SUBJECT TO RATIFICATION BY THE ROYAL COLLEGE

Consultant in Anaesthesia with a Special Interest in Critical Care Medicine

Candidate’s Application Pack

Your health, your life, your choice, our passion
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PART 1
THE ROTHERHAM NHS FOUNDATION TRUST

Our Vision, Mission and Values
Together with our staff we have developed a vision, mission and set of values which form a framework for a positive and supportive environment for our patients, visitors and staff.

Our vision, mission and values are detailed below; if you feel that you are as committed as we are to their delivery, please continue with your application.

OUR VISION
To be an outstanding Trust, delivering excellent healthcare at home, in our community and in hospital.

OUR MISSION
To improve the health and wellbeing of the population we serve, building a healthier future together

OUR VALUES

Ambitious seeks to set high standards and expectations, for the services we deliver but also for ourselves. For example, we can be ambitious in terms of quality of care for our patients and clinical strategies. Also, we can be ambitious in terms of changes to our ways of working and patient pathways to develop sustainable services for the population we serve.

Caring reflects overwhelming feedback about what our colleagues and patients would like to see from us, embracing the importance of caring for patients and families. Also, it is important that we care for each other as colleagues, and that we care in other ways, such as about our community, our resources, our environment and our future.

Together represents the importance of working together, whether as clinical, non-clinical and multidisciplinary teams, with patients, carers and families to provide high quality patient-centred care. It is also about working with our partners across Rotherham, South Yorkshire and Bassetlaw and further afield, to improve the health and wellbeing of the population we serve.

The Trust
The Rotherham NHS Foundation Trust is at the forefront of developing an exciting new NHS healthcare proposition, providing innovative integrated services, investing in its workforce and implementing the next generation of emergency care design. The organisation is ambitious and is reaching new heights in terms of the care it provides for its patients.
We are responding proactively and positively to the challenges faced by the NHS and are pioneering the development of an Emergency Centre which will be the first in the country to provide care by bringing together a range of front line services under one roof to allow more streamlined access to emergency or urgent NHS care.

As an integrated Trust, our community transformation vision is to deliver a seven day service that brings care for our patients closer to their homes which will optimise our patients’ experience. These are exciting developments for Rotherham and will enable delivery of care that is efficient and responsive to patient need.

A vibrant place to work, the Trust is proud of its dedicated workforce who embody the Trust's values and make it a truly friendly place for both patients and colleagues.

Rotherham Hospital is our main site (Rotherham Hospital). The modern site provides a range of hospital based Medical, Surgical, Paediatric and Obstetric & Gynaecological services.

The excellent and modern facilities include:

- 351 inpatient beds
- Intensive Therapy and Coronary Care Units
- Cardiac Catheterisation Suite
- Breast Screening Suite
- Endoscopy Unit
- Day Surgery Unit
- Theatre Assessment Unit
- Stroke Unit
- Photopherisis Service

The Urgent and Emergency Care Centre (UECC) deals with around 75,000 patients per year and there are approximately 55,000 inpatients and 250,000 outpatient attendances each year. The clinical services are supported by comprehensive pathology, medical physics and imaging services, including state of the art MRI and CT facilities.

The Trust is an Associate Teaching Hospital of the University of Sheffield and has an active research programme delivered through local, regional, national and international research networks and consortia.

Our Medical Education Centre has tutorial rooms, a clinical simulation suite and a lecture theatre. The Medical Library and information systems are widely acclaimed. The department:

- organises a vigorous medical postgraduate education programme (the Trust regularly receives some of the highest scores in the country in the GMC training survey)
- has strong links with the University of Sheffield
- is renowned for its medical undergraduate training
The Rotherham Hospital Site also acts as a base for:

- Post and Undergraduate Education for Sheffield University
- Rotherham Metropolitan Borough Council Hospital-based Social Services
- Renal Unit, managed by Sheffield Teaching Hospitals
- South Yorkshire Sexual Assault Referral Centre, staffed by South Yorkshire Police and Hospital Staff to treat children and adults in a safe and caring environment
- Busy Bees Day Nursery

The Trust also operates out of a large number of other sites. Information about each site and the services it provides can be seen below:

- Rotherham Community Health Centre (RCHC) and Walk-in Centre
- BreathingSpace
- Park Rehabilitation Centre (PRC)
- Rotherham Intermediate Care Centre (RICC)
- Kimberworth Place

**Urgent & Emergency Care Centre – Right Care, First Time**

A new, state of the art Urgent & Emergency Care Centre (UECC) opened its doors at Rotherham Hospital in July 2017. The centre now provides a better service for patients, 24/7, all under one roof.

The UECC is home to multi-skilled colleagues, specialist nurses, GPs and experts who can give rapid emergency care or signpost patients to the right place or service to receive their care, be this inside or outside of hospital.

The benefits of the UECC include reduced waiting times, better links with mental health services and social care services and enhanced, sustainable facilities to meet the future needs of Rotherham people.

**Continued Professional Development, Revalidation and Appraisal**

Continued Professional Development (CPD) for Consultant Staff is supported and encouraged by the Trust, within funding, time and facilities available.

Medical revalidation is the process by which the General Medical Council (GMC) confirms the continuation of a doctor’s licence to practise in the UK, provides greater assurance to patients, the public, employers and other healthcare professionals that licensed doctors are up-to-date and fit to practise. It is a key component of a range of measures designed to improve the quality of care for patients.

The Trust fully supports the GMC’s Revalidation agenda and we have a dedicated Revalidation Support Team who support the co-ordination of Revalidation and medical appraisal activity, providing personalised support for all consultants, which includes the facilitation of 360° Multi-Source
Feedback, providing advice and guidance on completing appraisal documentation and sourcing evidence.

A mentoring programme is in place for consultants at the Trust and newly appointed consultants are routinely offered a consultant mentor in line with Royal College and GMC requirements.

**Undergraduate Medical Education**

We are an Associate Teaching Hospital of Sheffield University and we provide high quality undergraduate medical education to inspire our future doctors to deliver excellent medical care and patient safety. The trust receives excellent feedback for the undergraduate education and was recently assessed as the best hospital for undergraduate education in South Yorkshire. We are passionate about teaching and are building a teaching commitment into many job plans. There is the opportunity to apply for Honorary Senior Lecturer status with the University of Sheffield for Consultants showing an interest in Education. If the successful candidate expressed an interest in undergraduate education then they would be encouraged to discuss a formal role with the Director of Undergraduate Education.
TRUST EXECUTIVE STRUCTURE

The Executive Directors of the Trust are:

Louise Barnett  Chief Executive
Simon Sheppard  Director of Finance
Chris Morley  Chief Nurse
Dr Conrad Wareham  Medical Director
Chris Holt  Director of Strategy & Transformation
Cheryl Clements  Executive Director of HR
Anna Milanec  Director of Corporate Affairs

The Non-Executive Directors of the Trust are:

Martin Havenhand  Chair
Gabrielle Atmarow
Heather Craven
Joe Barnes
Paul Smith
Barry Mellor
Mark Edgell
Lynn Hagger

To assist the Medical Director, two Associate Medical Directors, who are members of the consultant staff, have been appointed as follows:

Dr Alison Cooper  Associate Medical Director for Revalidation and Medical Education
Dr Carrie Kelly  Associate Medical Director for Standards of Medical Care

TRUST DIVISIONAL STRUCTURE

A Divisional structure operates within the Trust and there are four divisions led by a Management Team comprising a Divisional Director, Head of Nursing, General Manager, Finance Business Partner and HR Business Partner. The Divisions are:

- Division of Family Health
- Division of Integrated Medicine
- Division of Surgery
- Division of Clinical Support Services

The Divisional Management Team comprises:

Mr Jeff Garner  Interim Director of Surgery
Mrs Suzanne Stubbs  General Manager: Surgical Directorate
Dr Amar Joshi  Clinical Lead: Anaesthetics & Critical Care
Dr David Harling  Clinical Lead: Critical Care
Professor Anil Hormis  Service Organiser: Anaesthesia & Critical Care
**Living and Working in Rotherham**

Rotherham is surrounded by attractive countryside, contemporary leisure facilities and extensive retail outlets. The town has excellent road and rail links, and easy access to several airports.

The Rotherham borough has a population of approximately 250,000 and covers approximately 100 square miles. Traditional heavy industries have been replaced by hi-tech industries and a thriving service sector. One legacy of the town’s industrial heritage is that the borough is made up of many villages (some very small and picturesque) separated by farm and common land.

Rotherham has a number of very pleasant suburbs and the hospital itself is located in attractive leafy urban surroundings approximately two miles from the award-winning town centre. Housing in the Rotherham area is competitively priced and offers a wide range of choice, including urban and rural locations.

Within Rotherham, there are three country parks, an English Heritage Site and the nationally acclaimed Magna Science Adventure Centre, which draws on Rotherham’s industrial past to provide a spectacular and educational experience. A “Gulliver’s Kingdom” theme park is currently being planned for the town. The historic Wentworth Woodhouse, with its spectacular monuments, beautiful parkland and 365 rooms is also situated within the borough.

There are several high-performing state schools in Rotherham. Coaches also run from Rotherham to excellent private schools in Sheffield.

For more information visit:

- [www.rotherham.gov.uk/towncentre/](http://www.rotherham.gov.uk/towncentre/)
- [www.parkgatesshopping.co.uk/](http://www.parkgatesshopping.co.uk/)
- [www.placesforpeopleleisure.org/centres/rotherhamleisure-complex/](http://www.placesforpeopleleisure.org/centres/rotherhamleisure-complex/)

**The Surrounding Area**

Sheffield is only six miles away with a fast dual carriageway road link. With its universities, medical and dental schools, the city is now a major national centre for entertainment, leisure, sport and shopping. There are two theatres and the Sheffield Motorpoint Arena, which stages major entertainment and sporting events, is only three miles outside Rotherham town centre.

There are superb international standard sporting facilities in the area following Sheffield hosting the World Student Games, including the Ponds Forge Swimming and Leisure Complex. As well as the usual city and local modern shopping complexes, the Meadowhall Shopping Centre midway between Rotherham and Sheffield is one of the largest and most up-to-date shopping arenas in Europe, attracting some 30 million visitors each year. Rotherham is central to a wide and varied range of recreational, leisure and cultural activities.
There is ready access to the Peak District National Park, the Pennines, Yorkshire Dales, North Yorkshire Moor, coastal resorts and many historic cities. Numerous stately homes such as Chatsworth, Haddon and Hardwick Hall, Harewood House, Belvoir Castle and Castle Howard, which hold their own programme of events, are all within easy travelling distance.

On the sporting scene, Rotherham and surrounding areas offer football, rugby union, cricket, golf, ice hockey, fishing, ten-pin bowling and other sports to watch or take part in. The three country parks in Rotherham - Rother Valley, Thrybergh and Ulley - offer watersports such as sailing, scuba and windsurfing, as well as many land-based activities.
PART 2
JOB DESCRIPTION

<table>
<thead>
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<th>Job Title</th>
<th>Consultant in Anaesthesia &amp; Critical Care Medicine</th>
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<td>Division of Surgery</td>
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<tr>
<td>Work Base</td>
<td>The Rotherham NHS Foundation Trust (Hospital Site)</td>
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<td>Tenure</td>
<td>Permanent</td>
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<tr>
<td>Operationally Accountable to</td>
<td>Chief Operating Officer through the Divisional Director</td>
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<tr>
<td>Professionally Accountable to</td>
<td>Medical Director</td>
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</tbody>
</table>

Key Working Relationships

- Director of Clinical Services
- Divisional General Manager
- Service Manager
- Professional Leads
- Consultant and Senior Medical Staff
- Doctors in Training

Main Duties & Responsibilities

**General**
1. In conjunction with Consultant and Senior colleagues, to provide a service in Anaesthesia with responsibility for Critical Care Medicine.

2. In conjunction with Consultant and Senior colleagues, to play a full part in the out-of-hours On-Call service for the department. This includes being on-call for telephone advice and major incidents.

3. To provide cover for Consultant and Senior colleagues in respect of periods of leave.

4. In conjunction with Consultant and Senior colleagues, to take part in medical audit and research as appropriate.

5. In conjunction with Consultant and Senior colleagues, to ensure that the requirements of clinical governance are met.

6. To ensure that there are adequate arrangements for hospital staff involved in the care of your patients to be able to contact you when necessary.
**Junior Medical Staff**
7. In conjunction with Consultant and Senior colleagues, to play a full part in the professional supervision and management of junior medical staff.

8. In conjunction with Consultant and Senior colleagues, to take responsibility for and devote time to teaching, examination and accreditation duties as required for junior medical staff.

**Management & Service Development**
9. In conjunction with the Divisional Senior Team, to take an active role in the management of the Division.

10. In conjunction with the Director of Clinical Services, Consultant & Senior colleagues, to play a full part in developing & implementing new ways of working in line with modernisation principles that are fit for the future.

11. In conjunction with Consultant and Senior colleagues, to take responsibility for the best use of departmental staffing and other resources to ensure the maximum efficiency of the department.

12. To observe the Trust’s agreed policies and procedures, in particular in relation to managing staff, and to follow the Trust’s Standing Orders and Standing Financial Instructions. These policies and procedures have been drawn up in consultation with the profession on clinical matters.

**Clinical Governance**
13. In conjunction with Consultant colleagues, to ensure that the requirements of clinical governance are met.

**Any Other Duties**
14. Any other duties as deemed appropriate.
Detailed Job Description

The successful candidate will share responsibilities within the department of Anaesthesia and Critical Care Medicine. The successful candidate will be required to provide 8.0 PA per week of DCC, plus 1.0 PA for on call, and a minimum of 1.5 PA per week of SPA. Additional Clinical Anaesthesia PAs may be available dependent upon the needs of the anaesthetic department, and the appointee will be encouraged to take on additional SPA roles determined by their interests and the needs of the department.

Critical Care Unit
Critical Care Medicine cover is provided by 2 Consultants on weekdays. One Consultant provides cover from 0800 to 1800 on the Intensive Care Unit (ICU), and the other provides cover between 0800 and 1800 on the High Dependency Unit (HDU). On call during the week is shared between the Critical Care and General Consultants. The Critical Care Consultants provide a weekend on call service which will be on a 1 in 10 basis with prospective cover. There is a resident session on the Critical care unit from 0800-1300. Followed by on call till 2000. (Consultants will be expected to cross cover colleagues’ leave in order to cover the Critical Care Medicine service). These are new posts to facilitate a departmental restructure, providing separate rotas for critical care and other duties. The aim is to separate out the ITU and General rotas in time. There are currently 8 Consultant Anaesthetists with sessions in Critical Care.

Anaesthetics

Each theatre session is 1.25 PAs or 5 hours, which includes 1 hour for pre-operative assessment and post-operative care. The theatre start time for the morning list is 0830 and for afternoon list is 1345.

Supporting Professional Activities (SPA)
The list of activities included in SPA is not limited to activities to support continuing professional development (CPD), but includes mandatory training, appraisal, revalidation, audit, job planning, departmental and personal administration, governance, education and training etc. All of the SPA activities will be required to support revalidation and professional development.

The expected anaesthetic and critical care related activities of the job plan, should occur at regular times in the week. Mutual agreement will be reached between the appointee and their Clinical Lead, with regard to scheduling, including SPA.

An example timetable is indicated in this job description, and we are very willing to discuss alternative arrangements with suitable candidates who have a specialist area of interest that complements their primary role.
3.4 On Call Availability

The post holder will participate in the General Anaesthesia & Critical Care on call rota for out of hours emergency work. The on call is Category A attracting a pay supplement of 3% and tariffed at 1.0 PA per week on average.

3.5 Teaching and Training

The appointee is expected to participate in teaching and training of junior staff, medical students and other clinical staff groups. The appointee may also have supervision responsibilities for junior medical staff within the specialty if interested. If appropriate, the post-holder will be named in the contract of junior staff as the person responsible for overseeing their training and as an initial source of advice to such doctors regarding their careers. Each Consultant is encouraged to undertake a “Training the Trainers” course.

3.6 Study & Training

The applicant is expected to participate in professional continuing medical education; study leave is provided for this purpose, and the appointee will be entitled to apply to the Trust Study Leave Committee for a contribution to funding of this activity.

3.7 Appraisal, Revalidation & Mandatory training

The successful candidate will be required to maintain their continuing professional development (CPD) to be able to successfully revalidate. As per the Trust requirement the successful candidate will be required to have annual appraisal and attend mandatory training as stipulated.
The Department of Anaesthesia and Critical Care Medicine at The Rotherham NHS Foundation Trust

4.1 Introduction

We currently have a 25 substantive Consultant Anaesthetists. In addition, there are eight full-time Anaesthetic Specialty Doctors and three full-time Associate Specialists. The trainee establishment consists of eight core trainees, together with 5 intermediate and higher level trainees all rotating from the South Yorkshire Anaesthetic Training Rotation. The department also has one Foundation Year 2 doctor on a 4-month rotation on the HDU.

4.2 Critical Care Unit

We admit around 650 patients a year, of which 35% are Level 3. Approximately 60% are emergency medical admissions, and around 15% are elective surgical patients. Our mean APACHE II score is 16.2, with a unit mortality of 12 %, which is in keeping with other similar units in the ICNARC Case Mix Programme, and we have a risk-adjusted acute hospital mortality of 0.86 (2016-17 ICNARC data).

There are currently 5 funded Level 3 (ICU) bed spaces and 8 funded Level 2 (HDU) bed spaces. The ICU and the HDU are co-located to make a Critical Care Unit. Theatres, radiology and the brand new Urgent / Emergency Care Department are in close proximity.

The successful candidate will also be encouraged to become participate in the governance and service development of the Critical Care Unit. Supporting Professional Activity (SPA) time will be available in job plans to support involvement in these activities.

There are currently eight Consultants, who have a special interest in Critical Care and provide consultant cover for the unit. This will increase to ten Consultants subject to appointment of these two posts. Two Critical Care consultants cover the unit each weekday, providing a total of 20 clinical sessions. These new posts were approved to help meet the GPICS standards for critical care.

Training & Teaching

We have Core and Specialty Trainees in Anaesthetics from the South Yorkshire Anaesthetic training rotation. On-call cover for the Critical Care Unit is provided by ST3 level and above Anaesthetic trainees as well as some of the Speciality doctors.

The Critical Care Unit is recognised for basic, intermediate level RCoA training and Stage 1 of the FICM training program. With these two appointments we are looking to secure one of the trainees undertaking their advanced ICM training year. One of our ICU Consultants is FICE accredited and all the remaining ICU Consultants are working towards FICE accreditation.
There is an established teaching programme within the department, with an afternoon of tutorials on topics relating to Anaesthetics and Critical Care Medicine. A lunchtime ICU journal club and a ‘mortality and morbidity’ meeting is held once a month at the ICU Clinical Governance meeting. Consultants are expected to deliver and facilitate sessions as able.

Equipment
We have multimodal Fukuda Monitoring, Draeger ventilators, LiDCOunity and CardioQ cardiac Output monitoring, and Baxter Prismaflex machines for renal replacement therapy.
The Critical Care Unit is conveniently located in close proximity to the operating theatres (with direct access), Emergency Department, Emergency Admission’s Unit and Radiology suite.

Multi-disciplinary Team
There is daily input from an experienced team of physiotherapists, as well as a dedicated critical care pharmacist and Microbiologist. Our critical care follow-up clinic run by the Nurse Consultant for Critical Care is well established. There is a well-established Critical Care Outreach service provided 5 days a week by a team of experienced nurses from a critical care background. We have a nationally renowned Vascular Access service for the placement of PICC lines and other devices.

The Critical Care Unit participates in ICNARC and is supported by a part-time audit clerk. The unit has taken part in several multicentre research studies and a number of research projects are on-going. We are well supported by the Yorkshire and Humber CRN.

Other parts of the hospital
NIV can be offered on most wards under the supervision of the Physiotherapists.

4.2 Anaesthesia

Elective Surgery
Elective surgical lists are either half or full day and run for either 4 or 8 hours. Anaesthetists are allocated an extra hour per half day for pre-op assessment and post-op care. Surgical specialties include: general surgery (including laparoscopic colorectal surgery), orthopaedics and trauma, gynaecology, urology, ENT, maxillofacial, breast surgery, ophthalmology. We have an excellent Day Surgery Unit and one of our colleagues is the President elect for the British Association of Day Surgery (BADS).

Obstetric Anaesthesia and Analgesia
Rotherham has a busy obstetric unit. In 2016 there were approx. 3000 deliveries. Approximately 5 patients a year require admission to critical care. 15-sessions per week are currently covered by 7 Consultant
Anaesthetists. Out of hours, cover is provided by the Registrar on-call and the General Anaesthetic Consultant on call.

**Acute Pain**

An enthusiastic and dynamic team of nursing staff run our nationally renowned acute pain service throughout the Trust. There is a well-established ward-based epidural service for Orthopaedics, General Surgery, Urology and Gynaecology with ongoing developments focusing on enhanced recovery, management of acute pain in the patient with chronic pain and analgesia for fractured necks of femur. The Pain team has particular expertise in the management of rib fractures and our protocols have been published and presented nationally. The pain team also provide an acupuncture service which has reduced the incidence of post-operative nausea and vomiting (PONV).

**Teaching and Training**

In addition to service commitments, there are excellent opportunities for the appointee to become involved in anaesthetic training, module development, educational supervision and appraisal. The Department has an excellent reputation for teaching and training. The anaesthetic department offers training modules in all the surgical specialities available at the Trust, as well as Critical Care Medicine. All consultants are encouraged to participate in teaching and tutorials, in addition to practical aspects of training in the operating theatres and intensive care. One of our colleagues is the Training Programme Director for Anaesthesia in South Yorkshire.

**4.7 Clinical Governance**

Critical Care clinical governance meetings (including Morbidity and Mortality) are held once a month and all Critical Care Consultants are expected to participate and contribute to the governance process within the unit.

The Anaesthetic department also holds regular governance afternoon meetings (up to six meetings per annum). These include combined meetings with surgical specialities, mandatory training updates as well as audit, mortality and morbidity, case presentations, new developments.

**Consultant Meetings**

Anaesthetic & Critical Care Consultant meetings are held bi-monthly on the day of the Clinical Governance meetings.

Critical Care Consultant meetings are also held monthly usually before the M&M meetings.

We have a weekly departmental meeting on a Monday Lunchtime, which is attended by all staff including trainees and representatives from theatres (eg) ODPs.
Out-of-hours emergency service

The emergency on-call anaesthetic team consists of:

i) A CT 1/2 who provides anaesthetic cover for the acute surgical specialties.

ii) An ST3+ whose duties include the provision of medical cover for the ICU, Paediatric resuscitation, as well as supporting the CT1/2 anaesthetist. Labour ward cover is included.

iii) On the weekend days (0800-2000) – there is a separate ‘Middle grade’ to cover the labour ward
A Consultant Generalist anaesthetist with responsibility for theatres and obstetrics.

iv) A Consultant Intensivist is on call on weekend days (0800-2000) in addition to the Consultant General Anaesthetist

Staffing:

The post-holder will work alongside the existing Consultant Anaesthetists:

Dr E A Taylor Dr A E Cooper
Dr K Ruiz Dr A Blackburn
Dr D Harling Dr J McDonough
Dr J Clark Dr H Ameen
Dr A Joshi Dr J Lee
Dr C Smith Dr M Ryan
Dr G Lynch Dr K Russon
Dr A Hartog Dr M Shekar
Dr G Thomas Dr C Kelly
Professor A Hormis Dr L Maxwell
Dr M Smith Dr A Thomas
Dr C Windsor Dr K Shuker
Dr K Nelapatla

4.11 Relationships with other Departments:

The Department serves all the major specialities appropriate to a District General Hospital, with the exception of Plastic Surgery, Vascular surgery, Cardiac, specialised Paediatric and Neurosurgery.

4.12 Accommodation

Shared office accommodation and shared secretarial support will be available within the Anaesthetic Department and Critical Care Unit.
This is an outline timetable and the detail will be discussed and agreed with the successful candidate. This is a sample timetable.

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<th>Day</th>
<th>Time</th>
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<th>DCC</th>
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<td>1345 – 1745</td>
<td>Critical Care Unit</td>
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<tr>
<td>Tuesday</td>
<td>0830 - 1230</td>
<td>Orthopaedics – Lower Limb</td>
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<td>Orthopaedics – Lower Limb</td>
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<td>X</td>
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<tr>
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<td>Lieu time – in lieu for on call</td>
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This draft timetable has been constructed in accordance with the 2003 consultant contract and is compatible with existing job plans, but open to change in accordance with colleagues’ responsibilities to ensure the delivery of a rounded service.

Subsequent job plans and timetables will be agreed annually with the Divisional Director.

(DCC = Direct Clinical Care; SPA = Supporting Professional Activities)
Indicative make up of working commitments for full time post under new consultant contract

Fixed sessions: 6 x Critical Care / Theatres

<table>
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<th>Description</th>
<th>Hours</th>
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<td>Predictable/unpredictable on call work</td>
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<td>Supporting professional activities</td>
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<td><strong>Total</strong></td>
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All SPAs are expected to take place within the Rotherham General Hospital unless agreed otherwise with the Clinical Director.

One session per alternate month is reallocated on a rolling programme throughout the Trust, to allow full participation in audit/clinical governance.
PART 4
CONDITIONS OF EMPLOYMENT

Terms and Conditions of Service
The successful appointee will be employed by the Rotherham NHS Foundation Trust subject to the National Terms and Conditions as per the Consultant Contract (England) 2003 as amended from time to time. This job description is not exhaustive and may be updated from time to time, with consultation, as the needs of the service dictate. A Joint Local Negotiating Committee is in place and any revised Terms and Conditions will be negotiated within that Committee.

Tenure
The appointment is a substantive, full or part time position which, unless terminated, will be held until retirement. The notice period is three months on either side. The appointment is subject to the provisions of Schedule 14 of the TCS.

Salary
The salary scale is that of the Consultant Grade and the current scale is £76,761 rising to £103,490 per annum (2017/18 rates) for 10 programmed activities per week. Any agreed extra programmed activities and on-call requirement will be paid in addition to the basic salary.

Pay progression will be on the anniversary of appointment and is subject to satisfactory participation in annual appraisal, the completion of a job plan review and agreed personal objectives as set out in Schedule 15 of the TCS.

Starting salary will be determined according to the TCS. Where a candidate has service, in or outside the NHS, which s/he feels should be taken into account in determining the starting salary, this will be considered following the offer of appointment.

Annual Leave
The annual leave entitlement is 32 working days per annum rising to 34 days on completion of 7 years consultant service. In addition, there is an entitlement to 8 days Public Holiday per annum. Personal leave year will run from commencement date. At least six weeks’ notice is required before taking annual leave.

Study Leave
Study Leave entitlement is at the rate of 30 days over a 3-year period. At least six weeks’ notice is required before taking study leave.

Superannuation
This post is superannuable under the NHS Pension Scheme for the main contract only. Additional Programmed Activities are not superannuable.
**Registration**
Candidates must have full registration and a licence to practise with the GMC for the duration of the appointment. In addition, you are required to appear on the Specialist Register or be within 6 months of the award of CCT at time of interview.

**Residence**
The post-holder will reside within a distance of 30 minutes or ten miles by road from their designated base hospital and will ensure clear arrangements are in place to be contacted immediately when on call.

**Travelling Expenses**
Travelling expenses are paid in accordance with the TCS.

Potential applicants wishing to visit the Trust will be reimbursed for two preliminary visits (one informal visit prior to application and one for the formal visit before interview) plus actual interview expenses. **If a post is offered and subsequently refused, expenses will not be reimbursed.**

Interviewed candidates travelling from outside the UK (this includes Eire) will be entitled to travelling and subsistence expenses but only in respect of the journey from the point of entry in the UK to the interview location.

**Accommodation & Removal Expenses**
The post is non-residential. The Trust has secure accommodation available, although there may be a waiting list, with rooms and family homes available.

Relocation and / or removal expenses are paid in accordance with the Trust’s Policy on Relocation Expenses.

Interview accommodation is available on request.

**Car Parking**
Car parking is available and it is the condition of employment that all employees who use these facilities purchase a car permit and pay the required fee.

**Pre-employment checks, in line with NHS Employers Pre-employment checking standards (including right to work, verification of identity, disclosure and barring, references and health screening) must carried out by the Trust and to the satisfaction of the Trust before the Trust will confirm an offer of employment.**
Confidentiality
The Trust is fully committed to encouraging its staff to freely contribute views on all aspects of health service activities, especially those on delivery of care and services to patients. However, you shall not, either during or after the end of your employment (however it is terminated), divulge to any unauthorised person confidential information relating to the Trust. This includes, but is not limited to, information covering patients, individual staff records, industrial relations, financial affairs, contract terms and prices or business forecasts.

Your obligations of confidentiality under this clause shall not prevent you from raising genuine concerns about healthcare, or a belief that criminal conduct, breach of a legal obligation, health and safety breaches or damage to the environment has been, is being, or is likely to be committed, or any information tending to show any of the above has been, is being, or is likely to be, deliberately concealed, provided that such disclosure is made in good faith and in accordance with the provisions of the Public Interest Disclosure Act 1998 and the Trust's Policy on Raising Concerns - Whistle Blowing Policy, a copy of which is available from the Human Resources Department or the Intranet.

Private Practice
All Consultants employed by the Trust are required to comply with the arrangements for undertaking Private Professional Services and the Code of Conduct for Private Practice.
Further information and visiting the Trust

The Trust welcomes applicants who wish to seek further information or visit. Please contact the following to arrange a visit or for an informal discussion:

**Dr Amar Joshi**
Clinical Lead in Anaesthesia & Critical Care: 01709 427808

**Dr David Harling**
Clinical Lead for Critical Care: 01709 427841

**Professor Anil Hormis**
Service Organiser: 01709 428334

**Dr Conrad Wareham**
Medical Director: 01709 424500

**Louise Barnett**
Chief Executive: 01709 424576

Application

Candidates should complete the required application form on NHS Jobs; further information on the recruitment and interview process can be obtained from:

**Chelsea Goodwin, Medical Workforce Advisor**
Medical Workforce
Rotherham Hospital
Moorgate Road
Rotherham, S60 2UD

Telephone: 01709 426552

You are requested to provide details of 3 referees, one of which must be your current or most recent Responsible Officer or Medical Director. References will be taken up if you are shortlisted for interview unless you have specified otherwise.
## PERSON SPECIFICATION

### REQUIREMENTS

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<th>REQUIREMENTS</th>
<th>ESSENTIAL</th>
<th>DESIRABLE</th>
<th>METHOD OF ASSESSMENT</th>
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<tr>
<td><strong>Educational Qualifications</strong></td>
<td><strong>MBChB or equivalent</strong>&lt;br&gt;Full registration and a licence to practise with the GMC&lt;br&gt;On the GMC Specialist Register or within 6 months of CCT from the date of interview&lt;br&gt;Hold FRCA or equivalent</td>
<td><strong>FICM / European Diploma in Intensive Care (EDIC)</strong>&lt;br&gt;<strong>FICE accreditation</strong>&lt;br&gt;<strong>Higher Medical Degree</strong></td>
<td><strong>CV</strong></td>
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<td><strong>Experience</strong></td>
<td><strong>Satisfactory completion of ARCP process or equivalence.</strong></td>
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<td><strong>CV/Interview</strong></td>
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<td><strong>Subspecialty training – Advanced ICM training or equivalent</strong></td>
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<td><strong>Ability/skills</strong></td>
<td><strong>Further experience in specialist areas pertinent to post applied for. Some knowledge of the utilisation of IT in clinical practice</strong></td>
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<td><strong>CV/Interview</strong></td>
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<td><strong>Research and Audit</strong></td>
<td><strong>Trained in research methodology. Committed to evidence based practice.</strong></td>
<td><strong>Evidence of audit and the implementation of change following the audit</strong></td>
<td><strong>CV</strong>&lt;br&gt;<strong>Interview</strong></td>
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<td><strong>Relevant research published in peer review journal</strong></td>
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<td><strong>Education and Teaching</strong></td>
<td><strong>Demonstrates a commitment to the delivery of high quality teaching and training to junior colleagues and multidisciplinary team</strong></td>
<td><strong>A qualification in teaching or instructor status relevant to anaesthesia e.g. ATLS, APLS</strong></td>
<td><strong>CV</strong>&lt;br&gt;<strong>Presentation/Interview</strong></td>
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<td><strong>Management Skills</strong></td>
<td><strong>Demonstrate effective team working skills</strong></td>
<td><strong>Ability to consolidate and organise change.</strong></td>
<td><strong>Interview</strong></td>
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<td><strong>Time management/organisational ability. An example may be they have developed and run training programmes.</strong></td>
<td><strong>Knowledge of the implementation of Clinical Governance within the directorate.</strong></td>
<td><strong>CV/Interview</strong></td>
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<td><strong>Proven knowledge of systems and process of NHS or equivalent</strong></td>
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<td><strong>Sense of understanding and commitment to corporate</strong></td>
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JD – Cons in Anaesthesia with a special interest in Critical Care Medicine
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<td></td>
<td>responsibility</td>
<td>Familiarity with issues of service</td>
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| Leadership* | An understanding of and ability to demonstrate your ability to:  
• Empower others  
• Lead through change  
• Influence strategically  
• Collaborative working  
• Drive for improvement  
• Integrity | | Interview / Application |
| Other | Demonstrate innovation and problem solving abilities  
Clear, fluent and articulate in verbal and written presentation | IT skills | CV/Interview |

*Leadership Definitions*

- Empowering others – striving to facilitate others’ contributions and to share leadership, nurturing capability and long-term development of others

- Leading change through people – communicate the vision and rationale for change and modernisation, and engaging and facilitating others to work collaboratively to achieve real change.

- Effective and strategic influencing – being able and prepared to adopt a number of ways to gain support and influence diverse parties, with the aim of securing health improvements

- Collaborative Working – being committed to working and engaging constructively with internal and external stakeholders.

- Drive for improvement – a deep motivation to improve performance in the health service and thereby to make a real difference to others’ health and quality of life.

- Political astuteness – showing commitment and ability to understand diverse interest groups and power bases within organisations and the wider community, and the dynamic between them, so as to lead health services more effectively.

- Personal Integrity – a strongly held sense of commitment to openness, honesty, inclusiveness and high standards in undertaking the leadership role.