Consultant Post Application Information Pack

Consultant Trauma & Orthopaedic Surgeon with an interest in low limb surgery

Post Reference **185-336-1927**

Contents

Applications are invited for a consultant post in trauma & orthopaedics at North Devon District Hospital, Royal Devon University Healthcare Foundation Trust. Details of the posts and descriptions of the department & Trust are included in this information pack as follows:

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Application & Advisory Appointments Committee

We welcome enquiries for further information and encourage informal visits to the hospital and department. A list of contacts at the Trust is detailed in the final section of this information pack. However, please note that canvassing of any member of the Advisory Appointments Committee (AAC) will disqualify the applicant from appointment (Statutory Instrument 1982 No 276 paragraph 8.1.b).

The post is offered on a whole-time basis (10PA) but suitably-qualified applicants who are unable to work full-time for personal reasons will be considered. The Trust is committed to flexible working arrangements, including job sharing. Such arrangements will be discussed with any shortlisted candidates on a personal basis.

Applicants must have completed specialist training in Trauma & Orthopaedic Surgery prior to taking up this appointment. The expected date of the award of the Certificate of Completion of Training must be no later than six months after the date of AAC interview for this post. The applicant must also be entered on, or within six months of entry to, the GMC Specialist Register at the time of acceptance of an offer of employment.

Applications are though the NHS Jobs online service at. Please apply using the standard online application form at this site [www.careers.royaldevon.nhs.uk](http://www.careers.royaldevon.nhs.uk) quoting vacancy reference 185-336-1927. In the interests of equal opportunities, applications or supplementary information submitted by CV will not be accepted. A minimum of three recent references are required, including a satisfactory reference from your current employer or the Responsible Officer at your current Designated Body.

The provisional date for the AAC interviews is TBC.

# Introduction

We have an exciting opportunity for a consultant in trauma & orthopaedics, with a special interest in lower limb surgery, to compliment the current department surgery at North Devon District Hospital.

We are looking to expand consultant colleagues, we have taken the opportunity to restructure our department to provide ring fenced time for leadership roles, whilst maintaining a one in eight consultant trauma roster. The department is wishes to facilitate a colleague to continue the development of the range of orthopaedic services provided in North Devon, particularly in lower limb surgery. We plan to use our remaining vacancy to strengthen the department, whilst working closely with our colleagues in Eastern services to continue the development of the South West Ambulatory Orthopaedic Centre (SWAOC) at the Nightingale hospital Exeter.

The successful applicant will provide comprehensive trauma & orthopaedic surgery services in North Devon, supported by experienced SAS surgeons, Specialty Registrars, junior medical staff and skilled nursing & therapy teams. You will join a team of eight other consultant surgeons who provide a broad spectrum of expertise in orthopaedics, including complex hip arthroplasty, foot & ankle surgery, knee surgery, hand surgery, shoulder & elbow surgery and spinal services. You will be expected to develop your subspecialty interest surgery and to provide a general orthopaedic trauma service.

Outpatient clinics take place in a recently refurbished department at North Devon District Hospital and at several community hospitals in the area. There is excellent imaging support. Operating sessions are in two laminar flow theatres and a dedicated day surgery unit. We have consistently excellent performance for day surgery rates.

The department has Specialty Registrars, Core Surgical Trainees and Foundation Doctors, rotating within their respective Peninsula Training Programmes. There are ample opportunities for teaching and training throughout the Trust and the region. The Trust encourages involvement with research and national clinical audit.

The posts are based at North Devon District Hospital, part of Royal Devon University Healthcare Foundation NHS Trust (RDUH), with some clinical sessions provided at peripheral community sites. RDUH is a unique organisation with integrated acute and community services across North and East Devon. The acute hospital, North Devon District Hospital (NDDH) provides a full complement of secondary care services for the local population, including emergency care, cancer services, maternity and paediatric services. It is a designated Trauma Unit and Cancer Unit.

North Devon provides a beautiful environment in which to live and work, with a wide variety of outdoor and cultural activities and excellent local schools. With National Parks and Areas of Outstanding Natural Beauty on the doorstep, the area offers an excellent quality of life.

# Job Description

## Post Title

Consultant Trauma & Orthopaedic Surgeon with a subspecialty interest in lower limb surgery.

## Clinical Commitments

Clinical activity includes outpatient clinics, inpatient and day surgery operating sessions, ward rounds and on call duties.

### Outpatients

There are regular orthopaedic outpatient clinics at North Devon District Hospital and peripheral clinics are also scheduled. The number of peripheral clinics is specified in the attached timetables and will not exceed alternative weeks. Travel time is included as direct clinical care (DCC). Whilst off-site, clinical cover for inpatients is provided by the on-call consultant. There are daily new patient fracture clinics during the trauma week and follow-up fracture clinics in the remaining weeks.

### Operating Lists

Inpatient and day surgery operating lists are scheduled as detailed in the attached timetable. Orthopaedics have all day lists available both in laminar flow environment and day surgery at NDDH. We also have access to a weekly all day theatre at SWAOC. Sessions include time to see patients pre- and post-operatively and appropriate time for ward rounds of inpatients is added. Appropriate travel time to SWAOC will also be include within the job plan. There are trauma lists each weekday during the trauma week. In addition, one quarter of a programmed activity is built into each job plan as flexible time, equivalent to eight operating lists per year to be performed at mutually convenient times.

**MDTs**

Dependant on the successful applicants chosen sub speciality interest, appropriate local and regional MDT’s will form part of the job pan.

### On Call Rota

Consultants share the on-call rota, on a 1 in 8 basis with prospective cover included in the job plan. The emergency work is arranged as a “hot” trauma week during which, the consultant has only emergency duties, including ward rounds, new patient fracture clinics and trauma lists. The timetable is arranged to facilitate compliance with the standards for Seven Day Services. The consultant is supported by SAS surgeons or Specialty Registrars and junior medical staff. The trauma week is followed by a non-clinical week.

### Emergency Calls

In exceptional circumstances, the Trust may request emergency cover for colleagues. However, the Trust recognises that there is no contractual expectation of availability when a consultant has no scheduled duties.

### Clinical Administration

You will undertake administrative work associated with your clinical and other professional work. Adequate time and facilities for clinical administration, including appropriate office space, secretarial support and access to a personal computer, software & internet access, will be available.

## Supporting Professional Activities

You will be expected to participate in a variety of professional activities (SPA) to support your personal clinical practice and the overall work of the department and Trust. All consultants receive 1.5 SPA sessions for generic non-clinical work that is expected of most consultants. This includes, but is not limited to:

* Appraisal, job planning & revalidation
* Personal & professional development, including service development
* Professional administration, including related correspondence
* Clinical supervision of junior staff and other educational activities
* Governance and quality improvement activities
* Departmental & divisional meetings and other clinical or managerial meetings

New consultants receive a further 0.5 SPA sessions for up to one year to facilitate their induction to the organisation, with a reciprocal reduction in DCC. This will be reviewed after six months with the possibility of a six month extension, following which it will revert to 1.5 PAs.

The Trust may make up to one additional SPA session available by mutual agreement if the consultant takes on additional, non-generic SPA work. The expectation is that such work will be aligned across the whole team.

Non-generic SPA work may include:

* Service development
* Clinical management
* Research
* Additional teaching & training activities, including educational supervision
* Additional governance activities such as acting as an appraiser or mentor
* National audit programme projects.

Further details are published in the job planning policy.

## Relationships

You will work closely with other medical staff, allied health professionals and non-clinical colleagues both within the department and in other specialties. In particular, you will be expected to develop working relationships with clinical colleagues within surgery, radiology, theatres, anaesthetics and therapies.

We encourage development of regional networks with other providers and links with the arthroplasty services at the Royal Devon & Exeter Hospital. It is expected that the successful applicant will work within the established network and local commissioning guidance.

# Outline Job Plan

A provisional outline job plan is below but is subject to modification. The individual job plan and detailed timetable will be discussed with the successful candidate. Special interests will be accommodated unless this is incompatible with service requirements. It is expected that the initial job plan will be agreed within three months of the start date and will be reviewed annually or earlier, if necessary.

**PAs**

**DCC**

Predictable & unpredictable on-call work 1.00

Weekday emergency work, including scheduled trauma lists 1.90

Routine outpatient clinics 1.00

Elective operating lists including flexible time (max 0.25PA) 2.10

Flexible ward rounds 0.13

Trauma MDT + sub specialty MDT 0.30

Administration 1.50

Travel 0.07

**SPA**

Generic 1.50

Non-generic 0.50

**Total 10.00**

## Provisional Timetables

Timetables are on an eight week cycle to accommodate the emergency working pattern.

The emergency work is timetabled to accommodate the requirements of the national Seven Day Services standards including face to face review of all new admissions within 14 hours. Consultant “on-call days” include time for morning & evening ward rounds, ward reviews, supervising trauma lists and new patient fracture clinics; plus clinical administration time. PA allocations for the scheduled emergency work and the predictable/ unpredictable on-call work include an appropriate amount for internal prospective cover.

As detailed above, a small amount of flexible time is included in the job plans but not timetabled. Time is allocated for attendance at MDTs and network meetings.

The Friday morning departmental meetings are a combination of an emergency trauma & orthopaedic MDT and generic SPA work, including clinical management, governance and CPD activities.

All SPA time (generic & non-generic) is timetabled for clarity. It is accepted that, on occasion, SPA work may need to be time-shifted to accommodate other commitments.

### Sample Timetable

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Week** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** |
| **1** | Consultant On Call Day 08.00-19.00 | Consultant On Call Day 08.00-19.00 | Consultant On Call Day 08.00-19.00 | Consultant On Call Day 08.00-19.00 | Friday Handover 08.00-15.00 |
| Generic SPA 15.00-18.00 |
| **2** | Off | Off | Off | Off | Off |
|
| **3** | Generic SPA 09.00-13.00 | Theatre NDDH 08.00-18.00 |  | DCC Admin 09.00-13.30 | Meeting 09.00-13.00 |
| Specified SPA 13.00-16.00 | Fracture Clinic 09.00-12.30 | DCC Admin  13.00-16.00 | Theatre  13.00-18.00 |
| **4** | Generic SPA 09.00-13.00 |  | Theatre SWAOC 0630-1930 | DCC Admin 09.00-13.00 | Meeting 09.00-13.00 |
| Specified SPA 13.00-15.30 | Bideford Clinic 13.30-17.00 | DCC Admin 13.00-16.00 |
| **5** | Generic SPA 09.00-13.00 | Theatre NDDH 08.00-18.00 |  | DCC Admin 09.00-13.30 | Meeting 09.00-13.00 |
| Specified SPA 13.00-15.30 | Fracture Clinic 09.00-12.30 |  | DCC Admin 13.00-16.00 |
| **6** | Generic SPA 09.00-13.00 |  | Outpatients 13.30-17.00 | DCC Admin 09.00-13.30 | Meeting 09.00-13.00 |
| Specified SPA 13.00-16.00 |  | Fracture Clinic 09.00-12.30 |  | DCC Admin 13.00-16.00 |
| **7** | Generic SPA 09.00-13.00 | Theatre NDDH 08.00-18.00 |  | DCC Admin 09.00-13.30 | Meeting 09.00-13.00 |
| Specified SPA 13.00-15.30 | Fracture Clinic 09.00-12.30 | DCC Admin  09.00-13.00 | Theatre  13.00-18.00 |
| **8** | Generic SPA 09.00-13.00 | Theatre NDDH 08.00-18.00 | Outpatients 13.30-17.00 | DCC Admin 09.00-13.00 | Consultant On Call Friday 08.00-19.00 |
| Specified SPA 13.00-15.30 |  | Bideford Clinic 13.30-17.00 |

# Person Specification

Applicants must demonstrate on the application form that they fulfil all essential criteria to be considered for shortlisting. Appointment is subject to pre-employment checks, including occupational health, police checks and a minimum of three satisfactory references, including one from your current Responsible Officer.

|  |  |  |
| --- | --- | --- |
| **Requirement** | **Essential Attributes** | **Desirable Attributes** |
| **Qualifications & Training** | | |
| **Professional Qualifications** | Primary Medical Qualification (MBBS or equivalent).  An appropriate higher Trauma and Orthopaedic surgical qualification. | Distinctions, Prizes, Scholarships.  Additional postgraduate qualifications. |
| **Professional Training & Memberships** | Full GMC registration & licence to practice.  Entry on the GMC Specialist Register in Trauma & Orthopaedics via:   * CCT or CESR (CP). Proposed CCT/CESR (CP) date must be within 6 months of interview * CESR or * European Community Rights   Must be on the Specialist Register by the time of commencement in post. |  |
| **Clinical Experience** | | |
| **Employment** | Evidence of completion of a comprehensive broad-based, orthopaedic surgical training programme at Specialty Registrar level or equivalent.  or  Clear demonstration of equivalent experience, with a minimum of six years at a level comparable with or senior to Specialty Registrar.  Evidence of training in general orthopaedic trauma and subspecialty interest (lower limb).  Career progression consistent with personal circumstances. | Specialist fellowship in lower limb surgery. |
| **Clinical Knowledge and Skills** | Demonstrates ability to fulfil comprehensive general trauma & orthopaedic surgery duties at consultant level. Able to take full and independent responsibility for clinical care of patients and provide an expert clinical opinion on a range of problems.  Demonstrates a clear, logical approach to clinical problems and an appropriate level of clinical knowledge. Able to prioritise clinical need.  Portfolio of practical clinical experience, including evidence of ability to perform all common trauma and subspecialty surgery.  Caring approach to patients. | Demonstrates awareness of breadth of clinical issues.  Clinical feedback from colleagues and patients. |

|  |  |  |
| --- | --- | --- |
| **Requirement** | **Essential Attributes** | **Desirable Attributes** |
| **Non-Clinical Skills** | | |
| **Teaching** | Evidence of previous teaching & training experience.  Willingness & ability to contribute to departmental & Trust teaching programmes. | Defined educational roles or qualifications.  Evidence of teaching of undergraduates, junior doctors and multi-professional groups. |
| **Management of Change & Quality Improvement** | Demonstrates clear understanding of quality improvement and clinical governance within the NHS.  Demonstrates willingness to implement evidence-based practice.  Evidence of effective personal contributions to clinical audit, governance and risk reduction. | Evidence of innovative development & implementation of guidance.  Evidence of involving patients in practice. |
| **Innovation, Research, Publications & Presentations** | Understanding of the principles of scientific method and interpretation of medical literature. Demonstrates a critical and enquiring approach to knowledge acquisition.  Demonstrates understanding of the research governance framework. | Recent evidence of relevant research, presentations or publications. |
| **Management & Leadership Experience** | Demonstrates familiarity with and understanding of NHS structures, management and current political issues, including an awareness of national strategic plans and constraints.  Demonstrates willingness to lead clinical teams and develop an effective specialist clinical service. | Experience of formal leadership roles or training. |
| **Communication & Personal Skills** | Good spoken & written English language skills.  Communicates effectively with patients, relatives, colleagues, GPs, nurses, AHPs and outside agencies.  Ability to work with multi-professional teams and to establish good professional relationships. | Evidence of patient & colleague feedback.  Excellent presentation skills; engaging audience.  Information technology skills. |
| **Other Requirements** | | |
| **Motivation & management of personal practice** | Punctual & reliable.  Good personal organisational & prioritisation skills. Achieves deadlines.  Takes responsibility for personal practice and is able to cope well with stressful situations.  Commitment to continuing medical education.  Flexible & adaptable attitude. | Demonstrates initiative in personal practice.  Willingness to undertake additional professional responsibilities at local, regional or national levels. |
| **Commitment to post** | Demonstrates enthusiasm for North Devon as a place to live and work. |  |

# The Trauma & Orthopaedic Department

## Staffing

The orthopaedic department at North Devon District Hospital is staffed by:

* eight consultant surgeons:
  + Mr W Griffiths-Jones (Lead Clinician) Knee Surgery
  + Mr C Steinlechner Upper limb surgery
  + Mr A Temple Complex & revision hip arthroplasty
  + Miss C Baldwick Upper limb surgery
  + Mr N Jagodzinski Hand & wrist surgery
  + Mr L Brunton Complex & revision hip arthroplasty
  + Mr R Cove Knee and foot & ankle surgery
  + Mr Steven Smith Spinal surgery
  + Vacancy
* seven Associate Specialist surgeons
* two Specialty Registrars
* one Core Surgical Trainee, three Foundation Year 2 doctors and four Trust doctors
* two Foundation Year 1 doctors
* two physician’s associate
* one trainee advanced care practitioner

In addition to medical staff, the team includes an experienced team of nurses led by our Ward Managers, Mrs Emma Mock (Glossop) & Mrs Julie Pragnell (Jubilee) along with experienced therapy team and skilled plaster room practitioners, led by Mrs Heather Courtness. There is excellent secretarial support.

## Management

Day to day managerial & operational links are with the Lead Clinician, Mr W Griffiths- Jones and the Interim Service Manager Mrs Jo Avery.

## Departmental Workload

The emergency workload varies a little throughout the year, being busier in the summer months. Overall there has been a small but steady increase over the last few years. Elective workload has remained relatively stable.

### Emergency Work

New Outpatients 4,067

Follow-up Outpatients 6,018

Emergency Inpatients 1,739

### Elective

New Outpatients 2,877

Follow-up Outpatients 4,736

Elective Inpatients 1,028

Elective Day Cases 1,268

## Resources

### Inpatient Facilities

Trauma & orthopaedic inpatients are currently accommodated on the orthopaedic unit, spread across Jubilee ward, ring fenced elective orthopaedics and Glossop Ward, dedicated orthopaedic trauma ward. There is a six-bedded intensive care unit with two additional high-dependency beds. Caroline Thorpe ward is the children’s ward, with day, inpatient and high dependency facilities.

Operating sessions take place in the main theatre suite, in a laminar flow environment, and in the dedicated Day Surgery Unit.

### Outpatient Facilities

There are new outpatient clinic rooms at North Devon District Hospital and we also provide clinics at a number of community hospital sites, including:

* Bideford Hospital
* Stratton Hospital

# Main Conditions of Service

Appointment is to the NHS Consultant Contract (2003) under the current Terms & Conditions of Service for Hospital Medical & Dental Staff (England & Wales) and the Conditions of Service determined by the General Whitley Council for the Health Services (Great Britain). These are nationally agreed and may be amended or modified from time to time by either national agreement or local negotiation with the BMA local negotiating committee.

The employer is Royal Devon University Healthcare Foundation Trust. The appointee will be professionally accountable to the Medical Director and managerially accountable to the Chief Executive.

The post-holder is required to have full registration with a licence to practice with the General Medical Council and to ensure that such registration is maintained for the duration of the appointment.

### Salary Scale

This is as described in the Medical & Dental Terms and Conditions, in line with the Consultant Contract 2003. The current scale is from £88,364 to £119,133 with 8 thresholds.

The on call supplement is Category A and attracts a supplement of 5% of basic salary.

### Leave

Annual leave entitlement is as described in Schedule 18 of the Terms and Conditions of Service Consultant (England) 2003. Study leave entitlement is 33 days over a fixed three year period.

Further details are available in the Senior Medical Staff Leave Policy.

Prospective cover for emergency work is built into the job plans and locum cover for annual and study leave will not normally be provided. It is expected that consultants within the department will coordinate leave to ensure that an appropriate level of service (emergency, urgent & routine) is maintained.

### Domicile

Consultants are expected to reside within a reasonable distance of North Devon District Hospital; normally within 10 miles or 30 minutes. Exceptions must be agreed with the Medical Director or Chief Executive. Relocation expenses up to a limit of £8,000 may be considered if relocation is necessary to meet these requirements.

The appointee must maintain a land telephone connection to the public telephone service at their private residence.

### Indemnity

The post-holder is not contractually obliged to subscribe to a professional defence organisation but should ensure that they have adequate defence cover for non-NHS work.

### Mentoring

New consultants will have access to mentoring and are encouraged to take advantage of this facility, which is arranged by mutual agreement after discussion with the Medical Director.

### Professional Performance

The Trust expects all surgeons to work within the guidelines of the GMC Guide to Good Medical Practice and the Royal College of Surgeons Good Surgical Practice. You will work with clinical & managerial colleagues to deliver high quality clinical care, within the management structure of the Trust and are expected to follow Trust policies and procedures, both statutory and local, including participation in the WHO surgical checklist.

You will be expected to take part in personal clinical audit, training, quality assessment and other professional activities, including continuing medical education, annual appraisal, job planning and revalidation. It is expected that you will participate in multi-source feedback from both colleagues and patients. You will undertake administrative work associated with management of your clinical and professional practice.

You will be responsible for leadership of your clinical team within the specialty as agreed in your job plan and will be accountable for the effective and efficient use of any resources under your control.

You will also participate in activities that contribute to the performance of the department and the Trust as a whole, including clinical and academic meetings, supervision of junior staff, departmental management, service development and educational activities. Service developments that require additional resources must have prior agreement from the Trust.

### Reporting Concerns

The Trust is committed to providing safe and effective care for patients. There is an agreed procedure that enables staff to report “quickly and confidentially, concerns about the conduct, performance or health of medical colleagues”, as recommended by the Chief Medical Officer (December 1996). All medical staff practising in the Trust must ensure that they are familiar with the procedure and apply it if necessary.

### Serious Untoward Incidents

It is expected that you will report all risks, incidents and near misses in accordance with the Trust governance structure. You will be required, on occasion, to lead or assist with investigation of incidents and implementation of risk reducing measures to safeguard patients, visitors and staff. You must comply with the Duty of Candour legislation.

### Research & Audit

Audit is supported by the Clinical Audit & Effectiveness Department. The orthopaedic department participates in a number of national audits, including submission to the National Joint Registry (NJR) and the National Hip Fracture Database (NHFD).

Research within the Trust is managed in accordance with the requirements of the Research Governance Framework. You must observe all reporting requirement systems and duties of action put in place by the Trust to deliver research governance.

### Safeguarding Children & Vulnerable Adults

The Trust is committed to safeguarding children and vulnerable adults and you will be required to act at all times to protect patients.

The appointees may have substantial access to children under the provisions of Joint Circular No HC (88) 9 HOC 8.88 WHC (88) 10. Therefore, applicants are advised that, in the event that your appointment is recommended, you will be asked to complete a form disclosing any convictions, bind-over orders or cautions and to give permission in writing for a police check to be carried out. Refusal to do so could prevent further consideration of the application.

### Rehabilitation of Offenders

Attention is drawn to the provisions of the Rehabilitation of Offenders Act 1974 (Exceptions) Order 1975 as amended by the Rehabilitation of Offenders Act 1974 (Exceptions) (Amendment) Order 1986, which allow convictions that are spent to be disclosed for this purpose by the police and to be taken into account in deciding whether to engage an applicant.

This post is not protected by the Rehabilitation of Offenders Act, 1974. You must disclose all information about all convictions (if any) in a Court of Law, no matter when they occurred. This information will be treated in the strictest confidence.

### Health & Safety

Employees are required to take reasonable care to avoid injury or accident while carrying out their duties, in compliance with the Health & Safety at Work Act 1974, various statutory regulations, Trust & departmental guidelines, policies and procedures. This will be supported by provision of appropriate training and specialist advice.

### Infection Prevention & Control

The Trust is committed to reducing hospital-acquired infections. All staff are expected to ensure that infection risks are minimised in line with national and Trust policies and best practice. They are supported in this by the Infection Prevention and Control team.

# Royal Devon University Healthcare Foundation Trust

The Trust operates Royal & Exeter Hospital and North Devon District Hospital acute sites & community services across Northern & Eastern Devon, including the urban areas of Barnstaple & Bideford and a more rural population throughout the region. We also care for patients from neighbouring areas in Cornwall and Somerset and there is a significant increase in activity in the summer months, as visitors to the area access emergency services.

## Our strategy, mission and values

Our strategy is called Better Together, because we truly believe we are better when we work with our patients, with our colleagues, with our members and stakeholders, and with our partners.

We are working together to help you to stay healthy and to care for you expertly and compassionately when you are not. This is our mission, and we will deliver this by focusing on our Care objectives.

Our values are at the heart of everything we do. Together, they set out how we will put our strategy into practice by guiding how we care for our patients and support our colleagues.

Our mission and CARE objectives

We are working together to help you to stay healthy and to care for you expertly and compassionately when you are not. This is our mission, and we will deliver this by focusing on our Care objectives.

* **Collaboration and partnerships** – we will work in partnership to improve the health of our communities
* **A great place to work** – we will create a culture that retains, develops, supports, and attracts people to work as part of a team to deliver patient-centred care
* **Recovering for the future** – we will deliver an equitable recovery and capacity for further change
* **Excellence and innovation in patient care** – we will embrace new technologies and ways of working to deliver the best possible care and to enable people to stay well

## Management Structure

The Trust Board is led by the Chair, Dame Shan Morgan, with a team of six non-executive directors, five executive directors and two associate directors. The executive team is led by the Chief Executive, Ms Suzanne Tracey. There are three clinical divisions in Northern services; Surgery, Medicine & Clinical Support Services. Trauma & orthopaedic services sit within the Surgery Division. Within the division, the Divisional Director is Mrs Karen Donaldson, the Associate Medical Director is Mr Gareth Moncaster and Associate Director of Nursing is Ms Melanie Hucker.

### Surgery Divisional Structure

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## The Acute Hospital

North Devon District Hospital serves the local population of around 160,000. It is estimated that the population will rise to 186,000 by 2030.

The hospital has approximately 250 inpatient beds, intensive care and cardiac care facilities.

We employ more than 90 consultants, in all major specialties. In addition, we work closely with other local Trusts to provide combined services in smaller specialties and robust clinical networks for major trauma, cancer, vascular surgery and neonatal services. There are nine operating theatres, an accredited endoscopy suite and a new chemotherapy unit, with plans for further development.

## Academic Facilities

The Medical Education Centre is independently funded by the Peninsula Institute and its primary purpose is the provision of facilities, equipment and financial support to enable a wide range of medical professionals to continue their education and training.

There is a 70-seat lecture theatre, a clinical skills centre and several classrooms. Recently a new simulation suite has opened, creating a facility for multi-professional training, including trauma team training.

Dual-flatscreen, video-conference facilities, linked to other units in the region are available for clinical meetings, including regional MDTs, as well as training events.

The comprehensive healthcare library is accessible to registered users 24 hours a day. The library is staffed between 8.30 and 17.30 Monday to Friday. Services include book and journal loan, interlibrary loans, PC access, literature searching, information skills training, printing and photocopying.

Local, regional and national electronic library resources are made available across the Trust and for staff to access from home.

## Medical School Links

There have been recent changes to the Medical School provision in the South West. We currently take students from the Peninsula Medical School and as the changes are implemented over the next five years, we will take students from the newly created Exeter Medical School. Student numbers continue to rise year on year and there are many opportunities for involvement with teaching programmes.

# North Devon

North Devon offers 50 miles of spectacular coastline from Lynton to Bude and, with most of the remaining 500,000 acres of land being rural, the area is arguable the most attractive and unspoilt in Devon. There are many small market towns, villages and hamlets, including a number of coastal resorts.

The combination of spectacular Atlantic coastline, tidal estuaries and upland moors provides a wonderful environment in which to live and work.

Recreation facilities are excellent with a wide variety of sporting activities available, including superb surfing beaches, sailing, shore & salmon fishing, an indoor tennis centre and outstanding golf courses. There are stunning walking & cycling routes, with over 200 miles of cycle and coastal paths, including the South West Coastal Path and the Tarka Trail.

Lundy Island Marine Reserve and Dartmoor & Exmoor National Parks are on the doorstep. The local dune system has been awarded UNESCO World Biosphere Status and is a Site of Special Scientific Interest (SSSI). Several areas of the coast have been designated as Areas of Outstanding Natural Beauty (AONB) and are nationally protected to preserve the beauty of the landscape. Covering a total of 171km2 from Marsland Mouth on the Cornish border to Combe Martin on the edge of Exmoor, these areas include the Hartland Heritage Coast, North Devon Heritage Coast and Braunton Burrows.

Local theatres attract national and international performances and the annual local festival of sports & arts is nationally acclaimed.

Educational facilities are good with many excellent schools in both public and private sectors.

Agriculture and tourism form the main areas of employment, along with local government, the military bases at Chivenor & Instow and the Trust itself. North Devon also remains a popular retirement area.

Despite the rurality of the area, commuter links are good, both by road and rail. There are regular trains to Exeter and direct services to London and across the country from Tiverton. There are easily-accessible airports at Exeter and Bristol.

# Contacts

The Trust welcomes informal enquiries; contact names are detailed below:

Chief Executive Ms Suzanne Tracey

(01271) 311349

Medical Director Prof. Adrian Harris

(01271) 314109

Lead Clinician for Trauma & Orthopaedics Mr Will Griffiths-Jones

(01271) 322747

Associate Medical Director Mr Gareth Moncaster

(01271) 322756

Divisional Director Mrs Karen Donaldson

(01271) 322407

Group Manager Mrs Gillian Taylor

(01271) 349551

Service Manager Mrs Rachael Weathers (01271) 322588

Human Resources Manager Mrs Tina Squire

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