

# LOCUM CONSULTANT POST APPLICATION INFORMATION PACK

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Locum Consultant in General Surgery, Colorectal,  
Upper GI Surgery

Post Reference 185-1533-9554

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This post offers an opportunity for a Locum Consultant in General Surgery/Colorectal/Upper GI Surgery at North Devon District Hospital, the Northern site of the new Royal Devon University Healthcare NHS Foundation Trust. Details of the post and descriptions of the department & Trust are included in this information pack as follows:

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## INTRODUCTION

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Applications are invited for the post of Locum Consultant in General Surgery/Colorectal/Upper GI Surgery at North Devon District Hospital. The successful applicant will join a dynamic team of Emergency, Upper GI and Colorectal surgeons that has expanded over recent years; with four consultant colorectal surgeons, four upper GI consultants and three emergency general surgical consultants.

The successful applicant will be expected to support the development of the emergency surgical department. It is essential that candidates have training including advanced laparoscopic skills, endoscopic skills with JAG accreditation or equivalent experience in GI Endoscopy.

Emergency admissions come through a dedicated Surgical Admissions unit, with ancillary Ambulatory Assessment Area. There is a five day a week emergency surgical clinic. The trust is one the highest performing trust in the United Kingdom in performing early cholecystectomy after index admissions with gallstone disease. It is envisaged that the successful applicant will form part of the hot gallbladder rota.

There is a weekly Colorectal Cancer MDT with a combined Hepato-biliary MDT by video-link every other week. North Devon District Hospital (NDDH) is a designated Cancer Unit, supported by oncologists from the Royal Devon & Exeter Trust with a dedicated Chemotherapy Unit. Radiotherapy services are sited at the Royal Devon & Exeter Hospital. .

The hernia centre at NDDH offers a tertiary referral service for the region and also receives national referrals for advanced management of complex abdominal wall hernias. The surgeons have developed well-defined patient pathways for the management of complex hernias and offer advanced techniques to this complex group of patients, including anterior and posterior component separation. In addition the hernia centre has an active research program.

The department has Specialty Registrars, Core Surgical Trainees and Foundation Doctors, rotating within their respective Peninsula Training Programmes. There are also a number of experienced SAS surgeons and clinical fellows. Recently, we have trained a cadre of Physician's Associates and advanced clinical practitioners who support the teams and the emergency take. We are allied to the University of Exeter Medical School and are actively involved in teaching medical students. There are ample opportunities for teaching and training throughout the Trust and the region. The Trust encourages involvement with research and national clinical audit.

The post is based at North Devon District Hospital (NDDH), the northern site of the new Royal Devon University Healthcare NHS Foundation Trust. We are a newly formed NHS Trust with a vast geographical footprint, serving a population of over 615,000 people and covering more than 2000 square miles across Devon. This makes us one of the largest providers of integrated health care in the UK, and the biggest employer in Devon with a workforce of over 15,000 staff.

Our services include two acute hospitals, 17 community hospitals, outpatient clinics, and community teams who care for people within their own homes. We also provide primary care and a range of specialist services, stretching from coastline to coastline, extending our reach throughout the South West Peninsula as far as Cornwall and the Isles of Scilly.

Putting this into perspective, our urgent and emergency services saw more than 183,000 attendances last year, more than 500 people a day.

Established in April 2022, the Royal Devon brings together the expertise of Northern Devon Healthcare NHS Trust and the Royal Devon and Exeter NHS Foundation Trust, embracing change and innovation to develop new medical models, new ways of working, ground-breaking research and huge levels of investment into new infrastructure, equipment and facilities. There has never been a better time to join us.

The scale of operation provides amazing opportunities for our consultant specialists to develop their careers and progress in their field of interest, from harnessing innovation to deliver care to rural patients, or undertaking award-winning clinical research. Last year for example, our gastroenterology team were recognised at the NIHR Clinical Research Network (BSG/NIHR CRN) research awards for making an outstanding contribution to the NIHR portfolio studies.

The Royal Devon is a university hospital Trust and in addition to the teaching opportunities that you would expect, there are educational programmes, specialist networks and the opportunity to receive teaching as well as the training of medical students.

In terms of your own development, wherever you are based there are rotational opportunities available to cover a diverse mix of patients, complex conditions and specialist procedures, working with the latest equipment and under the guidance of senior consultant physicians that are at the very top of their game.

Like many other NHS organisations, our patients are treated by multidisciplinary teams. At the Royal Devon we invest heavily in training and development, supporting our teams to work at the very top of their registration. Typically, this means that you will be free to spend more time with patients, working in a consultative role or developing the service.

Outside of work, with miles of golden beaches, 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. Please search #loveNDHT on YouTube for more details.

## **JOB DESCRIPTION**

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### **Post Title**

Locum Consultant in General Surgery

### **Clinical Commitments**

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

### **Outpatients**

There are regular elective outpatient clinics at North Devon District Hospital. Clinics at peripheral hospitals may also be scheduled. If agreed, these would not exceed alternate weeks and travel time would be included as direct clinical care (DCC). While off-site, clinical cover for inpatients would be provided by the on-call consultant.

There are Surgical Emergency Clinics each weekday during the “hot week”. This enables rapid senior assessment and has been heralded by NHSI as excellent care. We have a dedicated Surgical Assessment Unit, the set-up of which was used as an exemplar by the NHS England Seven-Day Services team. This has a co-located ambulatory assessment area to facilitate rapid assessment of ambulatory patients, where possible.

### **Endoscopy**

Regular endoscopy lists are scheduled.

### **Operating Lists**

The job will include a number of day surgery sessions as detailed in the attached timetable. Sessions include time to see patients pre- and post-operatively and appropriate time for ward rounds of inpatients. The on-call consultant covers the dedicated emergency list during the “hot week”.

### **Ward rounds**

It is expected that the successful candidate will perform routine and on-call ward rounds.

### **On Call Rota**

The on-call rota will be equally shared on a 1 in 11 basis with prospective cover included in the job plan. The emergency work is arranged as a “hot week” Monday to Thursday with a post-take session on Friday and a “hot weekend” from Friday to Monday morning with post-take sessions on Monday. Consultants have no elective commitments during the “hot week” but remains on site from 8am to 8pm to facilitate consultant review of all new patients within 14 hours and fulfil the requirements of Seven-Day Services. Overnight cover is provided by a separate consultant to allow adequate rest.

The colorectal and upper GI consultants also provide cover on weekdays when a non-specialist surgeon is on “hot week”. The UGI and gastroenterology consultants participate in the separate GI bleed endoscopy rota, arranged to coincide with the surgical on-call as far as possible.

## **Emergency Calls**

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

## **Clinical Administration**

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

## **Supporting Professional Activities**

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

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

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

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

Non-generic SPA work may include:

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

Further details are published in the job planning policy.

## **Relationships**

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

We encourage development of regional networks with other providers and links with the Royal Devon & Exeter and Derriford services are already in place.

## **OUTLINE JOB PLAN**

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

	<b>PAs</b>
<b>DCC</b>	
Predictable & unpredictable on-call work	1.50
Weekday emergency work, including scheduled emergency lists	2.10
Routine outpatient clinics	1.00
Elective operating lists	1.00
Endoscopy Sessions	1.00
Flexible ward rounds	0.40
MDT Meetings	0.50
Administration	1.00
<b>SPA</b>	
Generic	1.00
Non-generic	0.50
<b>Total</b>	<b>10.00</b>

### **Provisional Timetables**

Timetables are on a 20-week cycle to accommodate the emergency working pattern.

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

DCC admin and SPA time (generic & non-generic) has not been specified in this provisional timetable but will be timetabled for clarity. It is accepted that, on occasion, Administrative or SPA work may need to be time-shifted to accommodate other commitments.

Shaded boxes indicate days on which the consultant will provide overnight non-resident on-call cover from 8pm until 8am.

<b>Week</b>	<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Weekend</b>
<b>1</b>	Theatre	MDT	Endoscopy	Theatre	OPD	
<b>2</b>		MDT	Endoscopy	Theatre	OPD OPD	
<b>3</b>	Endoscopy	MDT	Endoscopy		OPD	
<b>4</b>	On-call	On-call MDT	On-call	On-call	Post Take	
<b>5</b>		MDT	Endoscopy	Theatre	OPD	
<b>6</b>		MDT	Endoscopy	Theatre	OPD OPD	
<b>7</b>		MDT	Endoscopy		On-call	On-call
<b>8</b>	Post Take	MDT	Endoscopy	Theatre	On-call	
<b>9</b>		MDT	Endoscopy	Theatre	On-call	
<b>10</b>	Endoscopy	MDT	Endoscopy		On-call	



## PERSON SPECIFICATION

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

Requirement	Essential Attributes	Desirable Attributes
<b>Qualifications &amp; Training</b>		
<b>Professional Qualifications</b>	<p>Primary Medical Qualification (MBBS or equivalent).</p> <p>An appropriate higher general surgical qualification.</p>	<p>Distinctions, Prizes, Scholarships.</p> <p>Additional postgraduate qualifications.</p>
<b>Professional Training &amp; Memberships</b>	<p>Full GMC registration &amp; licence to practice.</p> <p>Entry on the GMC Specialist Register in General Surgery via:</p> <ul style="list-style-type: none"> <li>• CCT or CESR (CP). Proposed CCT/CESR (CP) date must be within 6 months of interview</li> <li>• CESR or</li> <li>• European Community Rights</li> </ul> <p>Must be on the Specialist Register by the time of commencement in post.</p>	
<b>Clinical Experience</b>		
<b>Employment</b>	<p>Evidence of completion of a comprehensive broad-based, general surgical training programme at Specialty Registrar level or equivalent.</p> <p>or</p> <p>Clear demonstration of equivalent experience, with a minimum of six years at a level comparable with or senior to Specialty Registrar.</p> <p>Evidence of training in emergency general surgery</p> <p>Career progression consistent with personal circumstances.</p>	<p>Specialist fellowship in subspecialty interest.</p> <p>Additional sub-specialty experience.</p>
<b>Clinical Knowledge and Skills</b>	<p>Demonstrates ability to fulfil comprehensive general surgery duties at consultant level. Able to take full and independent responsibility for clinical care of patients and provide an expert clinical opinion on a range of problems.</p> <p>Demonstrates a clear, logical approach to clinical problems and an appropriate level of clinical knowledge. Able to prioritise clinical need.</p> <p>Portfolio of practical clinical experience, including evidence of ability to perform complex open and laparoscopic emergency surgical procedures.</p> <p>JAG accreditation in Upper GI endoscopy or equivalent experience.</p> <p>Caring approach to patients.</p>	<p>Demonstrates awareness of breadth of clinical issues.</p> <p>Clinical feedback from colleagues and patients.</p>

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

<b>Commitment to post</b>	Demonstrates enthusiasm for North Devon as a place to live and work.	
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## THE GENERAL SURGERY DEPARTMENT

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### Staffing

The general surgery department at North Devon District Hospital is staffed by:

- Twelve consultant surgeons, to which this post will be incorporated:
  - Mr Iain Bain Colorectal Surgeon
  - Ms Ceri Beaton (Specialty Lead) Colorectal Surgeon
  - Mr Mark Cartmell Colorectal Surgeon
  - Mrs Katie Yeadon Colorectal Surgeon
  - Mr David Bunting (Specialty Lead) Upper GI Surgeon
  - Mr John Findlay Upper GI Surgeon
  - Mr David Sanders (Clinical Director) Upper GI Surgeon
  - Mr Matthew Wiggans Upper GI Surgeon
  - Ms Kelly Willis Emergency General Surgeon
  - Mr Anjum Arain Emergency General Surgeon
  - Ms Karin Pansell (Specialty Lead) Emergency General Surgeon
  - Mr David Williams Emergency General Surgeon
- Seven SAS surgeons
- Three Specialty Registrars
- Ten Junior Doctors (providing on-call cover in combination with urology)
- Two Advanced Clinical Practitioners
- Three Physician's Associates

In addition to medical staff, the team includes an experienced team of nurses and therapists, including a clinical nurse specialist, a stoma nurse team of 4.5 WTE and an inflammatory bowel disease nurse.

There is excellent secretarial support.

### Management

Day to day managerial & operational links are with the Lead Clinician, Mr David Sanders and the Service Manager, Miss Keeley Cooper.

### Departmental Workload

On average, the general surgery workload includes:

#### Elective

New Outpatients	6819
Follow up Outpatients	7657

Elective Inpatients	470
Elective Day Cases	335

### **Emergency**

Emergency Inpatients	3456
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## **Resources**

### **Inpatient Facilities**

There are two main surgical wards (King George V and Lundy wards). Children undergoing surgery are cared for in either the Day Surgery Unit or on Caroline Thorpe children's ward, which includes the provision of 2 Paediatric HDU beds. There is a dedicated Day Case Unit.

The department has a Surgical Admissions Unit located on King George V (KGV) ward accommodating emergency surgical and Lundy ward accommodates elective patients. Private patient facilities for inpatients are available on Lundy Ward.

There is an eight-bedded Intensive Care/ High Dependency Unit. Operating sessions take place in the main theatre suite and in the dedicated Day Surgery Unit. There is a fully equipped Endoscopy Unit.

### **Outpatient Facilities**

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

- South Molton Hospital
- Bideford Hospital
- Holsworthy Hospital

## **MAIN CONDITIONS OF SERVICE**

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Appointment is to the Consultant Contract (2003). Terms and Conditions of Service for hospital medical and dental staff are those that apply nationally, but may be modified from time to time by either national or local agreement (via BMA and Local Negotiating Committee). The employer is 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.

### **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 eight thresholds. The oncall supplement is category A and attracts a supplement of 3% of basic salary..

### **Leave**

Annual leave entitlement is as described in the current Terms & Conditions of Service for Hospital Medical & Dental Staff (England).

Study leave entitlement for Consultants in the Trust is 33 days over a 3-year period.

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

### **Indemnity**

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

### **Professional Performance**

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

You will be expected to take part in personal clinical audit, training, quality assessment and other professional activities including continuing medical education. It is expected that you will participate in multi-source feedback, and participate in annual Appraisal and in Revalidation

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

### **Reporting Concerns**

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

### **Serious Untoward Incidents**

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

### **Research & Audit**

Audit is supported by the Clinical Audit & Effectiveness Department. The colo-rectal department participates in a number of national audits, including National Bowel Cancer Audit and Lower Rectal Cancer National development Programme

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

### **Safeguarding Children & Vulnerable Adults**

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

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

### **Rehabilitation of Offenders**

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

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

### **Health & Safety**

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

### **Infection Prevention & Control**

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

### **Domicile**

Consultants are expected to reside within a reasonable distance of the hospital, normally within 10 miles radius or 30 minutes. Exceptions to this rule will need to be discussed and agreed with the Medical Director / Chief Executive.

### **Canvassing**

Candidates are asked to note that canvassing of any member of the Advisory Appointments committee will disqualify them from their appointment (see Statutory Instrument 1982 No 276 paragraph 8(1)(b)). This should not deter candidates from seeking further information relevant to the post from those members of the Trust detailed, nor should it deter them from making informal visits to the Trust, which are encouraged.



## **NORTH DEVON DISTRICT HOSPITAL**

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

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

We employ more than 70 consultants on the northern site, in all major specialties. In addition, we work closely with other local hospitals/Trusts to provide combined services in smaller specialties and robust clinical networks for cancer, vascular and neonatal services. There are nine operating theatres, an accredited endoscopy suite and a new chemotherapy unit, with plans for further development.

### **Academic Facilities**

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

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

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

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

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

### **Medical School Links**

There have been recent changes to the Medical School provision in the South West. We take students from the relatively newly created Exeter Medical School. Student numbers continue to rise year on year and there are many opportunities for involvement with teaching programmes.

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There have been recent changes to the Medical School provision in the South West. We take students from the relatively newly created Exeter Medical School. Student numbers continue to rise year on year and there are many opportunities for involvement with teaching programmes.

We also sponsor Physician's Associate students from Plymouth University, who complete their second year clinical attachments at NDHT.

## NORTH DEVON

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

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

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

Lundy Island Marine Reserve and Dartmoor & Exmoor National Parks are on the doorstep. The local dune system has been awarded UNESCO World Biosphere Status and is a Site of Special Scientific Interest (SSSI). Several areas of the coast have been designated as Areas of Outstanding Natural Beauty (AONB) and are nationally protected to preserve the beauty of the landscape. Covering a total of 171km<sup>2</sup> from Marsland Mouth on the Cornish border to Combe Martin on the edge of Exmoor, these areas include the Hartland Heritage Coast, North Devon Heritage Coast and Braunton Burrows.

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

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

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

Despite the rurality of the area, commuter links are good, both by road and rail. There are regular trains to Exeter and direct services to London (two hours) and across the country from Tiverton (40-minute drive). There are easily-accessible airports at Exeter and Bristol.

## CONTACTS

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

Chief Executive	Mr Sam Higginson (01271) 311349
Medical Director	Dr Karen Davies (01271) 314109
Clinical Director for General Surgery	Mr David Sanders (01271) 322749
Subspecialty Lead for Emergency General Surgery	Ms Karin Pansell (01271) 314114
Care Group Deputy Medical Director	Dr Gareth Moncaster <a href="mailto:g.moncaster@nhs.net">g.moncaster@nhs.net</a>
Care Group Director for Surgery	Mrs Nicola DuGay (01271) 322406
Associate Care Group Director for Surgery	Mrs Lisa Drogomirecki (01271) 314041
Senior Operations Manager	Miss Keeley Cooper (01271) 335771

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