

Consultant Physicians in Healthcare for the Older Person and Stroke Medicine

#### **JOB TITLE**

Consultant Physician in HealthCare for the Older Person and Stroke Medicine

#### **DATE OF VACANCY**

April 2025

#### **BASE**

Royal Devon & Exeter Hospital

A Warm Welcome

Hi, I'm Adrian Harris, Chief Medical Officer at the Royal Devon University Healthcare NHS Foundation Trust. Thank you for the interest you have shown in working with us at what is an exciting time for our organisation. We are one of the largest healthcare Trusts in the country and we have ambitions to be a clinically-led, digitally-enabled teaching organisation.

Our Trust is a special place to work. We foster creativity, innovation and a personal approach to high-quality patient care. We are proud of our Healthcare for the Older Person, which is nationally recognised for its multidisciplinary specialist clinical care and research activity. We are committed to further developing this successful and cohesive team and want to bring the very best clinicians to Devon.

Good luck with your application and I look forward to meeting you soon.



Prof Adrian Harris

We welcome enquiries for further information and strongly encourage informal visits either in person or virtually so that you can get a feel for what it's like to work with us. A list of contacts is detailed in the final section of this pack.



# **Application and Advisory Appointments Committee**

The posts are offered on a whole-time basis (10PA) but suitably-qualified applicants who wish to work part-time will be considered. We are committed to flexible working arrangements, including job sharing, and we will discuss these arrangements with any shortlisted candidates.

We welcome applications from established consultants and senior trainees who will be within six months of completion of specialist training at the time of the Advisory Appointments Committee.

Applicants must have completed specialist training in Geriatric Medicine and have entered on the GMC Specialist Register prior to taking up the appointment.

"We are committed to flexible working arrangements, including job sharing."



### Introduction

The Royal Devon University Healthcare NHS Foundation Trust is seeking to appoint a Consultant Physicians in Healthcare for the Older Person and Stroke Medicine to join the department for its eastern services, based at the Royal Devon & Exeter Hospital.

We are looking for enthusiastic, innovative and flexible individuals to develop services for our elderly patients and progress integration across the Trust supported by our departmental partners in Royal Devon and Exeter Hospital. There is an existing dementia and delirium friendly ward, specialist dementia nurse support, and a newly constituted Frailty Team working within our Acute Hospital at Home service with close links to social care teams.

Colleagues from Royal Devon and Exeter Hospital provide 4 days a week consultant cover, delivering clinical care leadership, training and education. It is envisaged that closer integration in the future will support sub-speciality interests and research as needed.

"Our Trust is frequently voted as the top acute and community trust in the country for staff satisfaction"

Successful candidates will be given a high degree of autonomy and time to undertake supporting professional activities including training and teaching or to pursue sub-speciality interests. This is a fantastic opportunity to design a consultant post to suit your professional aspirations. There is scope for working within frailty, orthogeriatrics, movement disorders, syncope, stroke and peri-operative medicine.

The Royal Devon is a Trust which encourages and supports innovation, diversity, digital development and research.

### Highlights of the role

Research and innovation. [Research active departments deliver better clinical outcomes for patients. We have a large programme of investigator-led and commercial research studies which have been internationally recognised for their programme of multisite, award-winning research. Research interests are strongly encouraged and supported. 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.

**Training and development.** [There are ample opportunities for teaching and training throughout the Trust and the region. The department has regular medical student attachments from the local medical school. The Trust encourages involvement with research and national clinical audit.]

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 create opportunities for rapid progression to areas of increased responsibility.

**On-call rotas.** Currently, the medical on-call rota is shared by the team on a 1 in 11 basis. The commitment is on site weekday evenings (5pm - 8pm

post taking on MAU) and 15 hours over the weekend (split days Saturday and Sunday). The remaining cover is off site on-call. The on-call commitment attracts 1 PA and a 1% supplement.

The Trust is working towards increasing the number of participating physicians to provide more robust out of hours support of the Acute Medical Unit and wards at the weekend. This will also allow expansion of our Same Day Emergency Care (SDEC) service.

An average medical take is 30 patients over the 24-hour period. There is a registrar 24/7 who is supported by a number of junior doctors. We are continuing to develop an Advanced Care Practitioner model to support clinical workforce.

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.

# 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.

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.



# 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 (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 Healthcare for the Older Person services are based at the Royal Devon and Exeter Hospital (Wonford) (RD&E) and North Devon District Hospital (NDDH), and sit within the Medicine Division.

Our Trust wide operational service structure is divided into five care groups, each with a medical director, a care group director and a director of patient care. For Medicine, the medical director is Karen Davies, the care group director is Karen Donaldson and the director of patient care is Nolween Luke. All permanent medical staff are members of the Medical Staff Committee which has an elected Chairperson who represents the group at the Trust Management Committee.

More information about our structure and services can be found on the Trust website at www.royaldevon.nhs.uk

# The Department of Healthcare for Older People

#### Consultant medical staff

[The Healthcare for Older People (HfOP) Department is part of the Medical Services Division. This post is based in the HfOP department at the Royal Devon and Exeter Hospital. The Department comprises:

- 3 wards for the acute assessment and early rehabilitation of elderly patients (Ashburn, Kenn and Bovey wards);
- 1 acute HfOP/movement disorders ward shared with Neurology (Bolham ward)
- 1 direct admission Acute Care of the Elderly (ACE) Frailty Unit (Capener ward)
- 1 acute general medical/ infection control ward (Torridge Ward);
- Orthogeriatric care on the Trauma Unit (Durbin ward), in partnership with the Trauma and Orthopaedic teams;
- The Acute Stroke Unit (ASU; based on Clyst Ward) (28 beds plus 2 direct stroke admission trolleys).
- Allied Health Professional (AHP) consultant-led 12bedded Stroke Rehabilitation Unit (Yealm 'SRU');
- 3 inpatient units for rehabilitation of frail/older patients are established within the local Devon ICB are in Sidmouth, Exmouth and Tiverton

The Department has over 2,000 admissions annually to its acute geriatric assessment beds. In addition, there are over 1,300 admissions per year to the Acute Stroke Unit of patients with suspected acute stroke.

The Department of HfOP provides the acute frailty service, based on the 'Acute Care of the Elderly (ACE) Unit' (Capener Ward) which provides input to AMU and ED. The ACE team comprises a Consultant Geriatrician (morning and afternoon shifts), specialist nurses, therapists, Physician associates, psychiatric liaison nurses and voluntary sector representatives from Age UK.

The objective of the ACE unit is admission avoidance and expediting discharge, while delivering Comprehensive Geriatric Assessments CGA for the frail elderly. This work is enhanced by our newly formed Virtual ward for Frailty and Same day emergency care unit for frail older patients.

At present the HfOP Department has five general medical/HfOP clinics at the Royal Devon & Exeter Hospital. In addition, there are regular clinics held at Axminster, Seaton, Sidmouth, Exmouth, Budleigh Salterton, Cullompton, Ottery St Mary, Honiton, Crediton, Tiverton and Okehampton.

Other specialist clinics run by the department include a memory clinic (jointly with the Devon Partnership Trust), movement disorders and falls clinics.

Community rehabilitation units are established within the local Devon ICB area, and these are also run by RDUH Community Services division. These units are based at Exmouth, Sidmouth and Tiverton. The aim of the outpatient Community Rehabilitation service is to facilitate rehabilitation and achievement of optimal function and early discharge from hospital Older frail patients.

There are 18 substantive NHS medical Consultants in the Department, two Consultants who have retired but have returned to work in the department, two clinical academics, one Consultant Physiotherapist with a team Speciality Registrars including Academic Clinical Fellow posts and staff grade doctors:

#### Dr Aisha McClintock

Consultant Physician, HfOP, Medical Lead for HfOP and Training Programme Director (Physician Associates)

Dr Jackie S Stephenson

Consultant Physician, HfOP Deputy medical lead for HfOP and Clinical Lead for Doctors in Training, Medical Services Division

Dr Michael Jeffreys

Consultant Physician HfOP, North Devon Hospital HfOP Clinical Lead

Professor Martin A James

Consultant Stroke Physician/ Honorary Clinical

Professor (UEMS)

Dr Susie A Harris

Consultant Physician, HfOP

Dr Jane E Sword

Consultant Stroke Physician and Geriatrician and

Clinical Director, Medical Services Division

Dr Anthony G Hemsley

Consultant Stroke Physician and Medical Director for

Urgent and Emergency Care for the Devon ICB

Dr Paul D Mudd

Consultant Stroke Physician and Geriatrician

Dr Salim P Elyas

Consultant Stroke Physician and Geriatrician/Honorary

Clinical Senior Lecturer (UEMS)

Dr Jessica M Kubie

Consultant Stroke Physician and Geriatrician

Dr Nicola C Mason

Consultant Stroke Physician and Geriatrician

Professor Ray P Sheridan

Consultant Physician, HfOP, Director of Medical

Education and Associate Clinical Professor (UEMS)

Professor W David Strain

Associate Professor in Cardiometabolic

Health/Honorary Consultant in Stroke and General

Medicine,

Dr Anna E Hinton

Consultant Physician, HFOP Movement Disorder

Specialist

Dr James T Mulcahy

Consultant Physician, HfOP and Orthogeriatrics

Dr Lisa Y Bartram

Consultant Physician, HfOP and Orthogeriatrics

(LTFT)

Dr Joe W Butchart

Consultant Physician, HfOP /Honorary Clinical Senior

Lecturer (UEMS) Dementia Specialist

Dr Sarah S Jackson

Consultant Physician, HfOP Movement disorder

specialist

Dr Suzy V Hope

Consultant Physician, HfOP Research Fellow

Dr Lindsay Jones

Consultant Physician, HfOP Movement disorder

specialist, HfOP Governance Lead

Dr Maggie Cairns

Consultant Physician, HfOP Frailty Specialist

Dr Tomoaki Hayakawa

Consultant Physician, HfOP

Professor Jane Masoli

Associate Professor in Geriatrics (UEMS) and

Honorary Consultant Physician, HfOP

Dr Angie Logan

Consultant Physiotherapist, Stroke Rehabilitation

Northern clinical team -

Dr Mike Jeffreys

Consultant in geriatric/general medicine

Dr Riaz Latif

Associate specialist in stroke

Dr Susie Harris

Consultant in geriatric/general medicine (sessional

basis from RD&E)

Dr Julia Saunders

Associate specialist in community geriatrics

Dr Aye Nay Win

SAS in neurology/stroke/HfOP medicine

Fiona Duncan

Specialty and associate specialist

#### PROFESSIONS ALLIED TO MEDICINE

Consultants at the Trust have access to an amazing team of specialised support including research fellows, specialist nurses in Frailty, Dementia and Parkinson's Disease, therapists, psychiatric liaison nurses and voluntary sector representatives from AgeUK Exeter.

#### **Departmental meetings**

There is an active program of regular postgraduate education including a weekly Medical Department meeting, monthly 'Schwartz Centre' psychosocial grand round, weekly neuroradiology meeting and weekly HfOP departmental meetings.

## 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. The appointee will have shared office accommodation at the RDUH RD&E site.



# 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 full-time consultants receive 1.5 core SPA sessions for generic non-clinical 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

Further details are published in the job planning policy.

# 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. Patients are given the opportunity to participate in a wide number of studies.

The University of Exeter Medical School has an excellent research reputation from basic biomedical research through to patient-centred research. 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 HfOP department has a strong reputation for engagement in research and consistently high recruitment for many studies in the fields of Stroke, Parkinson's disease and Dementia. The clinical research base of the Stroke Department is expected to see continued growth. Five members of the HfOP department (two in Stroke) hold honorary research contracts with the College of Medicine and Health of the University of Exeter Medical School (UEMS), and there are also colleagues within the department who hold both joint University and NHS contracts. The Department has an Honorary Clinical Professor (Prof. Martin James) and a Professor in Diabetes and Vascular Preventative Medicine/Honorary Consultant in Stroke and General Medicine (Professor David Strain), both of whom hold broad research portfolios. Research active departments deliver better clinical outcomes for patients.

Since the inception of the NIHR Stroke Research Network in 2008 the South West Peninsula has seen the greatest increase in Stroke research activity of all the original 8 English Stroke Research Networks. The RD&E now hosts the successor Clinical Research Network for the SW Peninsula, with Prof. Martin James as the regional Clinical Specialty Lead for Stroke.

The recent portfolio of NIHR-adopted clinical research studies in stroke includes hyperacute pharmacological studies (e.g. TASTE, an RCT of Tenecteplase in acute ischaemic stroke with imaging-confirmed penumbra), acute intervention studies (e.g. TWIST) and post-acute/rehabilitation and prevention studies (e.g. PLORAS, SOSTART, CONVINCE, OPTIMAS). The Research Network supports three Research Practitioners and a Trials Administrator. There is also an active research programme in dementia, in conjunction with the Devon Dementia Collaboration.

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.

As a department we have a reputation for, and are enthusiastic in, the delivery of high-quality teaching and training. The Department has a substantial commitment to the teaching and training of undergraduate medical students in the University of Exeter Medical School (UEMS) through the provision of ward-based teaching, Special Study Units, lectures and other attachments.

There are rotational responsibilities to undergraduate teaching with this post. During term-time year 3, 4 and year 5 UEMS students are attached to the Stroke Unit and the HfOP wards.

The appointee would be welcome to contribute to an active program of teaching to Doctors in Training (DiT) and shared responsibility for training specialist registrars in General/Acute Medicine, Stroke Medicine and Geriatric Medicine. All Consultants in the department are involved with undergraduate and postgraduate medical education as clinical and educational supervisors.



### Outline job plan

A national outline job plan is included but is subject to modification. The individual job plan and detailed timetable will be discussed with the successful candidates and will reflect their sub speciality interests.

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.

A four-day job plan will be considered and could reflect on call commitments.

It is expected that the initial job plan will be agreed within three months of the tart date and will be reviewed annually or earlier, if necessary.

	PAs
DCC	
Full teaching ward round, ward referrals, board round, clinics, new patient review, morning report	6.5
Admin	1.5
SPA	1.5
AR - including appraisers, Educational Supervision, Medical Student teaching	0.5
Total	10

#### **ON-CALL ROTA**

Currently, the medical on-call rota is shared by the team on a 1 in 11 basis. The commitment is on site weekday evenings (5pm - 8pm post taking on MAU) and 15 hours over the weekend (split days Saturday and Sunday). The remaining cover is off site on-call. The on-call commitment attracts 1 PA and a 1% supplement.

The Trust is working towards increasing the number of participating physicians to provide more robust out of hours support of the Acute Medical Unit and wards at the weekend. This will al.

### **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 training		
Professional qualifications	Primary Medical Qualification (MBBS or equivalent).  Applicants must have completed specialist training in [ADD DETAILS OF SPECIFIC TRAINING HERE] prior to taking up the appointment.	An appropriate higher degree or qualification (MD, PhD or equivalent).  Qualification in Teaching and Learning.
Professional training and memberships	<ul> <li>Full GMC registration and licence to practise.</li> <li>Entry on Specialist Register for *** via:</li> <li>CCT (proposed CCT date must be within 6 months of interview date)</li> <li>CESR</li> <li>European Community Rights</li> <li>Membership of Royal College of *** or equivalent qualification.</li> </ul>	Evidence of up to date knowledge and practice in Perioperative medicine (CME, courses, relevant society memberships)
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 registrar.	
	Evidence of training in [ADD DETAILS OF SPECIFIC TRAINING HERE].	
	Career progression consistent with personal circumstances.	
Clinical knowledge and skills	Demonstrates ability to fulfil *** duties at a consultant level. Able to take full and independent responsibility for clinical care of patients and provide an expert clinical opinion on a range of problems.  Demonstrates a clear, logical approach to clinical	Demonstrates awareness of breadth of clinical issues  Clinical feedback from colleagues and patients
	problems and an appropriate level of clinical knowledge.	
	Able to prioritise clinical need.	
	Caring approach to patients.	

Requirement	Essential attributes	Desirable attributes
Non-clinical skills		
Teaching	Evidence of previous teaching and training experience.  Willingness and ability to contribute to departmental and Trust teaching programmes.	Defined educational roles or qualifications.
		Evidence 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 NHS.	Evidence of innovative development and implementation of guidance.
	Demonstrates willingness to implement evidence-based practice.	Evidence of involving patients in practice development.
	Evidence of effective personal contributions to clinical audit, governance, and risk reduction.	Examples of quality improvement implementation specific to geriatric medicine
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 plan and constraints.	Experience of formal leadership roles or training.
	Demonstrates willingness to lead clinical teams and develop an effective specialist clinical service.	
Communication and personal skills	Good spoken and written English language skills.	Evidence if patient and colleague
	Communicates effectively with patients, relatives, colleagues, GPs, nurses, allied health professionals	feedback.  Excellent presentation skills, engages
	and outside agencies.  Evidence of ability to work with multi-professional teams	audience.
	and to establish good professional relationships.	
Other requirements		
Motivation and management of personal practice	Punctual and reliable.	Demonstrates initiative in personal
	Good personal organizational and prioritization skills, achieve deadlines.	practice.  Willingness to undertake additional
	Takes responsibility for personal practice and is able to cope well with stressful situations.	professional responsibilities at local level.
	Commitment to continuing medical education and professional development.	
	Flexible and adaptable attitude.	
Commitment to post	Demonstrates enthusiasm for Devon as a place to live and work.	

#### 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 Chief Medical
Officer 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 £105,504 to £139,882 with five thresholds. The on-call supplement is category B and attracts a supplement of 1% 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 cConcerns

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, Sam Higginson, 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
- Neurodiversity Network

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





### **Living in Devon**

Devon offers a quality of life few other English counties can match. Where else will you find such a unique landscape that encompasses over 450 miles of dramatic coastline, rugged moorland and gently winding rivers?

Interspersed with vibrant market towns, chocolate-box villages and sleepy hamlets, it is easy to see why we are consistently voted as one of the top places to live in the country.

Devon's outdoor lifestyle is its biggest draw. This natural playground is unsurpassed with over a third of the county designated as Areas of Outstanding Natural Beauty. You'll have over 5,000 km of footpaths and 250km of off-road cycle paths to explore, not to mention endless opportunities to surf along the vast stretch of Atlantic coastline or paddleboard across tidal estuaries.

There are good transport links to the rest of Devon, including the M5 and regular trains to Exeter with its art galleries, museum and theatres. Your taste buds will find plenty to savour here too - Devon is rightly proud of the farmers and producers who make the South West one of the best regions in the UK to enjoy locally produced food and drink. Northern Devon also benefits from an excellent range of community, private schools and colleges for further education.

Whether you fancy surfing or fishing, cycling or climbing, fine dining or hearty pub fare, the county really does have it all.

"Never let it be said, it's all work and no play. Not here in Devon."

#### Vibrant cities

A thriving, forward-looking city, Exeter is home to the world-leading Met Office, boasts the UK's first leisure centre built to ultra-energy-efficient Passivhaus standard and has one of the top 20 universities in the country.

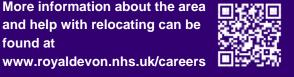
At the very heart of the city is Exeter Cathedral, an architectural gem surrounded by cobbled streets and beautiful old buildings, many of them shops and eateries. In the compact city centre, you can stroll alongside parts of the ancient Roman wall, visit the remains of Rougemont Castle or explore the depths of Exeter's historic Underground Passages. Exeter Phoenix Arts Centre and the Royal Albert Memorial Museum (RAMM), add to the cultural mix, plus you'll have performance venues such as the Northcott Theatre, the Barnfield Theatre and Corn Exchange close to the city centre.

The main shopping area provides a wide range of leading High Street brands alongside an eclectic mix of independent shops, many to be found in the narrow thoroughfares off Cathedral Close and the High Street. Nearby Fore Street is a haven for all things vintage and retro. Exeter also has a historic guayside, a great spot to sit and watch the world go by at one of the many cafes and restaurants with al fresco dining.

#### Friendly market towns

You'll find an array of historic towns across North Devon and Torridge such as Okehampton, famed for its easy access to stunning Dartmoor. Heading towards North Devon, you'll also have delights such as the charming harbour town of Ilfracombe and the riverside port of Bideford.

More information about the area and help with relocating can be found at



#### **Great for families**

Outstanding Ofsted-rated primary schools, highranking secondaries and proximity to two leading universities are some of the biggest draws to Devon, making this a desired destination for families. Whether you have young children or teenagers in tow, the sheer quality of education and extra-curricular activities available are guaranteed to impress.

#### Living and travelling

Housing wise, housing stock is diverse, with everything from thatched moorland cottages to Georgian townhouses and contemporary builds. Time and distance are different here, too. Many residents in this - the fourth largest county in the UK - are happy to travel up to an hour or more for work. This means there's a great deal of choice when it comes to finding somewhere to live.

Transport links are also good. The county has more than 8,000 miles of road – the largest road network anywhere in the country, although (it has to be said) many are narrow Devon lanes.

From Exeter's main station, Exeter St David's, there are fast and frequent rail services to Bristol (one hour), London (around two hours to Paddington) and Birmingham (under three hours to Birmingham New Street). Exeter itself has an impressive rail network with no fewer than nine stations serving different parts of the city. There are a number of branch lines providing services to Mid and North Devon, Dartmoor and the Exe Estuary. Exeter International Airport provides flights to numerous destinations throughout the UK, Europe and even North America.

#### Support with relocation

Our People Teams will help you get settled, providing financial relocation support, help with somewhere to live, registration for children at one of the excellent local schools and support for partners seeking employment.

#### **Contacts**

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

#### **Chief Executive Officer**

Sam Higginson

Email: penny.manley@nhs.net (PA to Chief Executive and Deputy Chief Executive)

#### **Deputy Chief Executive Officer**

Chris Tidman

Email: penny.manley@nhs.net (PA to Chief Executive and Deputy Chief Executive)

#### **Chief Medical Officer**

**Prof Adrian Harris** 

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#### **Medical Director**

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#### **Deputy Medical Director**

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#### Lead clinicians

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Jackie Stephenson

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#### **Cluster Manager**

Dan Smith

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### **People Business Partner, Medicine - Eastern Services**

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#### **Executive and Specialist Recruitment Lead**

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