

Locum Consultant Post Application Information Pack

Locum Consultant Obstetrician and Gynaecologist with an interest in labour ward

Career Gateway Reference: 185-358-1223

Fancy a change of scenery?

Doctors at the Royal Devon University Healthcare NHS Foundation Trust have a work-life balance like nowhere else. At work, they are part of a supportive team, in roles that deliver all the challenges you would want from a medical career. In their spare time, they are out surfing, hiking, cycling and enjoying the most amazing scenery that Devon has to offer, with beautiful beaches just a stone's throw away from the hospital.

Our acute hospital is big enough to provide real opportunities for innovation and research, but small enough for your work to make a real impact. We have close-knit teams with quick lines of communication and that means we make things happen.

We are a research-active Trust and encourage doctors, nurses and allied health professionals to lead research projects. Staff are actively encouraged and supported to share and develop their ideas to improve care.

We have a proven track record of staff satisfaction, with staff rating us as the top acute and community provider in the country in the latest NHS staff survey (2017). We're nationally recognised too, most recently being shortlisted for provider trust of the year in the Health Service Journal awards (2017) for the work we've done to improve every stage of a patient's journey through our services.

You'll find more information about the role and the Trust in this pack. Further information is available on our recruitment website, <u>www.ndhtjobs.com</u>.

Contents

Applications are invited for Locum Consultant Obstetrician and Gynaecologist post, for 9 months in the first instance to cover maternity leave and is based at the North Devon District Hospital, part of the Royal Devon University Healthcare NHS Foundation Trust.

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

Introduction Job description Outline job plan Person specification Obstetrics & Gynaecology Department Main conditions of service Royal Devon University Healthcare NHS Foundation Trust North Devon Contacts

1. Introduction

We are pleased to be inviting applications for a locum consultant post. The successful candidate will join the existing team of eight whole time equivalent obstetrician and gynaecologists.

The ideal appointee will be a generalist obstetrician and gynaecologist with an interest in labour ward. Experience in colposcopy / vulval disease would be welcomed. We are also keen that the appointee has leadership aspirations / skills with a willingness to lead the labour ward. Support and development for this role would be provided.

It is expected that following the outcome of the Devon-wide review of acute services, which recommended closer working between hospitals, as networking evolves, there will be linkage of this post with Exeter.

The post is based at North Devon District Hospital (NDDH), part of the Royal Devon University Healthcare NHS Foundation Trust. is a unique organisation, delivering integrated acute and community services across northern Devon, and delivering specialist services across the whole of Devon, and has one of the highest rates of staff satisfaction in the country. NDDH provides a full complement of secondary care services including emergency care, cancer services, maternity and paediatrics. It is a designated Trauma Unit and Cancer Unit.

Outside of work, with its national parks and Areas of Outstanding Natural Beauty, Devon offers an excellent quality of life and is consistently voted as one of the best places to live in England.

For further information about this post and to make arrangements to visit the department, please contact **Jonny Morgan**, Group Manager on 01271 311812 or **Debbie Kneale**, Service Manager on 01271 322428.

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 advertised as a locum full-time post attracting 10 PAs plus an additional 0.6 PAs in agreement with the successful candidate. However, part-time or job share applications are welcomed and encouraged. Applicants should be eligible for full registration with the GMC.

Applicants must have completed specialist training in Obstetrics and Gynaecology prior to taking up this appointment and be on the Specialist Register for Obstetrics and Gynaecology.

Applications are through the Career Gateway online recruitment service at the following link <u>https://vacancies.royaldevon.nhs.uk</u> - vacancy reference: 185-358-1223.

Please apply using the standard medical 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 **three** recent references are required, including a satisfactory reference from your current employer or the responsible officer at your current designated body.

2. Job description

2.1. Post title

Locum Consultant Obstetrician and Gynaecologist with interest in labour ward

2.2. Clinical commitments

The successful candidate will join a team of consultants who work together to provide a consultantled obstetrics and gynaecology service with out of hours cover, including supervision of speciality doctors, an associate specialist doctor, Trust doctors, RCOG recruited Medical Training Initiative (MTI) doctors and trainees (GP trainees and x 1 ST1 O&G). The main role is that of a consultant general obstetrician and gynaecologist.

The successful candidate will be active in audit, governance and guideline development. The appointee will take part in a 1:8 prospective emergency service for obstetrics and gynaecology. This is comprised of mainly daytime labour ward presence but incorporates handover, ward round and gynaecology emergency cover. The emergency service is provided as daytime presence and nights on-call. Weekend cover incorporates three days Friday to Sunday (1:8) and week days, Tuesday alternate weeks.

When doing "hot days", consultants are on-site, based on delivery suite, between 09:00-17:00 on week days and 09:00 to 12:00 Saturday and Sunday. They attend handover with the rest of the team 09:00-09:30. To ensure that acute admissions are seen by a consultant within the NHSi recommended 14 hours consultants may choose to remain in hospital on weekday evenings until 19:00 and undertake a telephone ward round at 22:00 or alternatively return at 21:00 for the night time handover. On Saturday and Sunday a 21:00 ward round is required. Overnight and weekend on-call duties receive an average 1.5 PAs per week.

Outpatient clinics and theatre sessions are not scheduled during "hot days". Prospective cover of "hot days" and on call nights is provided by a "buddy" consultant (Mr Alex Mortimer).

Consultants may NOT be on duty for labour ward whilst on another site or undertaking private practice.

Consultants work closely with the nurse-led early pregnancy service when undertaking 'Hot day' activity for the management of miscarriage and ectopic pregnancy.

Gynaecology On call - It is expected that consultant competency will be maintained in laparotomy, diagnostic laparoscopy, management of miscarriage and ectopic pregnancy for out of hours work. Undertaking non-acute open and laparoscopy cases on elective lists maintains competency in these areas. Emergency gynaecology admissions requiring surgery are wherever possible scheduled to be performed during 'normal' working hours through the hospital's central emergency theatre or by adding to an elective gynaecology theatre list. Consultants within the department work collaboratively to ensure emergency patients requiring operative interventions are cared for in a timely manner. In most cases the 'Hot day' consultant will undertake the emergency surgery with support for the acute service being provided by a tier 2 doctor.

The Hospital works closely with Exeter Hospital in O&G. NDDH provides a gynaecology cancer unit service feeding in appropriate cases to the Exeter gynaecology cancer centre. Three O&G consultants are working across the 2 sites providing both on call and elective services. There is increasing network collaboration between the 2 sites with respect to management of high-risk pregnancy and gynaecology cases both acute and elective to ensure that the best care is provided in the most appropriate site.

Responsibilities

- To take part in any regional network activity relating to labour ward.
- To develop and maintain appropriate guidelines for intrapartum care.
- To take an equitable part in the educational supervision and training responsibilities of the department.
- To promote integrated working with those from other disciplines and agencies including other specialist consultants, specialist nurses, and midwives.
- To work collaboratively with other O&G consultants in areas of overlapping expertise.
- To provide clinical leadership on the labour ward, working closely with the Group Manager, Lead Clinician, Associate Medical Director for Unscheduled Services and Head of Midwifery.

Emergency cover

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.

Meetings and networking arrangements

Other responsibilities include a number of regular meetings contained within areas of either generic SPA or DCC, including covering in times of planned absence by cooperative working with other members of the consultant team.

All meetings take place on Wednesday afternoons when no clinical activity, other than "hot day" DCC, is scheduled to enable attendance.

Educational meetings:

- Teaching programme weekly (lunchtime / afternoon)
- Perinatal M&M meeting alternate months
- Audit and case review monthly

Management / governance meetings:

- O&G business meeting monthly
- Maternity specialty governance meeting monthly
- Gynaecology governance alternate months
- Colposcopy business meetings alternate months

2.3. Supporting professional activities

You will be expected to participate in a variety of supporting professional activities (SPA) attracting 1.5 PAs. This includes, but is not limited to:

• Appraisal, job planning and revalidation

- Personal and professional development, including service development
- Audit & case review, perinatal morbidity and mortality, business and governance meetings
- 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

The Trust may make up to one additional SPA session available by mutual agreement if the consultant takes on additional, non-generic SPA work (with a reciprocal reduction in DCC). 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.

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Educational meetings:

- Teaching programme weekly (lunchtime / afternoon)
- Perinatal M&M meeting alternate months
- Audit and case review monthly

Management / governance meetings:

- O&G business meeting monthly
- Maternity specialty governance meeting monthly
- Gynaecology governance alternate months

2.4 Relationships

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

The Trust actively encourages and supports consultant involvement in regional clinical networks.

3. Outline job plan

The indicative Job Plan is included. The final form will be agreed between the successful candidate, the lead clinician and general manager after appointment to accommodate the needs of the department and the subspecialty interest of the individual.

The job plan will be reviewed with the Associate Medical Director within three-six months of the postholder starting. Subsequently, the job plan will be reviewed annually, or as required.

Adjustments will be made by mutual agreement to meet both the needs of the service and the interests of the individual.

Monday			
Morning	Antenatal clinic	09:00-13:00	1PA DCC
Afternoon	Outpatient Hysteroscopy Weeks 1,5	14:00-17:30	0.219 DCC
	Gynae theatre Week 2,4,6,8	13:00-18:00	0.625 DCC
Evening	Free		
Tuesday			
Morning	*Generic SPA (week 1,3,5,7)	09:00-13:00	0.5 SPA
	Labour ward (week 2,4,6,8) prospective cover	09:00-13:00	0.625 PA DCC
Afternoon	Perinatal MDT (week 1,3,5,7)	13:00-14:00	0.125PA DCC
	Labour ward (week 2,4,6,8) prospective cover	13:00-17:00	0.625PA DCC
Evening	Non-resident on call 1:2 (52 weeks)		
Wednesday			
Morning	Gynaecology clinic	09:00-13:00	1PA DCC
Afternoon	Generic SPA	13:00-17:00	1 SPA
Evening	Free		
Thursday			
Morning	Clinical administration	09:00-13:00	1PA DCC
Afternoon	Labour ward lead	13:00-15:00	0.5 SPA
Evening	Free		
Friday			
Morning	Labour ward (week 1, prospective cover)	08:00-13:00	0.15PA DCC
	Antenatal clinic (weeks 3,5,7)	09:00-13:00	0.375 PA DCC
	Educational supervision (week 2, 4, 6, 8)	09:00-11:00	0.25 SPA
Afternoon	Labour ward (week 1, prospective cover)	13:00-17:00	0.15PA DCC
Evening	Non-resident on call 1:8 (52 weeks)		

Morning	Labour ward (week 1, 1:8, 52 weeks)	09:00-12:00	0.3PA DCC
Afternoon	Off-site on call 1:8 (52 weeks)		
Evening	Labour ward (week 1, 1:8, 52 weeks)	21:00-23:00	0.2PA DCC
On call	1:8 prospective cover (52 weeks)		Category A
			5% supplement
Predictable	Includes weekday nights (Tuesday 1:2 and Friday 1:8) either 17:00-19:00 on- site and telephone round at 22:00 or on- site 21:00-23:00 with ward round		0.5PA DCC
Unpredictable			0.5PA DCC
Total DCC PAs		1	8.39
Total SPAs			2.25
Total			10.6

*Time-shifted if providing labour ward cover for Tuesday 'buddy' consultant's leave

** Should the successful candidate not have colposcopy experience then an alternative outpatient clinic commensurate with the candidate's interest may be substituted.

The Trust uses the Allocate HealthRoster to provide quick and easy access for doctors to their rosters and leave requests.

4. 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, DBS checks and a minimum of three satisfactory references, including one from your current Responsible Officer.

Requirement	Essential attributes	Desirable attributes	
Qualifications and tra	Qualifications and training		
Professional qualifications	Primary medical qualification (MBBS or equivalent)	Additional postgraduate qualifications	
Professional training and memberships	Full GMC registration and licence to practise Membership of the Royal College of Obstetricians and Gynaecologists or equivalent On the GMC's specialist register, or within 6 months of CCT	Prizes,	
Clinical experience			
Employment	Clinical training and experience in general obstetrics and gynaecology equivalent to that required for a UK CCST Be able to provide complete details of employment history. Career progression consistent with personal circumstances. Eligible to live and work in the UK.	Labour ward lead ATSM	

Clinical knowledge and skills	Demonstrates awareness of breadth of clinical issues	
	Clinical feedback from colleagues and patients	
	Evidence of introducing and developing an area of service	
	Experience of clinical risk management	
	Evidence of ongoing safeguarding training	
Non-clinical skills		
Teaching	Evidence of and enthusiasm for teaching and training.	Experience of educational supervision
	Willingness to contribute to department teaching and training needs.	Defined educational roles or qualifications
	Evidence of previous teaching and training experience	Evidence of teaching of undergraduates, junior doctors and multi-
	Willingness and ability to contribute to departmental and hospital teaching programmes	professional groups
Management of change and quality improvement	Demonstrates clear understanding of quality improvement and clinical governance within the NHS	Evidence of innovative development and implementation of guidance
	Demonstrates willingness to implement evidence-based practice	Evidence of involving patients in practice
	Evidence of effective personal contributions to clinical audit, governance and risk reduction Evidence of service development	development
Innovation, research, publications and presentations	Understanding of the principles of scientific method and interpretation of medical literature	Recent evidence of relevant research, presentations or publications
	Demonstrates a critical and enquiring approach to knowledge acquisition	
	Demonstrates understanding of the research governance framework	

Management and 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 and personal skills	Good spoken and written English language skills Communicates effectively with patients, relatives, colleagues, GPs, nurses, allied health professionals and outside agencies Evidence of ability to work with multi- professional teams and to establish good professional relationships Information technology skills. Caring attitude to patients.	Evidence of patient and colleague feedback Excellent presentation skills, engages audience
Other requirements		

Motivation and management of personal practice	Team / collaborative workingAbility to show leadership and exert appropriate authority.Punctual and reliable.Good personal organisational and prioritisation skills.Takes responsibility for personal practice and is able to cope well with stressful situations.Commitment to continuing medical education and professional development.Flexible and adaptable attitude.Ability to undertake travel requirements of the post.Evidence of effective multi-agency 	Demonstrates initiative in personal practice Willingness to undertake additional professional responsibilities at local level
Commitment to post	Demonstrates enthusiasm for North Devon as a place to live and work	

5. Obstetrics and Gynaecology, and Maternity Services

5.1. Staffing

5.1 Medical Staffing	
5.1.1 Consultant staff	
Mr Alex Mortimer	Urogynaecology
	Lead Clinician
Mr Seumas Eckford	Minimal access surgery, unwanted pregnancy, urogynaecology
Mr Osama Eskandar	Minimal access surgery, Unit Gynae-oncology Lead
Miss Sansan Aye	Feto-maternal medicine Lead
Miss Eleni Lekoudis	Training Programme director (ST1-4)
Miss Jessica Glanville	(Maternity Leave – this locum post)
	Labour Ward Lead
	Interim College Tutor

Three consultants working between RD&E (Mon, Tues, Fri) and NDDH (Wed, Thursday)

- Miss Lisa Knight Audit lead
- Miss Annabel Kemp Fertility lead
- Mr Simon Tarsha Perinatal M&M lead and simulation training

5.1.2 Speciality doctor and associate specialist doctors

The department has a 1:8 Tier 2 rota incorporating. speciality doctors and RCOG MTI programme trainees. They take part in a full-shift system and are able to undertake the majority of emergency obstetrics procedures. With consultants, they provide training to both speciality and GP trainees.

5.1.3 Tier 1 doctors

There are seven tier 1 doctors: one ST1 O&G trainee, three GP ST1/2 trainees, two Trust doctor posts at ST1/2 level and one F2 trainee. They work a full-shift system supporting the tier 2 doctors.

The trainees within the department have given excellent feedback in the GMC trainee surveys and to the recent School of O&G Quality Panel on the quality of supervision and training that they receive and the consultant body is keen to maintain this reputation. Trainees have the opportunity to contribute to their teaching programme and are invited to attend the department's various governance, audit and M&M meetings.

The Obstetrics and Gynaecology Department at North Devon District Hospital provides a comprehensive range of Obstetric and Gynaecological services, both at NDDH and in our community hospitals. The majority of the service is based in the Ladywell Unit alongside Paediatrics. The Unit has two theatres for Obstetrics and Gynaecology.

The Maternity service in North Devon sees approximately 1300 births per year, and provides antenatal and postnatal care. The delivery suite has six rooms, two of which benefit from birthing pools. A bereavement room has been commissioned and is in the process of being built. The antenatal/ postnatal ward is Bassett Ward, with 18 beds plus a day assessment unit. The antenatal clinic, with two ultrasound rooms, is located on the ground floor.

The department has close links with St Michael's Hospital in Bristol for tertiary fetal-medicine services.

The Caroline Thorpe children's ward and Special Care Baby Unit are also within the Ladywell Unit. The SCBU is a level 1 special care unit. It is a member of the Peninsula Neonatal Network, with the level 3 unit at Derriford Hospital, Plymouth.

The day-case gynaecology service is based on Petter Ward, a six trolley day-case unit for patients undergoing gynaecology (or breast surgery - Wednesday). Petter Ward is also the admissions area for gynaecological inpatients, hosts the early pregnancy assessment clinic, and has two procedure rooms for colposcopy, urodynamics and outpatient hysteroscopy. There is a separate gynaecology clinic area for general clinics. Gynaecology inpatients, both elective and emergency, are cared for in the female surgical ward, King George V (KGV), within the main hospital building.

The fertility service receives approximately 100 referrals per year. The service offers basic semen analysis, ovulation monitoring and induction with Clomiphene, tubal patency tests by HSG and laparoscopy and dye where indicated. A small number of cases are treated by ovarian drilling. There are close links with the fertility team in Exeter, Miss Annabel Kemp working in both NDDH and RDE fertility services, for provision of assisted conception including IVF, ICSI, sperm and ovarian tissue banking, and sperm donation.

The Urogynaecology service is supported by staff from the medical physics department at Exeter hospital has Cancer Unit status, and in gynaecology has close links with gynae-oncologist Mr J Renninson, along with radiotherapist Dr J Forrest, and medical oncologist Dr K Scatchard from the Exeter, who participate in joint clinics and multi-disciplinary team-working at NDDH. A consultant Nurse Mrs D Goffey, currently provides support to the colposcopy service and early pregnancy assessment as well as training for a nurse colposcopist in NDDH.

5.2. Departmental governance and management

The department has a robust governance structure which has been modelled on the structure in place in the RD&E with whom it works closely. There is a monthly maternity services governance meeting and alternate month gynaecology governance meeting.

The is a monthly audit and case review meeting. Additionally, there is an alternate month perinatal M&M meeting.

The O&G and Maternity Specialty Team meeting is the department's business meeting held on a Wednesday afternoon each month involving consultants, specialty doctors, nursing, midwifery, and management. No clinical commitments (except delivery suite cover) are scheduled to ensure that all consultants can attend. Agenda items include reports from teams, the financial position of the department, incidents, complaints and positive feedback.

Day to day managerial and operational links is with the lead clinician, Alex Mortimer and the group manager, Jonny Morgan.

6. Main conditions of service

Appointment is to the NHS Consultant Contract (2003) under the current Terms and Conditions of Service for Hospital Medical and Dental Staff (England and 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 the Royal Devon University Healthcare NHS 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.

The post-holders must have completed specialist training in obstetrics and gynaecology.

Salary scale

This is as described in the Medical and Dental Terms and Conditions, in line with the Consultant Contract (2003).

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 Study Leave Policy.

Locum cover for 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 and 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. A generous relocation package may be considered if relocation is necessary to meet these requirements.

Duty to be contactable

Subject to the provisions in Schedule 8, consultants must ensure that there are clear and effective arrangements so that the employing organisation can contact him or her immediately at any time during a period when he or she is on-call.

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. This will be arranged following discussion and mutual agreement between the individual and the medical director.

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 and 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 junior doctors 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, 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 and audit

Department teaching

There is an active consultant-led postgraduate teaching programme with tutorials on Wednesday lunchtime. Regular twice monthly simulation and skills and drills training is provided by Miss Eleni Lekoudis.

In addition, trainees receive CTG training and review cases following each morning handover.

The department runs regular PROMPT training and trainees are expected to complete this together with mandatory training in other areas. GP trainees will, in addition, attend occasional regional teaching sessions in General Practice.

Research

A number of research projects are usually active at any time within the O&G department, with consultants assigned as Principle Investigators.

Royal Devon University Healthcare NHS Foundation Trust manages all research in accordance with the requirements of the Research Governance Framework. As an employee of Royal Devon University Healthcare NHS Foundation Trust, you must comply with all reporting requirements, systems and duties of action put in place by the Trust to deliver research governance.

Audit

The department is an active participant in a number of regional and national audits including a number of RCS audits and the National Confidential Enquiry into Peri-operative Deaths (NCEPOD), as well as audit projects in specialties such as colposcopy.

There is a supportive audit and clinical effectiveness department. The appointees will be expected to contribute to audit relevant to their areas of interest.

Audit is supported by the clinical audit and effectiveness department and we encourage all levels of staff to undertake quality improvement projects.

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 and 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. Please be 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 DBS 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 and safety

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

Infection prevention and 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.

7. Royal Devon University Healthcare NHS Foundation Trust

Royal Devon University Healthcare NHS Foundation Trust provides a full range of acute services and integrated health and social care services in northern Devon, with 3000 staff serving a population of 170,000. It is expected that the population will rise to 186,000 by 2030. 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.

The Trust also provides various specialist services across the whole of Devon, including podiatry, specialist dental services, bladder and bowel services, sexual health and Sexual Assault Referral Centres.

The acute hospital is North Devon District Hospital (NDDH) in Barnstaple. NDDH offers a full range of emergency and trauma services, maternity, paediatric and neonatal services. The Trust also offers a full range of medical and surgical care, as well as many other sub-specialties within the main hospital and other locations, together with diagnostic and screening services. The Trust works with other organisations through a number of clinical networks, including working with Derriford on a neonatal network and Musgrove Park in Taunton on a vascular network. We also work with the Royal Devon and Exeter NHS Foundation Trust on a cancer network and to deliver ear, nose and throat services. We employ approximately 100 consultants in all major specialties and there are visiting consultants for some of our networked specialties.

Integrated health and social care teams operate across northern Devon and have 2500 people on their caseload at any one time. These teams include nursing, therapy, domiciliary care and specialist community teams for people with specific needs, such as lymphoedema, lung conditions and speech and language needs. The Trust runs its own domiciliary care service, Devon Cares, and operates as the prime provider, brokering care packages to local care providers.

The Trust has five community hospitals and two resource centres, which provide a range of services local to the population, including rehabilitation and outpatient clinics.

7.1. The Trust's vision, mission and values

Vision: Working together to promote health, wellbeing and independence

Mission

We will work together to promote your health, wellbeing and independence through:

- Striving for excellence in everything we do
- Caring for you like we'd care for our own family
- Challenging ourselves to improve the care we deliver
- Having the courage to do things differently
- Taking a partnership approach at every level to make care joined up

Values

Trust staff are encouraged to act in line with five key values in everything they do. These are:

- Respect diversity
- Act with integrity
- Demonstrate compassion
- Strive for excellence
- Listen and support others

7.2. Management structure

The Trust Board is led by the Chair with a team of five non-executive directors and five executive (voting) directors.

There are currently two clinical divisions: Planned Care and Unscheduled Care, which includes the community and health and social care service. Paediatric services sit within the Unscheduled Care Division. Within the division, the associate medical directors are Dr Karen Davies and Dr George Hands.

Sam Wadham Sharpe is the Divisional Director of Specialist and Clinical Support and the divisional nurse/matron is Charlotte Overney.

Interim senior management support and executive leadership is provided jointly by North Devon NHS Trust and by the Royal Devon and Exeter NHS Foundation Trust.

7.3. Acute hospital facilities

North Devon District Hospital has approximately 250 inpatient beds, including intensive care and cardiac care facilities.

The x-ray department has a CT scanner, MRI scanner and DEXA scanner, as well as providing a full range of x-ray and ultrasound. There is additional capacity provided by a mobile CT/MRI service. The cardio-respiratory department provides physiological measurements including pulmonary function tests, exercise testing and echocardiography. EEG, vascular and carotid ultrasound, and nerve conduction studies are also performed locally.

There are nine operating theatres, an accredited endoscopy suite and a new chemotherapy unit, with plans for further development. The Trust has a successful charity, Over and Above, which is currently raising funds to build a Cancer and Wellbeing Centre on-site for patients with a cancer diagnosis and other illnesses, and their families.

We have a rolling programme to update our wards, with recent refurbishments including our combined acute stroke and stroke rehabilitation unit, physiotherapy outpatients and our Medical Assessment Unit. Our emergency department is undergoing a major refurbishment to introduce a primary care screening service, following a £1m investment from the Department of Health.

We also opened one of the first purpose-built dementia wards at an acute hospital in the UK, Fortescue Ward, which is full of features to help patients feel at home, remain independent and reduce confusion. Caring with compassion is one of our key values, and we have recently appointed an admiral nurse for dementia and support open visiting for carers in line with John's Campaign.

Mental health services, including psychiatric liaison, are provided by Devon Partnership NHS Trust, which is currently developing its community services in a major reconfiguration. Inpatient mental health services are based primarily on the North Devon District Hospital site.

7.4. Academic facilities

The Medical Education Centre on the North Devon District Hospital site 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-flat screen 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.

7.5. 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, 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.

8. Living in North Devon

Devon is consistently voted one of the best places to live in England and readers of Country Life believe that people living in Devon enjoy a better quality of life than anywhere else in England.

The great outdoors

The beauty and quality of our landscapes are unsurpassed with over a third of the county designated as Areas of Outstanding Natural Beauty. There are over 450 miles of coastline along two stunning and distinctive coasts, the rugged wildernesses of two national parks, a UNESCO Biosphere Reserve, England's first natural World Heritage Site – the Jurassic Coast. The combination of spectacular Atlantic coastline, tidal estuaries and upland moors provides a wonderful environment to live and work in.

North Devon alone 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 arguably the most attractive and unspoilt in Devon. There are many small market towns, villages and hamlets, including a number of coastal resorts.

Our natural outdoor playground offers you the chance for a fantastic work-life balance. For the walkers and cyclists out there, we have 5,000km of public rights of way and over 250km of off-road cycle paths. Devon is a great place for fishing, sailing and equestrian sports, and we also have canoeists, surfers and paddle-boarders amongst our ranks. Devon also boasts some of the best golf courses in England and for those who love watching sport, nearby Exeter boasts the Premiership Rugby side Exeter Chiefs and Football League club Exeter City.

Great for families

North Devon is a safe and secure place to bring up a family with excellent education opportunities from pre-school, through school, to higher education and further education, including the nearby world-class Universities of Exeter and Plymouth.

For those of you who have little ones, we have to mention the popular family attractions of Crealy Great Adventure Park near Exeter and The Milky Way Adventure Park and The Big Sheep in Northern Devon.

Vibrant towns and cities

North Devon District Hospital is located in Barnstaple, which is North Devon's administrative and shopping centre. It is reputed to be the country's oldest borough and features the 13th century long bridge that spans the river Taw and a famous pannier market as well as modern shopping centres. There are cafes, bistros and restaurants as well as a local cinema and theatre.

Across North Devon and Torridge, we cover historic towns such as Ilfracombe with its stunning coastal scenery; attractive Bideford and the charming nearby villages of Appledore, Instow and Clovelly; the friendly market towns of Holsworthy and Great Torrington as well as South Molton, the gateway to Exmoor.

For city-lovers, nearby Exeter is renowned for its low crime rate, high quality of life and flourishing arts scene, which includes the Royal Albert Memorial Museum – the 2012 Museum of the Year – and the Exeter Phoenix arts centre.

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.

More information about the area and help with relocating can be found at www.ndhtjobs.com

9. Contacts

The Trust welcomes informal enquiries. Contact names are detailed below:

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