Job Title: CONSULTANT IN NEUROLOGY WITH A SPECIALIST INTEREST MULTIPLE SCLEROSIS

Location: Leicester General and Leicester Royal Infirmary Site within University Hospitals of Leicester NHS Trust (This may change as a result of service reconfiguration)

Accountable to: CMG CLINICAL DIRECTOR

Responsible to: Head of Service

ABOUT UHL, OUR VALUES AND BEHAVIOURS

UHL’s **purpose** is to deliver “Caring at its best” for all the people who visit Leicester’s hospitals, either as patients, the public or as staff.

As one of the largest and busiest teaching hospitals, our **vision** is to move from where we are now to where we want to be, locally known as the journey from ‘**Good to Great**’.

In undertaking this role you are expected at all times to behave in accordance with our **Trust values** which demonstrate your commitment to the delivery of high quality services to patients. This will be in accordance with agreed objectives, targets, quality standards, controls and resource constraints.

Our **values** are:

1. **We treat** people how we would like to be treated
2. **We do** what we say we are going to do
3. **We focus** on what matters most
4. **We are one team** and we are best when we work together
5. **We are passionate and creative** in our work
BACKGROUND

This post is designed to build close working relationships between the neurology department and the speciality services within UHL, including emergency services. The successful applicant will have the opportunity to work clinically both on the neurology ward as part of their direct patient care and in the acute setting particularly when on call, working with the teams to ensure neurology patients are seen in a timely manner and have access to specialist neurological opinion.

The successful applicant will be expected to develop special interest clinics in Multiple Sclerosis, to complement those of currently provided, which are Parkinson’s disease, Neuro-Ophthalmology, Neuromuscular disease, headaches, and Epilepsy. Other specialist services include dystonia (botulinum treatment), neurological rehabilitation, and neuro-otology.

Full secretarial support will be provided and the Consultant will share equally with colleagues in the training of the junior staff. The post will involve a commitment to undergraduate teaching and the appointee will be expected to participate in the audit and research activities of the Department.

PRINCIPAL ELEMENTS OF THE POST WILL BE:-

- Supervise and train junior medical staff
- Have shared responsibility for the neurology in-patient beds, including acute neurology referrals, (and whilst on call providing cover for the brain injury unit and younger disabled unit)
- Teaching and administration
- Develop the acute neurology service together with the acute general physicians on AMU
- To support the placement of students in the department and act as a clinical teacher
- To facilitate delivery of undergraduate teaching as directed by the departmental education lead
- To volunteer and act as an examiner at undergraduate professional examinations (IPE and Finals)
APPOINTMENT

The appointment will be whole time. Any Consultant, who is unable for personal reasons to work whole time, will be eligible to be considered for the post. If such a person is appointed modification of the job content will be discussed on a personal basis in consultation with consultant colleagues.

There is a mentorship scheme for all new consultant staff, this is designed to help and assist new appointees to settle into working at UHL as easily as possible. It is designed to assist individuals in a personal way to familiarise them with the Trust and how things work in practice.

The Trust also has the required arrangements in place, as laid down by the Royal College of Physicians, to ensure that all doctors have an annual appraisal with a trained appraiser and supports doctors going through the revalidation process.

WORK PROGRAMME

Outline Job Plan

<table>
<thead>
<tr>
<th>Activity</th>
<th>PAs</th>
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<tbody>
<tr>
<td>Urgent and Routine Neurology Clinics</td>
<td>2.0</td>
</tr>
<tr>
<td>Acute on-call (1:7 weeks) and ward work</td>
<td>2.0</td>
</tr>
<tr>
<td>Specialty Interest Clinics</td>
<td>2.0</td>
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<tr>
<td>Patient Administration</td>
<td>1.0</td>
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<tr>
<td>Virtual Clinic</td>
<td>1.0</td>
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<tr>
<td><strong>Total Clinical PAs</strong></td>
<td><strong>8.0</strong></td>
</tr>
<tr>
<td>Supporting PAs (CPD, audit, mandatory training)</td>
<td>1.5</td>
</tr>
<tr>
<td>SPA for undergraduate teaching</td>
<td>0.5</td>
</tr>
<tr>
<td><strong>TOTAL PROGRAMMED ACTIVITIES</strong></td>
<td><strong>10.0</strong></td>
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</tbody>
</table>

JOB PLAN (provisional)

The job plan will be subject to annual review, with any revisions sought by mutual agreement but it is expected that the successful candidate will work with the CBU management team to ensure that services are delivered efficiently and reflect best practice with processes and governance to match - this may require new and flexible ways of working in the future.
The Neurology Department has inpatient, day case and outpatient activity. In terms of inpatient work neurology patients are admitted both electively and non-electively to Ward 24 at the Leicester Royal Infirmary. This is a mixed speciality ward and generally there are approximately 15 neurology in-patients at any one time. Each consultant has a PA for inpatient work and are expected to review their named patients either as sub-specialty patients or admitted as new patients whilst the consultant is on call.

Outpatient activity will be general neurology related and there will be an expectation that the post holder will take on sub-specialty work. The annual plan activity for the whole Service for new patients is 5479 and 11042 for follow up patients. There is also some non-face to face activity work and the department encourages virtual clinic work. The planned activity for the department is 2601 annually.

Sub-specialty day case activity is performed on Ward 1 at the Leicester General Hospital. This comprises of high dose therapy work, planned procedures and nurse led activity.

**Supporting Professional Activities**

1.5 PAs are allocated as a minimum to all consultants for SPA in order to support the requirements of revalidation, which include activities such as participating in audit, CPD and mandatory training.

It is expected that the post holder will become a Clinical teacher. In addition to the standard 1.5 SPAs the clinical teacher role is supported by 0.5 SPA to support two hours of undergraduate teaching time per week. This teaching can occur in different settings. The clinical teacher will be expected to show evidence of satisfactory performance in this role at appraisal.

**Principal Elements (include in list)**

- To support the placement of students in the department and act as a clinical teacher.
- To facilitate delivery of undergraduate teaching as directed by the departmental education lead.
- To volunteer and act as an examiner at undergraduate professional examinations (IPE and Finals)
Programmed Activities

The appointee will participate in a 1 in 7 on call rota covering all the UHL units in conjunction with the other consultants. The appointee is expected to be able to return to UHL at short notice when on call. There is no time off in lieu for on call duties, except when called in out of hours on Bank Holidays.

The on call will have both predictable and non-predictable elements within it.

The job plan comprises 10 PA’s (Basic Contract), with the opportunity for the post holder to contract for additional PAs on a temporary basis by discussion and mutual agreement up to the maximum level consistent with the Working Time Regulations (i.e. 12 PA’s).

OTHER DUTIES

The successful candidate will be required to undertake managerial duties associated with the care of their patients and the running of their Clinical Department. They will have an understanding of the wider health agenda and modern NHS.

The successful candidate will be required to work in a multidisciplinary team and supervise juniors.

Adequate office space and secretarial support will be made available.

THE NEUROLOGY DEPARTMENT

Neurology out-patients and administration are based at the Leicester General Hospital which is now part of the University Hospitals of Leicester. The Neurology beds are based on ward 24 at Leicester Royal Infirmary. There is also a 9 bedded Brain Injury Unit (BIU) and 16 bedded Neurological Rehabilitation Unit (NRU) both at Leicester General Hospital.

The Department provides a Neurological service to the population of Leicester, Leicestershire and Rutland (1,076,947). There is a major commitment to the teaching of medical undergraduates from the Leicester University Medical School.

The neurophysiology service is based predominantly at the LRI site, and provides a comprehensive set of diagnostic tests.

The department liaises clinically with Neuroradiology, and Neurophysiology. The Neurosurgical service is, at present, provided from Queen’s Medical Centre, Nottingham. There are academic teaching links with Leicester University.

MEDICAL STAFF

Consultant Neurologists:
Dr B Simpson  
Dr J Cardenas  
Dr J George  
Dr M Lawden  
Dr P Critchley  
Dr P Eames  

Consultants in Neurological Rehabilitation:

Dr R Prasad  
Dr S Vandabona, (Head of Service)

Consultants in Clinical Neurophysiology:

Dr D Farrell  
Dr A Selvi

Visiting neurosurgeons from QMC Nottingham:

Mr I Robertson  
Mr R Ashpole

**Junior Doctors**

There are 4 SpR posts in neurology, plus 1 or 2 international graduate trainees. There are also 1 FY2 post, 1 TG SHO, 1 CT and SHO, all of whom cover the three clinical areas.

**Clinical Specialist Nurses**

There are 11 CNSs:

- 3 Parkinson’s disease  
- 4 Multiple Sclerosis  
- 2 MND  
- 3 Epilepsy

We also have a Specialist Neuromuscular Care Advisor in post to support the team, Yvonne Julien.

**RESEARCH**

The department is involved in national and international clinical trials. There is scope within the Department for individuals to pursue a research interest of their choice.
University of Leicester, Neuroscience & Behaviour Research Theme
http://www2.le.ac.uk/colleges/medbiopsych/research/researchthemes/nb?searchterm=neuroscience

The Neuroscience & Behaviour Research Theme, led by Professor Ian Forsythe, provides a framework for collaborative research between basic and clinical scientists. The Theme brings together a wide range of expertise from within the College but also provides an important forum for interaction with Neuroscientists from outside the College and other Institutions. Leicester has particular strengths in fundamental neuroscience and receives substantial funding from UK Research Councils, the EU and numerous charitable foundations. Strengths include synaptic transmission, learning and memory, stress and anxiety pain, auditory physiology, circadian rhythms and behavioural neuroscience. Interests in the development and application of genetic models of neurodegenerative conditions are complemented with clinical expertise in these areas.

The University of Leicester hosts the Trent Local Research Network, part of the National Institute of Health Research Stroke Research Network with responsibility for the coordination, delivery and management of the NIHR Research Portfolio in stroke in South Yorkshire, Nottinghamshire, Derbyshire, Lincolnshire, Leicestershire, Northampton-shire, Rutland, Norfolk, Suffolk and Cambridgeshire. Strokes are currently the most common neurological condition in terms of mortality and long-term disability in the United Kingdom. The Stroke Medicine Research Group, led by Professor Tom Robinson, has significant experience in the coordination of multi-centre acute stroke trials, the Continue Or Stop post-Stroke Antihypertensive Collaborative Study (COSSACS) and the Controlling Hypertension and Hypotension Immediately Post-Stroke trial (CHHIPS), both recently published in the Lancet Neurology, and is also involved in the implementation of clinical evidence through the stroke projects contained within the Collaboration for Leadership in Applied Health Research & Care for Leicestershire, Northamptonshire and Rutland. In addition there are a number of other ongoing research projects in acute and prevention stroke medicine.

Education: Teaching and Training

All Consultants are expected to contribute to teaching and training of undergraduate students and postgraduate trainees as part of their role as a Consultant in UHL.

Consultants will normally have undergraduate medical students placed with them during clinical duties and are expected to teach alongside clinical service work. Similarly, Consultants will normally be involved in clinical supervision of postgraduate trainees working within UHL.

Medical students based at the University of Leicester follow a standard 5 year programme, or a 4 year programme which is available to graduate students. The teaching of undergraduate students in UHL reflects the Divisional structure of the Trust. Undergraduate medical students are taught by UHL throughout the medical course from years 1 to 5. Both
ward and outpatient based clinical teaching, as well as tutorial and lecture style teaching is undertaken. Department of Neurology has 8 week blocks of students attached to it throughout the year, jointly with Care of the Elderly/Stroke.

Some Consultants will choose to take on additional undergraduate and/or postgraduate education and training responsibilities. This activity will be specific, identifiable, evidenced, recognised and appraised. Such additional teaching and training activity will be recognised within their SPA allowance.

Enhanced undergraduate duties will include acting as examiners in medical school assessments, providing occasional seminar and small group teaching, lecturing & other Phase 1 teaching within the medical curricula, in addition to individual supervision of clinical students attached to them.

Those undertaking specifically agreed undergraduate teaching duties within their SPA allowance are recommended to the University for the Conferment of the title of Clinical Teacher. Those who have an additional significant responsibility as a block or clinical education lead within their DCC time are also considered for the award of the title of honorary senior lecturer in medical education.

Enhanced postgraduate duties will include acting as an Educational supervisor for Foundation or Specialty trainee, UHL Divisional Education governance lead, Contributing to recognised postgraduate-teaching courses in UHL, e.g. Specialty Training programmes or involvement in recruitment of trainees, e.g. interviews for Specialty training, recruitment to Foundation programmes.

**College of Medicine, Biological Sciences and Psychology**

Pro-Vice-Chancellor & Head of College: Professor David Wynford-Thomas FMedSci

The College’s mission is to pursue the highest standards of research, education and training in biomedical and related subjects, and to apply this knowledge and expertise to enhance the quality of life and economic prosperity of populations, both locally and in the wider world.

Its considerable academic resources mean that it is widely recognised for the international impact of its research and the quality of its undergraduate and postgraduate teaching. This is reflected in the high proportion of academic staff regarded as international in the 2008 Research Assessment Exercise, and the consistently high ratings achieved in the National Student Survey.

This is an exciting time to join a dynamic new academic enterprise and contribute to its development. The College is creating the academic and physical environment to enable scientists and clinicians to work together across traditional boundaries to address some of the key outstanding questions in biomedical research and to engage with increasing effectiveness with commercial and public bodies.
The College brings together 10 academic departments: Biochemistry, Biology, Cancer Studies and Molecular Medicine, Cardiovascular Sciences, Cell Physiology and Pharmacology, Genetics, Health Sciences, Infection, Immunity and Inflammation, Medical and Social Care Education and Psychology; and the non-departmental Diabetes Research Centre. Valuable academic benefits derive from close collaboration with the MRC Toxicology Unit, housed in a building linked to those of the College.

Building on existing strengths, multi-disciplinary research themes have been developed to exploit synergies between basic science, clinical medicine and psychology in the College. These themes are in the fields of genome science; molecular & cellular bioscience; cancer; cardiovascular sciences; respiratory science; microbial science; neuroscience and behaviour; population science; and diabetes and metabolic medicine. A further theme is exploring the research which underpins teaching & learning. 

(http://www2.le.ac.uk/colleges/medbiopsych/research)

The College’s central provision in support of research and teaching includes a Core Biotechnology Service (covering bioinformatics, imaging technologies and protein and DNA facilities); a Central Technical Service (supporting teaching laboratories) and a Clinical Trials Unit. The University has recently opened a Central Research Facility accommodating new medical research technologies and housing in the best conditions the animals - mostly rats and mice - used for medical research.

The College has approximately 295 academic staff and 718 research, administrative and other staff, with a total of approximately 2,350 fte undergraduate students and 850 postgraduates. It has an annual turnover of £64M.

**CONDITIONS OF SERVICE**

The appointment will be made on Trust terms and conditions which presently reflect the terms and conditions of service for Consultants (England) 2003, as amended from time to time.

*Residence*

The successful candidate will be required to maintain his/her private residence in contact with the public telephone service and to reside 10 miles by road from base hospital unless specific approval for greater distance is given by the Trust.

*Medical Excellence*

The Trust is committed to providing safe and effective care for patients. To ensure this, there is an agreed procedure for medical staff that enables them to report quickly and confidentially, concerns about the conduct, performance or health of medical colleagues.
(Chief Medical Officer, December 1996). All medical staff, practising in the Trust, should
ensure that they are familiar with the procedure.

**Annual Leave**

The post-holder will be entitled to 32 days annual leave per year. After 7 years service 2
additional days are awarded.

The trust would normally require 6 weeks notice for leave booked.

**Study Leave**

A maximum of 30 days study leave with pay and expenses can be taken over a three year
period, or ten days each year.

**Relocation**

Where applicable, removal expenses will be paid to the successful candidate in accordance
with the trust policy. It is advised that you seek advice before making any commitments.

**Notice Period**

The employment is subject to three months notice on either side, subject to the provisions

**Disclosure and Barring Service Clearance (formerly known as the Criminal Records
Bureau – CRB)**

This post requires an enhanced disclosure by the Disclosure and Barring Service (DBS) as
it is regulated by statute. Failure to disclose details if you are currently / or in the future the
subject of police investigation / proceedings which could result in a conviction, caution, bind
over order or charges is a disciplinary matter, and may result in dismissal.

The cost of undertaking a DBS disclosure at the required level and associated processing
costs will be met by the individual.

To expedite the process the Trust will meet the initial costs of the disclosure which will be
deducted from the individuals’ salary over a three month period commencing on their first
months payment.

**Salary**

The starting salary of the appointment (exclusive of any distinction and meritorious service
award payable to you) will be the appropriate threshold on the Consultant pay scale (MC72)
ranging from £76,001 - £102,465 (or the appropriate transition scale threshold on MC51).
The starting salary is normally set at the minimum of the scale unless dual accreditation or previous consultant service rules apply.

**Infection Control**

The prevention of hospital acquired infection is a vital concern for the Trust. Infections harm patients. Infections also harm the Trust. The post holder is required to ensure, as an employee, that his/her work methods do not endanger other people or themselves.

All staff must be aware of infection prevention and control policies and guidelines, and follow them at all times. Any breach of infection control policies is a serious matter and may result in disciplinary action.

Consultant Medical staff are the clinical leaders of their team and as such have a responsibility to provide and maintain a culture of vigilance across the team through their role in supervising and educating other staff.

All Consultant Medical staff are expected to lead by example and comply fully with the Trust’s infection prevention and control policies and to challenge non-compliance when observed. Consultant Medical staff and Heads of Service have a particular role in persuading colleagues to change behaviour when this is not in line with infection control policies and procedures.

**Safeguarding**

The post holder is responsible for safeguarding the interests of children and adults who they come into contact with during their work. To fulfil these duties post holders are required to attend training and development to recognise the signs and symptoms of abuse or individuals at risk, to follow local and national policy relating a safeguarding practice and to report and act on concerns that they may have.

**Health and Safety**

The University Hospitals of Leicester NHS Trust recognises its duties under the Health and Safety at Work Act 1974 to ensure, as far as is reasonably practicable, the health, safety and welfare at work of all its employees and, in addition, the business of the Trust shall be conducted so as to ensure that patients, their relatives, contractors, voluntary workers, visitors and members of the public having access to hospital premises and facilities are not exposed to risk to their health and safety.

The duties of this post may require the post-holder to carry out exposure prone invasive procedures on patients of the University Hospitals of Leicester NHS Trust. In order to protect its patients from acquiring blood borne viral infections from staff the Trust requires that the following conditions be met before appointment to the post is made:
1. The candidate must provide acceptable documentary evidence to the Occupational Health Service as part of pre-employment screening of non-infectivity and/or immunity to Hepatitis B infection and non-infectivity with Hepatitis C if appropriate. If the candidate is non-immune to Hepatitis B the University Hospitals of Leicester NHS Trust will require a blood test to be carried out for Hepatitis B markers before appointment. The duties of this post are such that no candidate with positive blood borne viral infectious markers in accordance with the latest DOH/GMC guidelines could be appointed.

2. Any appointee who is not immune to Hepatitis B, but is currently carrying out exposure prone invasive procedures, accepts that regular checks on Hepatitis B markers may need to be carried out by the Occupational Health Service appointed by the University Hospitals of Leicester NHS Trust.

The tests can be arranged, if the candidate agrees, in confidence through a local consultant microbiologist or the occupational health physician. All costs for testing will be borne by the University Hospitals of Leicester NHS Trust.

**VISITING**

Candidates are invited to visit the hospitals concerned and may make arrangements to do so.

For further information and for an informal discussion please contact: Dr M Lawden, Head of Service, on **0116 258 4698**.