**LOCUM CONSULTANT GASTROENTEROLOGIST**

**JOB DESCRIPTION**

**Updated June 2024**

**ROYAL DEVON UNIVERSITY HEALTHCARE NHS FOUNDATION TRUST**

## LOCUM CONSULTANT GASTROENTEROLOGIST

**1. INTRODUCTION**

The Royal Devon University Healthcare NHS Foundation Trust is seeking to appoint a consultant gastroenterologist to join the department of Gastroenterology and Hepatology for its Eastern services, based at the Royal Devon and Exeter Hospital in Exeter. These roles form part of a wider integrated department that includes our Northern services based in Barnstaple, and which jointly provide telephone or video consultations for patients living across Northern, Eastern and Mid Devon. Our combined Gastroenterology department is friendly, successful and ambitious. The Royal Devon is a Trust which encourages and supports innovation, diversity, digital development and research.

**2. HIGHLIGHTS OF THE ROLE**

**Research and innovation**. Research active departments deliver better clinical outcomes for patients. We have a large programme of IBD and hepatology investigator-led and commercial research studies which have been internationally recognised for their programme of multi-site, award-winning research. Our hepatologists have also recently received NIHR funding to deliver the national REDUCE-2 study. We have a multimillion-pound research facility, dedicated research staff and collaborative links with researchers from across the University of Exeter. Funded time for the development of research proposals is available for interested consultants.

**Service development**. The Royal Devon’s core services support a population of more than 615,000 people across more than 2,000 square miles across Devon. The scale of operation brings opportunities to establish and develop innovative new services to better meet the needs of our patients such as harnessing technology to deliver remote patient consultations and disease monitoring.

**Teaching.** The Royal Devon enjoys close ties with the University of Exeter Medical School. We offer funded time for teaching of medical students and junior doctors. We are planning a regular programme of evening educational meetings, which will bring the Eastern and Northern teams together providing opportunities for your CPD.

**Career progression**. The size and structure of our team opportunities for rapid progression to areas of increased responsibility.

**On-call rotas**. All consultants are expected to participate in the emergency on-call gastrointestinal bleeding rota (approximately 1:13) and to conduct weekend ward rounds of inpatients with gastrointestinal / hepatological problems. There is no requirement to participate in the general medical take at either base hospital unless you wish to do so.

**Electronic patient record**. We went live with the EPIC electronic patient record system across our Eastern services in 2020 and our Northern services in 2022. We are optimising the way we use the system, but we are already seeing huge benefits for our patients. EPIC is transforming the way we deliver care across our Trust, allowing teams to share the caseload across Devon and provide care to patients remotely.

**Location and relocation**. We are fortunate to be based in the beautiful South West of England, with the cultural city of Exeter, the rolling moors of Exmoor and Dartmoor, and a multitude of stunning beaches on our doorsteps. We have low rates of crime and excellent education - schools and further education colleges are good or outstanding, and Exeter boasts a top Russell group university. We can offer you accommodation to support a visit and a relocation package should you choose to come to Devon.

A more comprehensive explanation of all of these elements can be found within this job pack, but if you have any questions then please do get in touch or arrange a visit to come and see us. Contact details are at the back of this pack.

**3. ABOUT ROYAL DEVON UNIVERSITY HEALTHCARE NHS FOUNDATION TRUST**

Our core services support a population of over 615,000 people and cover more than 2,000 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, we are 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.

**4. 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 (Sam Higginson), 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). Our Gastroenterology and Hepatology services are based at the Royal Devon and Exeter Wonford Hospital (RD&E) and North Devon District Hospital (NDDH), and sit within the Medicine Care Group.

**The Gastroenterology and Hepatology Department.**

The Royal Devon Gastroenterology and Hepatology team comprises 15 whole time equivalent (WTE) consultants with 13 WTE based in Exeter and 2 based in Barnstaple. Consultants deliver face to face care predominantly at their base site and will provide telephone or video consultations for patients across the entire Trust catchment. The department provides a comprehensive Gastroenterology and Hepatology service. Its core service supports a population of approximately 615,000 and specialist Gastroenterology and Hepatology services - including intestinal failure, specialist endoscopic services (including small intestinal endoscopy, colon capsule, Barrett’s endotherapy, EUS, ERCP and cholangioscopy) – are provided to a wider population across the South West Peninsula.

**Our Endoscopy Units**

The main endoscopy unit for our Eastern services is based at the RD&E hospital and comprises five endoscopy theatres. A satellite endoscopy unit operates from Tiverton Hospital. A major expansion at Tiverton Hospital is expected to be completed by 2025. The staffing includes a clinical nurse manager (matron), who oversees a large team of nursing, auxiliary and technical staff. ERCP and fluoroscopic procedures (three sessions per week) are undertaken in the medical imaging (radiology) department. Four clinical (nurse) endoscopists work in the department with others in training to increase this number to six. For our Northern services, the endoscopy unit is located at NDDH and comprises two endoscopy rooms with plans in place to increase this to four rooms. The staffing includes a clinical nurse manager (matron), who oversees a large team of nursing, auxiliary and technical staff. ERCP and fluoroscopic procedures (two sessions per week) are undertaken in the radiology department. One nurse endoscopist works in the department with others in training to increase this number to three. More than 17,500 endoscopic procedures are currently performed each year across all of our endoscopy units. The latest Olympus endoscopy equipment is available in all procedure rooms. All consultants are expected to contribute to the training of medical and non-medical endoscopy team members.

**Advanced Endoscopy**

A wide range of advanced endoscopic procedures are delivered at the RD&E Wonford hospital, including Spyglass cholangioscopy, endoscopic ultrasound, enteroscopy, Barrett’s endotherapy, large polyp resection, capsule endoscopy and POEM. Skills in advanced endoscopy and endoscopy training are welcomed. Skills in ERCP and endoscopic ultrasound are not required for this position.

**Inpatient Care**

Gastroenterology patients are nursed on a dedicated gastroenterology ward comprising 27 beds (Okement Ward), plus outlying patients on allied surgical wards. This provides facilities for the investigation and management of acute and elective patients with gastroenterological problems. A Higher Care Unit for patients with upper gastrointestinal haemorrhage and severe liver disease is proposed to be incorporated into the ward. The Consultant Gastroenterologists operate a “consultant of the ward” based system with two consultants in charge of all inpatients (one luminal and one hepatology consultant) in overlapping twoweek blocks. In week 1 the consultant sees all new patients and referrals and in week 2 looks after the patients admitted in week 1 plus subspecialty patients (luminal or hepatology), as well as having teaching commitments to medical students. Outpatient and endoscopy commitments are significantly reduced during this fortnight to allow appropriate time for inpatient work and student teaching. The ward consultant performs daily ward rounds and a single inpatient endoscopy session on the middle weekend between their first and second week on ward duty.

**Bowel Cancer Screening**

The Exeter, Mid, East and North Devon Bowel Cancer Screening Service is delivered by the Royal Devon at the RD&E Wonford hospital and NDDH. The service is supported by SSPs at both sites. There are twice weekly meetings in the department to discuss patients and 3-monthly governance and audit meetings between the two sites, as well as twice yearly peninsula network meetings.

**Inflammatory Bowel Disease**

The Royal Devon inflammatory bowel disease (IBD) service supports more than 6,000 patients across both the RD&E Wonford and NDDH sites. The comprehensive team includes excellent support from eight IBD specialist nurses (including two at NDDH), two IBD pharmacists, two dieticians and a clinical psychologist. There is a weekly joint IBD MDT meeting, several parallel medical-surgical clinics and a dedicated infusion facility based in Exeter. The quality of the service has been demonstrated by four rounds of national audit, the ‘21 GIRFT report and the ‘19/20 UK IBD standards benchmarking tool and patient survey.

**Gastrointestinal Surgery**

The department works closely with nine upper gastrointestinal surgeons and 13 colorectal surgeons. Parallel medical-surgical IBD clinics are carried out in Exeter with plans to develop a similar service in Barnstaple

**Nutrition**

Both main acute hospital sites have nutrition teams comprising dietician, nurses and pharmacist. The teams are proud of their collaborative working, accessibility, data collection, consistently low line sepsis rates and approach to early discharge. There is an established multi-disciplinary pathway for the assessment and management of patients referred for gastrostomy.

**Paediatric Gastroenterology**

The department works closely with consultant paediatricians with an interest in gastroenterology, Dr James Hart (Eastern services), Dr Christine McMillan (Eastern services) and Dr Tim Mason (Northern Services). A bi-monthly transition clinic is provided in the Department of Child Health. Paediatric endoscopy is currently provided by Dr Tariq Ahmad (Eastern services) and Dr Andrew Davis (Northern services) with full anaesthetic support.

**Hepatology**

The Royal Devon is accredited by the BSG as a level 2 liver centre. We participate remotely in weekly transplant listing meetings with our partners in King’s College, and provide transplant work-up and early post-transplant care locally. TIPS, and loco-regional therapies for HCC are performed in Exeter and we hold weekly cancer MDTs alongside HPB surgical colleagues in Plymouth. We are a hub centre for second line PBC therapies. Alongside a weekly complex case MDT, there is a weekly journal club, a dedicated liver histopathology service and fortnightly biopsy meetings. There is an active patient support group which meets monthly. The unit is working towards full IQILS accreditation.

**Gastrointestinal Motility Laboratory**

The GI Motility Laboratory is based in Exeter. This service is delivered by a medical physicist and four technicians providing an outpatient service for 24-hour oesophageal pH studies, high resolution manometry, Bravo pH capsule studies and anorectal studies.

**Radiology**

Excellent links exist with the Department of Medical Imaging and a full range of cross-sectional imaging and interventional procedures are available, including CT colonography, small bowel MRI, a 24/7 emergency Interventional Radiology service, TIPS, targeted therapies of liver lesions, PTC and duodenal / colonic stent insertion.

**Departmental Meetings**

* Inflammatory bowel disease MDT meeting (weekly)
* Colorectal Cancer MDT meeting (weekly)
* Upper gastrointestinal cancer MDT meeting (weekly)
* Benign gastroenterology MDT meeting with
* gastrointestinal surgeons, pathologists and radiologists
* (weekly)
* Liver MDT meeting (weekly)
* Liver histology meeting (fortnightly)
* Bowel Cancer Screening meeting (weekly)
* Audit / M&M meeting (monthly)
* Clinical Governance meeting (quarterly)
* Departmental business meeting (monthly)
* Endoscopy business / users’ group meeting (monthly)
* Evening educational meeting – F2F with dinner
* (2-monthly)

**Administration and Secretarial Support**

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 and internet access, will be available.

**Supporting Professional Activities**

You will 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 nonclinical work. This includes, but is not limited to:

* Appraisals, job planning and revalidation
* Personal and 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 and other clinical or managerial meetings
* An additional SPA may be available for:
	+ Service development
	+ Clinical management
	+ Research
	+ Additional teaching and training activities, including educational supervision
	+ Additional governance activities such as acting as an appraiser or mentor
	+ National audit programme projects

**Continuing Professional Development**

The Trust supports the requirements for continuing professional development (CPD) as laid down by the Royal College of Physicians and is committed to providing time and financial support for these activities.

**Revalidation**

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

**Research**

Investigator-led and clinical trial research has a prominent place in the Royal Devon department of gastroenterology and hepatology service and is supported by three full time research nurses. Patients are given the opportunity to participate in a wide number of NIHR gastroenterology and hepatology portfolio studies.

The University of Exeter Medical School has an excellent research reputation from basic biomedical research through to patient-centred research. The Exeter IBD research group includes three chief investigators (Ahmad, Goodhand, Kennedy), three study coordinators, two laboratory technicians and a bioinformatician. The group is supported by the University of Exeter and NIHR biomedical research centre and currently provides research training to three PhD students and two visiting fellows. The Exeter IBD group have led 10 UK NIHR UK-wide portfolio-adopted studies including PANTS, PRED4 and CLARITY IBD. There is also an ongoing collaboration between the department (Prasad) and the Engineering Faculty of the University of Exeter to develop new modalities for capsule endoscopy. Royal Devon University Healthcare NHS Foundation Trust The Research, Innovation, Learning and Development (RILD) building on the RD&E Wonford site is a £27.5m

development which consists of the Wellcome Wolfson Centre for Medical Research, the National Institute for Health Research (NIHR), Exeter Clinical Research Facility and a new Post Graduate Education Centre. The RILD is now home to a number of the Medical School’s laboratory-based research teams, comprising both clinical research areas and class two and three medical research laboratories, complete with offices, meeting rooms and write-up areas. Active assistance in the planning and design of research projects is available from the Research and Development Support Unit based on the RD&E Wonford hospital site. The Trust has an active academic strategy to facilitate research, development and teaching. Candidates who wish to pursue a research interest alongside their clinical work will be strongly encouraged by the department and are eligible for support from the University of Exeter Medical School

**University of Exeter Medical School**

The University of Exeter is high-ranking in both UK and global standings and is a member of the Russell Group of leading research-based institutions. It has ambitious plans for the future and has invested heavily in its facilities in recent years.

The Medical School’s cutting-edge research is driven by important clinical questions. It focuses on translational and applied research in areas of greatest health burden and greatest opportunity for scientific advance, principally: diabetes, cardiovascular risk and ageing; neurological disorders and mental health; environment and human health; and health services research. It spans basic through clinical science to clinical trials and health policy.

UEMS delivers two highly-regarded and innovative undergraduate degrees: the BSc in Medical Sciences and Bachelor of Medicine, Bachelor of Surgery (BMBS). In addition, the Medical School offers a range of postgraduate programmes and courses. The curriculum reflects today’s evolving models of care and patient experience in acute, primary and community care settings.

Building on the excellent educational reputation of the Peninsula College of Medicine and Dentistry and using problem-based learning in small groups, the BMBS programme reflects the belief that doctors need to adopt a socially accountable approach to their work and to understand the human and societal impact of disease as well as the community-wide context of contemporary healthcare provision.

UEMS graduates will be both capable and confident, whether they are clinicians, managers, educators or researchers and will be committed to life-long scholarship. Years one and two of the BMBS programme are based at the St Luke’s Campus in Exeter and lay the scientific foundations for the future years of the course. There is clinical contact from year one and students begin acquisition of a range of transferable skills, learning science within a clinical context.

UEMS students spend years three and four of their programme at the Royal Devon and Exeter (Wonford) Hospital and North Devon District Hospital, as well as at the Royal Cornwall Hospital in Truro and in their surrounding general practices and community health environments.

The consultants in the Gastroenterology Department are all involved in teaching students. There may be additional opportunities for the post holders to become involved with the UEMS by taking on additional specific teaching roles or offering special study units.

**5. OUTLINE JOB PLAN**

A provisional outline job plan is included but is subject to modification. The individual job plan and detailed timetable will be discussed with the successful candidate. Special interests will be accommodated where they are compatible with service requirements. All subspecialty interests in luminal gastroenterology will be considered. Skills in hepatology, ERCP and endoscopic ultrasound are not required for this position. 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.

**On-Call Rota for Emergency Gastrointestinal Endoscopy**

This is shared between the consultant gastroenterologists and hepatologists, currently on a one in thirteen basis (with prospective cover). The service is delivered with the assistance of a dedicated member of the endoscopy nursing team and with the support of anaesthetic teams where appropriate. Currently, the on-call commitment attracts a 3% salary supplement.

**General Medicine**

There is no requirement to join the on-call rota for the undifferentiated medical take. For 3.25 weeks per year, general gastroenterology commitments will be cancelled to allow the appointee to support a general medicine ward.

**Provisional Timetable**

These timetables are representative and will vary with subspecialist interests. The timetable will be agreed with the successful applicant upon appointment.







**6. 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.

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| **Requirement** | **Essential Attributes** | **Desirable Attributes** |
| **Qualifications and Training** |
| **Professional qualifications** | Primary Medical Qualification (MBBS or equivilant)Completion of higher specialist training in gastroenterology and General Internal Medicine | An appropriate higher degree or qualification (MD, PhD or equivalent)Qualification in Teaching and Learning |
| **Professional training and memberships** | Full GMC registration and licence to practiseEntry on Specialist Register for gastroenterology via:- CCT (proposed CCT date must be within 6 months of interview date)- CESR- European Community RightsMembership of Royal College of Physicians or equivalent qualification |  |
| **Clinical Experience** |
| **Employment** | Evidence of completion of a comprehensive broad-based 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 registrarEvidence of training in gastroenterology and general internal medicineCareer progression consistent with personal circumstances |  |
| **Clinical knowledge and skills** | Demonstrates ability to fulfil comprehensive gastroenterology and general medicine 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 problemsDemonstrates a clear, logical approach to clinical problems and an appropriate level of clinical knowledgeAble to prioritise clinical needCaring approach to patients | Demonstrates awareness of breadth of clinical issuesClinical feedback from colleagues and patients |
| **Non-clinical skills** |
| **Teaching** | Evidence of previous teaching and training experiencesWillingness and ability to contribute to departmental and Trust teaching programmes | Defined educational roles or qualificationsEvidence of teaching of undergraduates, junior doctors and multi-professional groups |
| **Management of change and quality improvement** | Demonstrates clear understanding of quality improvement and clinical governance within the NHSDemonstrates willingness to implement evidence-based practiceEvidence of effective personal contributions to clinical audit, governance and risk reduction | Evidence of innovative development and implementation of guidanceEvidence of involving patients in practice development |
| **Innovation, research, publications and presentations** | Understanding of the principles of scientific method and interpretation of medical literatureDemonstrates a critical and enquiring approach to knowledge acquisitionDemonstrates understanding of the research governance framework | Recent evidence of relevant research, presentations or publications |
| **Management and leadership experience** | Demonstrates familiarity with an understanding of NHS structures, management and current political issues, including an awareness of national strategic plan and constraintsDemonstrates 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 skillsCommunicates effectively with patients, relatives, colleagues, GPs, nurses, allied health professionals and outside agenciesEvidence of ability to work with multi-professional teams and to establish good professional relationships | Evidence if patient and colleague feedbackExcellent presentation skills, engages audience |
| **Other Requirements** |
| **Motivation and management of personal practice** | Punctual and reliableGood personal organisational and prioritisation skills, achieve deadlinesTakes responsibility for personal practice and is able to cope well with stressful situationsCommitment to continuing medical education and professional developmentFlexible and adaptable attitude | Demonstrates initiative in personal practiceWillingness to undertake additional professional responsibilities at local level |
| **Commitment to post** | Demonstrates enthusiasm for Devon as a place to live and work |  |

**4. 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 officer. The postholder 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 and Dental Terms and Conditions, in line with the Consultant Contract (2003). The current full-time salary scale ranges from £99,532 – £131,964. Should the on-call option be taken up, the on-call supplement is category A and attracts a supplement of 3% of basic salary.

**Leave**

Annual leave entitlement is as described in Schedule 18 of the Terms and Conditions of Service: Consultant (England) 2003. Further details are available in the Senior Medical Staff 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 the main acute hospital to which they are affiliated, normally within 10 miles or 30 minutes. Exceptions must be agreed with the medical director or chief executive. A relocation package will 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 a post holder immediately at any time during a period when a post holder 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**

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.

**Our Approach to Inclusion and Diversity**

Inclusion is fundamental to our approach to organisational development, culture, service improvement, and public and patient engagement.

It is one of our core values and we have an inclusion lead to provide strategic oversight to the inclusion agenda. Our inclusion steering group is chaired by our CEO, Suzanne Tracey, and reports its progress to the Board of Directors.

Our aim is to create a positive sense of belonging for everyone, regardless of their background or identity, and to value visible and invisible differences, so everybody is respected and valued, and everyone feels comfortable bringing their whole selves to work and able to reach their full potential.

We have staff inclusion champions who provide information to colleagues and promote inclusion opportunities. We also have a range of networks which colleagues can join, including:

• Disability network

• LGBTQ+ network

• Ethnic minority network

Once colleagues join us, we can share with them more information, including how to join any of these groups.

**4. CONTACTS**

The Trust welcomes informal enquiries and visits. Please feel free to contact the relevant people below:

**Chief Executive Officer**

**Sam Higginson**

Tel: 01271 311349

**Chief Medical Officer**

**Prof Adrian Harris**

Tel: 01271 314109

**Medical Director**

**Dr Karen Davies**

Tel: 01271 314109

**Associate Medical Director for Medicine**

**Dr Helen Lockett**

Tel: 01392 402895

**Care Group Director for Medicine**

**Karen Donaldson**

Tel: 01392 404596

**Lead Clinician for Gastroenterology**

**Dr Shyam Prasad**

Tel: 01392 402818

**Cluster Manager for Gastroenterology and**

**Endoscopy**

**Becky Ody**

Tel: 01392 403919