 276 6857 for an informal discussion and to arrange a visit.
### INDICATIVE JOB PLAN

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### SUMMARY OF SESSIONS

#### Direct Clinical Care:

- Emergency duties / Ward rounds / Attending weeks / Clinical Diagnostic / Ward Work / OPD / Patient administration: 8

#### Supporting Professional Activities

- Training (Postgraduate + Undergraduate): 0.5
- CPD, Appraisal, Job Planning, Mandatory training, governance, audit: 1
- Other: 0.5

#### TOTAL PAs: 10

#### On-Call Supplement:

- Category: A
- On-call Supplement: 3%

Mean PA/week: 10.07
## PERSON SPECIFICATION – CONSULTANT NEONATOLOGIST

### Qualifications and Training

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<th>Requirement</th>
<th>Essential / Desirable</th>
<th>Please state whether you meet the criteria</th>
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<tr>
<td>Primary medical degree</td>
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<td>Full registration with the GMC and Licence to Practice</td>
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<td>MRCPCH or equivalent</td>
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<td>Higher Qualification – MSc, MD or PhD</td>
<td>Desirable</td>
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<td>Completion of higher specialist training in Neonatology, Registration on Specialist Register with CCT in Paediatrics (Neonatal Medicine), or equivalent training experience or within 6 months of the above at interview date.</td>
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### Teaching and Audit

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<th>Requirement</th>
<th>Essential / Desirable</th>
<th>Please state whether you meet the criteria</th>
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<tr>
<td>Experience of teaching undergraduate medical students and postgraduate doctors</td>
<td>Essential</td>
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<td>Specific training in teaching skills (e.g. Training the Trainers)</td>
<td>Desirable</td>
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<tr>
<td>Participation in audit with demonstrable effects on clinical practice</td>
<td>Essential</td>
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### Academic Achievements and Research

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<th>Requirement</th>
<th>Essential / Desirable</th>
<th>Please state whether you meet the criteria</th>
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<tr>
<td>Attendance at neonatal scientific meetings</td>
<td>Essential</td>
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<td>Recent presentations at learned societies</td>
<td>Essential</td>
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<tr>
<td>Member of neonatal learned societies / national bodies</td>
<td>Desirable</td>
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<tr>
<td>Research Projects relating to Neonatology</td>
<td>Essential</td>
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<tr>
<td>Publications in peer-reviewed journals</td>
<td>Desirable</td>
<td></td>
</tr>
</tbody>
</table>

### Management Skills

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Essential / Desirable</th>
<th>Please state whether you meet the criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence of management skills to aid, organise and manage the running of a busy Neonatal unit</td>
<td>Essential</td>
<td></td>
</tr>
<tr>
<td>Good understanding of the structure and processes of the NHS</td>
<td>Essential</td>
<td></td>
</tr>
<tr>
<td>Formal management training</td>
<td>Desirable</td>
<td></td>
</tr>
</tbody>
</table>

### Interpersonal Skills

<table>
<thead>
<tr>
<th>Requirement</th>
<th>Essential / Desirable</th>
<th>Please state whether you meet the criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Able to adapt to change, operate under pressure, time management skills</td>
<td>Essential</td>
<td></td>
</tr>
<tr>
<td>Organised and well prepared, punctual, self-disciplined</td>
<td>Essential</td>
<td></td>
</tr>
<tr>
<td>Ability to work well and effectively in a large team</td>
<td>Essential</td>
<td></td>
</tr>
<tr>
<td>Strong leadership skills – ability to lead a multi-disciplinary team</td>
<td>Essential</td>
<td></td>
</tr>
<tr>
<td>Good oral and written communication skills in English</td>
<td>Essential</td>
<td></td>
</tr>
</tbody>
</table>

### Completed by Dr Sajit Nedungadi, Clinical Director

Candidates Name: __________________________
Candidates Signature: _______________________
Date: __________________________