Information Pack

Clinical Fellow in Regional Anaesthesia and Intensive Care Medicine

(6-12 Month, Fixed Term)

Contents

A Clinical Fellow post in Anaesthesia and Intensive Care Medicine based at North Devon District Hospital, is available. The post will be from February 2024 fixed term for 6 to 12 months, with potential to extend by mutual agreement. Training will be provided, depending on the successful candidate’s level of experience.

Details of the post and descriptions of the department & Trust are included in this information pack as follows:

**1.** Introduction 2

**2.** Job Description 3

**3.** Person Specification 4

**5.** The Anaesthetic Department 6

**6.** Main Conditions of Service 8

**7.** Northern Devon Healthcare NHS Trust 11

**8.** North Devon 13

**9.** Contacts 14

Application & Interview

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

The post is offered on a whole-time basis 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 also be registered with the GMC and have completed F2 competency (or equivalent). Applicants must have a minimum of 12 months of experience of working in the NHS.

Applications are through the NHS Jobs online service at [www.jobs.nhs.net](http://www.jobs.nhs.net). Please apply using the standard online application form at this site. In the interests of equal opportunities, applications or supplementary information submitted by CV will not be accepted. A minimum of two 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 interviews is on the website.

# Introduction

Applications are invited for the post of Clinical Fellow in Regional Anaesthesia and Intensive Care Medicine (ICM) at North Devon District Hospital.

We have recently merged with the Royal Devon and Exeter to form the Royal Devon University Healthcare NHS Foundation Trust.

The successful applicant will be part of the expanding Anaesthetics and Critical Care Service in North Devon, currently consisting of 25 Consultants, 4 Specialists / Associate Specialists, 12 Specialty Doctors, and 11 Core Trainees in Anaesthetics / ACCS. We anticipate further departmental growth in coming years to staff a planned expansion in theatre numbers.

The post is based at North Devon District Hospital (NDDH), part of the Royal Devon University Healthcare NHS Foundation Trust’s Northern Services. This acute hospital in Barnstaple provides a full complement of secondary care services for the local population, including emergency care, cancer services, maternity and paediatric services.

NDDH is a designated Trauma Unit and Cancer Unit and has recently adopted a fully electronic health record and prescribing system. There are increasing opportunities to teach our numerous Medical Students from the University of Exeter Medical School (UEMS), as well as ACCS and Anaesthesia Trainees from Health Education England.

North Devon is a beautiful environment in which to live and work, with a wide variety of outdoor and cultural activities as well as excellent local schools. With National Parks and Areas of Outstanding Natural Beauty on the doorstep, the area offers an excellent quality of life. Our staff participate in a range of hobbies, maximizing on the opportunities afforded by living and working in a prime holiday destination that is also a World Surfing Reserve.

# Job Description

## Post Title

Clinical Fellow in Regional Anaesthesia and Intensive Care Medicine.

## Clinical Commitments

Clinical activity includes:

* Anaesthesia care for elective day surgery and inpatient theatre lists under direct and indirect supervision, according to experience.
* Pre-operative and post-operative visits.
* Anaesthetic duties on the ICU/HDU including attendance at resuscitation and trauma team calls.
* Labour ward anaesthesia and analgesia under direct or indirect supervision, according to experience.
* Support for acute pain issues on the wards.
* Emergency transfers, according to experience.

## Specialist Area of Interest – Regional Anaesthesia

This role is offered with a Specialist interest in Regional Anaesthetics.

**Objectives**

The post aims to allow acquisition of in-depth knowledge of the anatomy and sonoanatomy of the peripheral nervous system alongside detailed knowledge of local anaesthetic and adjuvant drugs for regional anaesthesia to allow appropriate selection depending on clinical circumstances.

We will support the candidate to gain understanding of the physics of ultrasound and needle design and application of this knowledge to optimisation of picture quality while performing ultrasound-guided regional anaesthesia and catheter techniques.

The Fellow will be supported to complete the requirements for the European Society of Regional Anaesthesia (ESRA) Diploma in Regional Anaesthesia and sit this exam.

Depending on the candidate time would be split between direct clinical care and development of their area of specialist interest.

We offer both awake and asleep blocks in a number of elective and emergency lists for lower and upper limb surgery. We are continuing to develop our rib fracture pathways and have two members of the department who have the EDRA, with others working towards it.

We would also be able to support alternative roles in Medical Education and Simulation.

### Support for Registrar Interviews The department has supported a number of fellows and speciality doctors into registrar training. We have a full education system in place with weekly teaching and a number of senior members of the team are involved in the national interview process. Time can be dedicated to interview practice and CV building to improve chances of success at the next round of interviews.

### Out of Hours Rota

There are two Consultants from the Department on-call in any twenty four hour period. One provides cover for the ICU/HDU, the other for emergency theatres and labour ward. There are 2 tiers of senior anaesthetist on-site (one only partially filled). There is a tier of junior anaesthetist and fellow covering ITU and the wards. Depending on the grade of candidate they would enter onto the junior or one of the two senior rotas. Duties will be as part of a full-shift rota with night and day shifts, as required, compliant with the European Working Time Directive and are at present either 1:12 or 1:10 shift patterns.

**Rota Flexibility**

We are supportive of flexible working and appreciate that the Trust is at a remote site. Consideration will be given to supporting flexible working patterns.

### Emergency Cover

In exceptional circumstances, the Trust may request emergency cover for colleagues.

## Relationships

You will work closely with other medical staff, allied health professionals and non-clinical colleagues both within the department and in other specialties.

# Person Specification

Applicants must demonstrate on the application form that they fulfill all essential criteria to be considered for shortlisting.

Appointment is subject to pre-employment checks, including occupational health, police checks and a minimum of two satisfactory references, including one from your current Responsible Officer.

|  |  |  |
| --- | --- | --- |
| **Requirement** | **Essential Attributes** | **Desirable Attributes** |
| **Qualifications & Training** | | |
| **Professional Qualifications** | Primary Medical Qualification (MBBS or equivalent). | Distinctions, Prizes, Scholarships.  Intercalated BSc or equivalent.  Additional postgraduate qualifications. |
| **Professional Training & Memberships** | Full GMC registration & license to practice.  Eligible to work in the UK by August 2021 and have already gained a minimum of 12 months of experience of working as a doctor in the NHS. | Advanced Life Support Certificate.  Advanced Trauma Life Support (ATLS).  Advanced or European Paediatric Life Support (APLS or EPLS). |
| **Clinical Experience** | | |
| **Employment** | Evidence of completion of F2 competency (or equivalent).  Be able to provide complete details of employment history.  Career progression consistent with personal circumstances.  More than 12 months experience in Anaesthesia / ICM  Initial Anaesthetic Competencies (IAC)  Initial Obstetric Anaesthetic Competencies (IOAC) |  |
| **Clinical Knowledge and Skills** | Demonstrates a clear, logical approach to clinical problems and an appropriate level of clinical knowledge.  Able to prioritise clinical need.  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** | Willingness & ability to contribute to departmental & Trust teaching programs. | Evidence of previous teaching & training experience.  Defined educational roles or qualifications. |
| **Management of Change & Quality Improvement** | Demonstrates willingness to implement evidence-based practice. | Demonstrates clear understanding of quality improvement and clinical governance within the NHS.  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** | Demonstrates a critical and enquiring approach to knowledge acquisition. | Understanding of the principles of scientific method and interpretation of medical literature.  Recent evidence of relevant research, presentations or publications. |
| **Communication & Personal Skills** | Good spoken & written English language skills.  Communicates effectively with patients, relatives, colleagues, nurses, and allied health professionals.  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 a local level. |
| **Commitment to post** | Demonstrates enthusiasm for North Devon as a place to live and work. |  |

# The Anaesthetic Department

# The Anaesthetic Department

#### Staffing:

### General Anaesthetic Consultants

Dr Rob Conway – Lead Clinician

Dr Dave Beard – Trust Safety Lead

Dr Cecily Don – Trust O&G Lead

Dr Simon Hebard – Perioperative Medicine Lead

Dr Caroline Cheesman – Transfusion Lead

Dr Jeremy Preece – College Tutor

Dr Chris Smith – Perioperative Medicine

Dr Zsolt Ungvari – Clinical Governance Lead

Dr Debbie Sanders – Anaesthesia Clinical Lead

Dr Jim Powell – Obstetric Anaesthetics Lead

Dr Ruth Clarke – General Anaesthetics

Dr Zehra Ozfirat – SAS Tutor

Dr Tony Laycock – Appraiser

Dr Andy Walder – General Anaesthesia

### Intensive Care Consultants

Dr Gareth Moncaster – ICM Lead and AMD for Surgery

Dr Tim Cobby – Resuscitation Lead

Dr Jorge DaFonseca – ICM Governance Lead

Dr Nigel Hollister – ICM Faculty College Tutor

Dr Gorki Sacher – Organ Donation and ECHO lead

Dr Nick Love – Job Planning Advisor

Dr Guy Rousseau – Director of Medical Education

Dr Kate Tipping – SAS Staffing Lead, Rota Manager

Dr Will Gaunt – ICM Physician

Dr Johannes Achenbach – Orthopaedics and ERAS

Dr Jerzey Minecki – Transfer Lead

### Associate Specialists and Specilaists

Dr Susan Hanson (Deputy DME)

Dr Ezequiel Martinez-Estrada

Dr Emil Szelei (Appraiser)

Dr Moemen Abouelsaad

### Specialty Doctors

Dr Matt Casemore

Dr Anne-Lena Sacher

Dr Nish Nath

Dr Martin Paul

Dr Balasz Bartos

Dr Taryn Mitchell

Dr Richard O’Bryne

Dr Gwilym Rivett (Airway Lead)

Dr Katy Pyatt (Recovery Lead)

Dr Sangeet Tanwar

Dr Rashi Sardana

### Trust Doctors

Dr Sasha Carter

Dr Juan Para (ED)

### Pain Management Team

Dr Lucy Miller – Pain Service Lead including In-Patient Pain

Dr Alan Bennett – Outpatient Pain Consultant

Matthew Lund – Therapy Lead, Pain Specialist Physio

Archie Baker – Pain Specialist Physiotherapist

David Sanders – Pain Specialist Physiotherapist

Chris Baker – Specialist Physiotherapist

Louise Findlay – Pain CNS

Ese Adene – Pain CNS

Emma Migliari – Pain CNS

Jess Guy – Occupational Therapist

Julie Cotton – Secondary Care Flow Co-ordinator

Ruth Morgan – Clinical Psychologist

### ACCS / Core Trainees

11 Core Training / ACCS posts (Health Education South West)

In addition to medical staff, the department includes an experienced team of pain management nurses.

Administrative support is provided by Cerys Redif, Denise Sheldrake and Rebekah Howes.

### Departmental Management

Day to day operational links are with the daily duty General Consultant, Lead Clinician, the rota managers and the Anaesthetic and Pain Secretaries.

Managerial support is provided by the Service Manager (Rachael Weathers), Group Manager (Gillian Taylor and Divisional Director (Karen Donaldson).

## Departmental Workload

All work will be undertaken at North Devon District Hospital. There are nine operating theatres on-site. Surgical specialties include colorectal, upper GI, urology, trauma & orthopaedics, ophthalmology, obstetrics & gynaecology and oncoplastic breast as ‘in house’. Dental, non-arterial vascular, ENT, maxillo-facial surgery and plastics are provided from visiting consultants. Anaesthesia is also undertaken within the Endoscopy Suite and for occasional cases within the Radiology Department.

### General Workload

The Department provides anaesthesia for approximately 18,000 procedures each year. As well as general and regional anaesthesia, the department is also involved with the care of patients in the ICU/HDU, the obstetric unit, acute and persistent pain management, trauma and resuscitation, pre-operative assessment and transfer of critically ill patients.

### Day Surgery

This is a separate unit within the main hospital. It has one ward and two operating theatres. The present workload is about 10,000 procedures each year. Gynaecology, breast and ophthalmic surgery take place in a dedicated theatre complex within the Women’s and Children’s Unit.

### Obstetrics

The Department provides a 24-hour epidural service to the Obstetric Unit with about 1500 deliveries per year. The epidural frequency is around 25% and the Caesarean section (LSCS) rate is 28%. There are four sessions for elective LSCS each week. Epidural pain relief during labour is given using patient controlled epidural analgesia (PCEA). There is a well-established, consultant-delivered obstetric anaesthesia clinic. There are regular skills training sessions in the management of obstetric emergencies in the Delivery Suite.

### Pre-Operative Assessment

The Trust has a well-established, nurse-delivered pre-operative assessment service which is supported by a team of pre-operative assessment consultants providing five anaesthetic high-risk clinics per week.

### ICU and HDU

The Intensive Care Unit has expanded from a six to an eight-bedded combined ICU/HDU and offers a full range of organ support. Anaesthetists are closely involved in the management of head injuries and are responsible for the transport of critically ill patients by ambulance and helicopter to specialist facilities outside the District when time critical or the adult transfer service (Retrieve) is unavailable. The ICU also manages the initial resuscitation and stabilisation of children who require intensive care therapy under the direction of the paediatric retrieval service (WATCh). Regional services are provided by Plymouth (adult neurosurgery and cardiac surgery) and Bristol (paediatric neurosurgery and paediatric intensive care). There is a consultant-delivered ICU follow-up clinic.

### In-Patient and Persistent Pain Services

The Trust has recently expanded its Persistent Pain Service to incorporate a broad-based multidisciplinary team located within a newly built office and outpatient’s facility. The Inpatient Pain Service is consultant-led and is delivered by a team of dedicated Specialist Nurses with the support of the on-call anaesthesia team.

### Emergency Surgery

There are theatre sessions available each day for emergency cases, including trauma. The emergency theatres are covered each day by a Duty Consultant Anaesthetist alongside an Associate Specialist, Specialty Doctor or Core Trainee.

### Simulation

The Trust supports a growing simulation programme across all specialties. There is a high-fidelity simulation suite on-site, with access to a broad spectrum of manikins. Wireless audio visual equipment has recently been introduced to facilitate in-situ simulation sessions across the Trust.

The Department contributes a large proportion of the Trust simulation faculty and is currently involved in training Medical Students, Foundation Doctors, Anaesthetic Trainees and multidisciplinary staff across the hospital.

### Special Interests and Skills

The department encourages the development of special interests and skills within the Anaesthetic Service. Similarly, specific training may be provided within the department to update the applicant’s skills in particular areas. Please contact Dr Rob Conway, Lead Clinician, to discuss any particular interests or skills you have or wish to develop.

# Main Conditions of Service

Appointment is to the Trust Doctor contract 2002 under the current Terms & Conditions of Service for Hospital Medical & Dental Staff (England) 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 Northern Devon Healthcare NHS 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 of Service for Hospital Medical & Dental staff (England), salary details can be found in the Pay and Conditions Circular (M&D) 1/2021.

### Leave

Annual leave entitlement is as described in the current Terms & Conditions of Service for Hospital Medical & Dental Staff (England). Study leave entitlement is 30 days a year (or pro rata for shorter posts).

Locum cover for leave will not normally be provided. It is expected that staff within the department will coordinate leave to ensure that an appropriate level of service (emergency, urgent & routine) is maintained.

### 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.

### Professional Performance

The Trust expects all doctors to work within the guidelines of the GMC Guide to Good Medical 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. It is expected that you will participate in multi-source feedback.

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, 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 practicing 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 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 department participates in a number of national audits, including submission to the National Hip Fracture Database (NHFD), the HSRC National Audit Projects (NAPs) and the National Emergency Laparotomy Audit (NELA).

Research within the Trust is managed in accordance with the requirements of the Research Governance Framework. Involvement in projects coordinated via the South West Anaesthesia Research Matrix (SWARM) is actively encouraged.

### 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.

**About Royal Devon University Healthcare NHS Foundation Trust**

## Our core services support a population of over 615,000 people and cover more than 2000 square miles across Devon. This makes us one of the largest providers of integrated health care in the UK, and the biggest employer in Devon, with more than 15,000 staff.

## We have two acute hospitals, 20 community locations, outpatient clinics and community teams who care for people within their own homes. We also provide primary care and a range of specialist services which extends our reach throughout the South West Peninsula as far as Cornwall and the Isles of Scilly.

## As a newly formed Foundation Trust in April 2022, our Northern base is embracing change, innovation and technology in our ambitions to be a digitally-enabled, clinically-led teaching organisation. We are developing new ways of working and investing in new infrastructure, equipment and facilities. There has never been a better time to join us.

## The Royal Devon is committed to supporting the personal and professional development of our consultant staff and in turn improving the care offered to our patients. This might include developing or introducing innovative care models and bringing these to rural patients, teaching the doctors of tomorrow or undertaking award-winning clinical research. Examples include our specialist nurses, who were recognised in the British Journal of Nursing Awards for their innovations during the COVID pandemic, our inflammatory bowel disease research team who were recognised with the national team award for their contribution to the NIHR portfolio, and our recent launch of a world-first national genetic testing service from our labs, which can rapidly test DNA samples of babies and children, so we can provide life-saving treatment.

## You’ll find more information about the role and the Trust in this pack. Further information is also available on our website [www.royaldevon.nhs.uk](http://www.royaldevon.nhs.uk).

**About the Trust and Service Structure**

The Royal Devon’s Board of Directors is chaired by Dame Shan Morgan and is comprised of both executive and non-executive directors. The executive directors manage the day to day operational and financial performance of the Trust.

These consist of the chief executive officer (Suzanne Tracey), deputy chief executive officer (Chris Tidman), chief medical officer (Adrian Harris), chief nursing officer (Carolyn Mills), chief operating officer (John Palmer), chief finance officer (Angela Hibbard), and chief people officer (Hannah Foster).

The medical directors are Dr Karen Davis (Northern services including NDDH) and Dr Anthony Hemsley (Eastern services including RD&E). All permanent medical staff are members of the Medical Staff Committee which has an elected Chairman who represents the group at the Trust Management Committee.

**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 300 inpatient beds, intensive care and cardiac care facilities.

We employ more than 70 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 cancer, vascular 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

We take students from the University of Exeter Medical School and Student numbers continue to rise year on year, creating many opportunities for involvement with teaching programs.

# 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 Medical Officer**  
Prof Adrian Harris  
Tel: 01271 314109

**Medical Director**Dr Karen Davies  
Tel: 01271 314109

**Clinical Lead for Anaesthetics, ITU and Pain Management**  
Dr Rob Conway  
Tel: 01271 370241  
Email: rob.conway@nhs.net

**Anaesthesia Service Lead**  
Dr Debbie Sanders  
Tel: 01271 322756  
Email: deborahsanders@nhs.net

**Divisional Director  
Karen Donaldson**Tel: 01271 314109[karen.donaldson6@nhs.net](mailto:karen.donaldson6@nhs.net)

**Group Manager  
Keely Cooper**Tel: 01271 314109 **k.cooper6@nhs.net**

**Medical Staffing Manager**Tina Squire  
Email: tinasquire@nhs.net  
Tel: 01271 349111

**Postal address:**

North Devon District Hospital  
Raleigh Park  
Barnstaple  
EX31 4JB

Tel: 01271 322577